



«АККРЕДИТТЕУ ЖӘНЕ РЕЙТИНГТІҢ
ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО
АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR
ACCREDITATION AND RATING

REPORT

on the results of the work of the external expert evaluation commission
for compliance with the requirements of the international primary accreditation
standards for residency/residency programs
(based on WFME/ AMSE/ ESG)

7R01118 Therapy (primary accreditation)

7R01102 Pediatrics (primary accreditation)

7R01126 Anesthesiology and resuscitation adult, children
(initial accreditation)

7R01128 General Surgery (Primary accreditation)

7R01133 Obstetrics and Gynecology adult, children (primary accreditation)

KAZAKHSTAN'S MEDICAL UNIVERSITY "KSPH"

during the period from 24 to 26 April 2024 г.

INDEPENDENT ACCREDITATION AND RATING AGENCY
External Expert Commission

Addressed to
To the Accreditation Center
NAAR Council



«АККРЕДИТТЕУ ЖӘНЕ РЕЙТИНГТІҢ
ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО
АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR
ACCREDITATION AND RATING

report

**on the results of the work of the external expert evaluation commission
for compliance with the requirements of the international primary accreditation standards
for residency/residency programs
(based on WFME/ AMSE/ ESG)**

7R01118 Therapy (primary accreditation)

7R01102 Pediatrics (primary accreditation)

***7R01126 Anesthesiology and resuscitation adult, children
(initial accreditation)***

7R01128 General Surgery (Primary accreditation)

7R01133 Obstetrics and Gynecology adult, children (primary accreditation)

KAZAKHSTAN'S MEDICAL UNIVERSITY "KSPH"

during the period from 24 to 26 April 2024 г.

2024 year

content

(I) LIST OF SYMBOLS AND ABBREVIATIONS3

(III) INTRODUCTION.....4

(IV) REPRESENTATION OF AN EDUCATIONAL ORGANIZATION5

(V) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE6

(VI) DESCRIPTION OF THE EC SESSION.....6

(VII) COMPLIANCE WITH SPECIALIZED ACCREDITATION STANDARDS8

 6.1. *Mission and Learning Outcomes Standard*.....8

 6.22. *Educational Program Standard*13

 6.33. *Standard "Student Assessment Policy"*.....19

 6.44. *The "Learners" Standard*21

 6.55. *Academic Staff Standard/Teachers"*.....25

 6.77. *Educational Program Assessment Standard*32

 6.88. *Management and Administration Standard*35

(VIII) OVERVIEW QUALITY IMPROVEMENT RECOMMENDATIONS FOR EACH STANDARD.....40

(IX) OVERVIEW RECOMMENDATIONS FOR THE DEVELOPMENT OF AN EDUCATIONAL ORGANIZATION.....44

(X) RECOMMENDATION TO THE ACCREDITATION COUNCIL44

Appendix 1. Evaluation table "Conclusion of the external Expert Commission"45



(I) LIST OF SYMBOLS AND ABBREVIATIONS

| | |
|------------|--|
| AD | Administrative Department |
| AP | Academic Policy |
| BSR | Basic subjects required |
| University | Higher educational institution |
| SAC | State Attestation Commission |
| SMSE | State Mandatory Standard of Education |
| RN | Registration Number |
| DPE | Department of Postgraduate Education |
| DSDQMS | Department of Strategic Development and Quality Management System |
| DEF | Department of Economics and Finance |
| DSK | Department of Science and Consulting |
| CB | Clinical base |
| CMT | Control and measurement tools |
| CT | Comprehensive testing |
| CED | Catalog of elective disciplines |
| CE | Comprehensive exam |
| MHRK | Ministry of Health of the Republic of Kazakhstan |
| MSHERK | Ministry of Science and Higher Education of the Republic of Kazakhstan |
| SC | Scientific Council |
| NTRP | Scientific and Technical Research Program |
| RW | & D Research work |
| OHPE | Organization of higher and postgraduate education |
| MC | Mandatory component |
| EP | Educational program |
| OSCE | Objective structured clinical examination |
| TS | of teaching staff |
| MASS MEDIA | Mass media |
| CYS | Council of Young Scientists |
| CYSC | Council of Young Scientists and Clinicians |
| LLP KMU | |
| “KSPH” | Limited Liability Company Kazakhstan’s Medical University “KSPH” |
| SC | Standard curricula |
| AC | Academic Council |
| EMC | Educational and Methodological Council |
| ECD | Educational and Clinical Department |
| EDS | Electronic digital signature |
| CBL | Challenge Based Learning |
| GPA | Grade Point Average |
| PhD | Doctor of Philosophy |
| TBL | Team Based Learning |
| PBL | Problem Based Learning |

(II) introduction

In accordance with Order No. 59-24-OD of February 5, 2024 of the Independent Accreditation and Rating Agency, from April 24 to April 26, 2024, an external expert commission evaluated the compliance of educational programs 7R01118 Therapy (primary accreditation), 7R01102 Pediatrics (primary accreditation), 7R01126 Anesthesiology and Resuscitation adult, children (primary accreditation), 7R01128 General Surgery (primary accreditation), 7R01133 Obstetrics and Gynecology adult, Children (primary accreditation) of the Kazakhstan's Medical University "KSPH" to the standards for international primary accreditation of residency programs (based on WFME/ AMSE/ ESG) No. 150-22-OD dated December 21, 2022, third edition.

The report of the External Expert Commission (EC) contains an assessment of the submitted educational programs to the NAAR criteria, recommendations of the EC for further improvement of educational programs, and parameters of the profile of educational programs.

The composition of the HEC:

1) **Chairman of the IAAR Commission IAAR** - Dosmagambetova Raushan Sultanovna, MD, Professor, Karaganda Medical University (Republic of Kazakhstan) *Off-line participation*

2) **IAAR Expert** - Moroz Irina N., First Vice-Rector, Doctor of Medical Sciences, Professor, Belarusian State Medical University (Republic of Belarus) *Off-line participation*

3) **IAAR expert** - Sydykova Saule, Candidate of Medical Sciences, Associate Professor, Chairman of the IAAR Expert Council, Head of the Department of Coordination of activities of the EMC of the training area "Healthcare", S. D. Asfendiyarov Kazakh National Medical University (Republic of Kazakhstan) *Off-line participation*

4) **IAAR expert** - Omarkulov Bauyrzhan Kadenovich, PhD, Associate Professor, Karaganda State Medical University (Republic of Kazakhstan) *Off-line participation*

5) **IAAR expert** - Kurmangaliyev Kairat Bolatovich, NJSC "Marat Ospanov West Kazakhstan Medical University" (Republic of Kazakhstan) *Off-line participation*

6) **IAAR expert** - Kulbayeva Saltanat, PhD, Associate Professor, Head of the Department of Obstetrics and Gynecology of the JSC South Kazakhstan Medical Academy (Republic of Kazakhstan) *Off-line participation*

7) **Expert IAAR, employer** - Asenkyzy Asen Aigul, PhD, Director of RSE ON PCV «City Polyclinic No. 7» (Republic of Kazakhstan) *Off-line participation*

8) **Expert IAAR, student** - Kaziyeva Aigerim, 2nd year resident of EP "General Surgery", S. D. Asfendiyarov Kazakh National Medical University (Republic of Kazakhstan) *Off-line participation*

9) **IAAR Coordinator** - Saidulayeva Malika, Project Manager of the Independent Accreditation and Rating Agency (Republic of Kazakhstan) *Off-line participation*

(III) REPRESENTATION OF AN EDUCATIONAL ORGANIZATION

LLP Kazakhstan's Medical University "KSPH" (hereinafter – LLP KMU "KSPH") was founded in 1997 (Resolution of the Government of the Republic of Kazakhstan No. 1142 dated 21.07.1997) on the basis of the Kazakhstan School of Public Health.

KZ18LAA00006861 dated 21.04.2016, appendix to the license for engaging in educational activities – Postgraduate education (7R011 – Healthcare), the date of issue of the application is 26.12.2023.

LLP KMU “KSPH” is accredited by the Ministry of Education and Science of the Republic of Kazakhstan as a subject of scientific and (or) scientific and technical activities (certificate of accreditation: MK series No. 006347 December 15, 2020)

Educational residency programs at LLP KMU "KSPH" will be implemented in accordance with the license for the right to carry out educational activities No. KZ18LAA00006861 dated 21.04.2016 (unlimited), appendix to the license (link: [License for Educational Activities and Appendix to the license \(Healthcare\)](#)), as well as accreditation certificates: IA Institutional accreditation No. 00035 from 25.05.2021-24.05.2026 (reference:[Institutional accreditation](#)), Specialized accreditation SA No. 00058-63 from 25.05.2021 - 24.05.2026. (reference:[Specialized Accreditation](#)) and the Strategic Development Plan of LLP KMU "KSPH" for 2020-2025. (No. 1 of the Academic Council meeting dated 27.02.2020).

Self -assessment was carried out on the basis of Order No. 31-N of March 05, 2024 "On the creation of a working group" within the framework of specialized primary accreditation of residency programs (self-assessment reports).

Образовательные Educational residency programs планируется are planned to be implemented from 01.09.2024. The form of study is full time. Persons who have a basic medical education, higher medical education in the specialty "General Medicine", "Medical Science", "Pediatrics", and an internship are allowed to master residency programs.

As a result of mastering the educationalных programs of the residency program, the graduate should develop general and professional competencies. Graduates of the EP have the opportunity to work in multidisciplinary clinics for adults and in specialized centers, in polyclinics, as well as continue their studies in the doctoral program (PhD), get additional professional education.

The university has created an infrastructure that includes an academic building with classrooms (lecture halls, computer rooms), a library, an educational and clinical center, a dormitory, a sports complex, a medical center, a food point, and 52 clinical bases of health care institutions, including 4 health care institutions for the implementation of the EP residency in therapy (state-owned state enterprise with the right of economic management" City Hospital City Polyclinic No. 17 " Department of public health of Almaty, state-owned state enterprise with the right of economic management "Central City Clinical Hospital", LLP "Keruen-Medicus"), with which contracts are concluded on the organization of practical training of students (report, documents, interviews).

When conducting interviews, it was revealed that the Department of "Therapy" lacks projects, scientific programs, research grants performed by teaching staff, including jointly with foreign partners.

(IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

International specialized accreditation EP 7R01118 Therapy (primary accreditation), 7R01102 Pediatrics (primary accreditation), 7R01126 Anesthesiology and resuscitation adult, children (primary accreditation), 7R01128 General Surgery (primary accreditation), 7R01133 Obstetrics and Gynecology adult, children (primary accreditation) of LLP KMU "KSPH" according to IAAR standards is held for the first time.

(V) DESCRIPTION OF THE EC SESSION

The work of the external expert commission was carried out on the basis of the approved Visit Program of the Expert Commission for specialized accreditation of educational programs of the Kazakhstan's Medical University "KSPH" in the period from April 24 to 26, 2024.

In order to coordinate the work of the HEC, an on-line installation meeting was held on 19.04.2024, during which powers were distributed among the commission members, the visit schedule was clarified, and agreement was reached on the choice of examination methods.

To obtain objective information about the quality of educational programs and the entire infrastructure of the university, to clarify the content of self-assessment reports, meetings were held with the rector, vice-rectors of the university in the areas of activity, heads of structural divisions, heads of departments, teachers. A total of 48 representatives of the Higher School of Economics took part in the meetings.

In the course of the work of the KMU "KSPH", a visual inspection of the university's infrastructure was carried out: classrooms (computer and lecture halls), 2 named classrooms (Bekmakhanov Kuralbay; Asval), a library, simulation laboratories No. 1 and No. 2 (educational and clinical center), a medical center, a canteen, and a hostel. The documentation at the university departments was also studied.

Practical training bases and departments were visited:

- * Central City Clinical Hospital, Department of Internal Diseases-Head of the Department Sultanova Tursun Zhakenovna. During the conversation with the doctors of the departments, positive feedback was received about the teaching staff and students of the department.

- * LLP Keruen-Medicus, Department of Surgical Diseases-Head of the Department Zharmenov Samat Madikhanovich, Head of the course of Obstetrics and Gynecology Kaliyeva Lira Gabbasovna.

- "Children's City Clinical Hospital No. 2, Department of Anesthesiology, resuscitation and intensive care, head of the course of anesthesiology and resuscitation-Berdiyeva Gulbanu Sansyrbayevna, interview of the deputy chief physician of the State Clinical Hospital No. 2 Asanova N. O. showed that "Children's City Clinical Hospital No. 2" is a multidisciplinary hospital (the hospital has a capacity of 240 beds), which provides various types of medical care to the children's population. The Department of Anesthesiology, Resuscitation and Intensive Care of the State Enterprise "Children's City Clinical Hospital No. 2" is equipped with modern equipment, headed by Sholakhov Zhandos Zhanbyrbayevich (doctor of the highest qualification category), effective interaction is carried out between the teaching staff of LLP KMU "KSPH" and hospital employees.

When visiting the above-mentioned clinical bases, the experts got acquainted with the material and technical base of the Ministry of Defense, visited the administrative building, specialized departments where residents will be trained. The EEC members noted that a close relationship has been established between the university and medical organizations. Social partnership in the field of medical education is aimed at bringing the level of training of medical personnel closer to the needs of employers. In order to strengthen and develop social partnership with medical organizations and the university, joint work is being carried out to train qualified specialists with subsequent orientation for training in residency.

According to the program of the visit, classes were not held in accredited educational institutions according to the approved schedule.

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

In accordance with the accreditation procedure, 19 teachers were interviewed, EP 7R01118 Therapy (primary accreditation), 7R01102 Pediatrics (primary accreditation), 7R01126 Anesthesiology and Resuscitation adult, children (primary accreditation), 7R01128 General Surgery (primary accreditation), 7R01133 Obstetrics and Gynecology adult, children (primary accreditation).

In order to confirm the information provided in the Self-assessment Report, external experts requested and analyzed the university's working documentation. Along with this, the experts studied the Internet positioning of the university through the official website of the university <https://ksph.edu.kz/>.

Within the framework of the planned program, recommendations for improving the accredited educational programs of the Kazakhstan Medical University "HSE", developed by the HEC based on the results of the expert examination, were presented at a meeting with the management on 26.04.2024.

Table 1-Information about employees and trainees who participated in meetings with the IAAR HEC:

| Category of participants | Number |
|---------------------------------|---------------|
| Rector | 1 |
| Vice-rectors | 3 |
| Heads of structural divisions | 9 |
| Deans | 2 * |
| Heads of departments | 5 |
| Teachers | 28 |
| Total | 48 |

Note: * - heads of structural divisions

(VI) COMPLIANCE WITH SPECIALIZED ACCREDITATION STANDARDS

6.1. Mission and Learning Outcomes Standard

- ✓ Defining a mission
- ✓ An educational organization must:
 - ✓ define the mission of the Post-graduate Medical Education OP and communicate it to stakeholders and the health sector.
 - ✓ determine the mission based on the health needs of society, the needs of the health care system, and other aspects of social responsibility.
 - ✓ define a training program that includes theoretical and practical components with an emphasis on the latter, and the result of which will be a doctor:
 - ✓ competent in the chosen field of medicine, including good medical practice,
 - ✓ able to work independently at a high professional level,
 - ✓ able to work in a professional and interprofessional team,
 - ✓ ready for lifelong learning and participation in continuing medical education /professional development,
 - ✓ able to provide appropriate patient care that is appropriate, effective, compassionate and safe in addressing health problems and health promotion issues, including a patient-centered and systematic approach.
 - ✓ provide readiness to provide appropriate working conditions for students to maintain their health.
 - ✓ ensure that the mission includes the development of innovations in the educational process that allow for the development of broader and more specialized competencies than those defined within the core competencies required; the development of scientific competence of students so that doctors can conduct research in their chosen field of medicine; opportunities for doctors to become active participants in solving issues related to social determinants of health.
- ✓ Professionalism and professional autonomy
 - ✓ An educational organization must:
 - ✓ include professionalism in the training of physicians and ensure that training promotes professional autonomy to enable them to act in the best interests of the patient and society in the future.
 - ✓ provide for cooperation with the Government and other partners, while maintaining appropriate independence from them.
 - ✓ Learning outcomes
 - ✓ An educational organization must:
 - ✓ determine the expected learning outcomes that students should achieve upon completion of their studies in relation to their post-graduate achievements in terms of knowledge, skills and behaviors/attitudes, the appropriate foundation for future careers in the chosen medical field, their future roles in the health sector, commitment and skills in implementing continuing education, the health needs of society, the needs of the health system, and other aspects of social responsibility, professional behavior.
 - ✓ identify and publish expected learning outcomes: general and specialty-specific, which students need to achieve.
 - ✓ demonstrate evidence of students' willingness to ensure appropriate behavior in relation to fellow students, teachers, medical staff, patients and their relatives.
 - ✓ determine the expected learning outcomes based on the results obtained at the level of basic medical education to ensure interaction between basic and postgraduate medical education.
 - ✓ provide for the possibility of students' participation in research in the relevant field of healthcare.
 - ✓ Participation in the formulation of the mission and learning outcomes
 - ✓ An educational organization must:
 - ✓ ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes
 - ✓ ensure that the stated mission and expected learning outcomes are based on the opinions/suggestions of other stakeholders.

Proof part

The vision, mission and development strategy of LLP KMU "KSPH" are consistent with each other, adequate to the available resources, meet the needs and expectations of society, and the educational policy of the Republic of Kazakhstan.

The University defined the mission of educational programs in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children", which was discussed at the meetings of the Departments of Internal Diseases, surgical diseases, collegial bodies of LLP KMU "KSPH" with the participation of representatives of practical healthcare, the Employers' Council (link: Minutes of the Meeting of the Employers' Council dated 11.07.2023), the Educational and Methodological Council (link: Minutes of the Meeting of the Educational and Methodological Council dated 20.04.2023) and approved at the meeting of the Academic Council (link: Minutes of the Meeting of the Academic Council dated 27.04.2023).

The mission of educational programs in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children", is formulated in accordance with the requirements of state educational standards, the needs of the state and the market: <https://adilet.zan.kz/rus/docs/P2200000945> , <https://adilet.zan.kz/rus/docs/V2200028716> , Strategic development plan of LLP KMU "KSPH" (reference: Strategic Development Plan of LLP KMU "KSPH"), requests from employers and is based on the study of problematic issues of public health.

The developed educational programs in the specialties 7R01118 "Therapy", 7R01102

"Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children", ensure the formation of the necessary competencies among residents based on the integration of theoretical and practical components; it is aimed at training specialists those who are able to meet the needs of society in the provision of medical care, apply and develop advanced innovative technologies in practice and science, use the achievements of information and communication technologies, and strengthen the health of the population. The EP contains requirements for the level of training of graduates of the residency program, in accordance with national regulatory documents and local LLP KMU "KSPH"(Academic policy of LLP KMU "KSPH"; Rules of admission to the residency program).

The Employers ' Council operates in LLP KMU "KSPH", which provides interaction with organizations of practical health care and employers (link: <https://ksph.edu.kz/kruglyj-stol-integracija-obrazovani/>) for the development and revision of the EP.

There is a mechanism for systematic review of the EP once a year, which will be carried out through monitoring and analysis of activities, as well as the activity of other various organizations in the field of quality management of various fields of activity and business processes of the university. Open the rector's blog (link: https://ksph.edu.kz/rector_blog/), a helpline, or a trust box (documents, interviews).

LLP KMU "KSPH" has a material and technical base for students to master EP residency: classrooms, a library, an educational and clinical center, dormitories, a sports complex, a medical center, a food point). Agreements were concluded with healthcare institutions on joint activities for the implementation of the EP.

A visit to the clinical bases of departments showed a high interest of practical healthcare managers in joint activities, including providing classrooms, space; providing access to equipment and patients, which is one of the strengths of educational activities in the implementation of educational programs in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult 7R01128 "General surgery", 7R01133" Obstetrics and Gynecology adult, children", and meets the criteria of the NAAR standard (List of contracts with Clinical Databases of LLP KMU "KSPH", interview).

The university provides that innovative teaching methods will be used in the educational process: problem-based learning (PBL), team-based learning (TBL), training on clinical cases (CBL), standardized patient, clinical scenarios; simulation technologies (interviews, visits to the training and clinical center). Practical training will be provided by clinical mentors in accordance with the "Regulations on Clinical Mentors" on the bases of departments of healthcare institutions (link: Regulations on Clinical Mentors).

The main final results of a resident's training are defined in the EP of the residency in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children", developed within the framework of the State Educational Standard. The information is available on the website of LLP KMU "KSPH".

The University guarantees continuity between the final results of training programs of basic and postgraduate medical education, through the choice of a learning path that allows students to master the necessary in-depth knowledge, practical skills and abilities in the chosen specialty, readiness for professional self-improvement throughout life.

LLP KMU "KSPH" has developed local documents regulating ensuring proper behavior of students in relation to teachers, medical workers, classmates, patients and their relatives: the Code of Honor for Students and Teachers of LLP KMU "KSPH" (hereinafter referred to as the Code), the Academic Policy of LLP KMU "KSPH"). The procedure of responsibility for proper training conditions for residents in clinical bases is reflected in joint activity agreements with medical organizations. At the same time, there is no section in the local documents of LLP KMU "KSPH" regulating the proper behavior of residents when mastering OP in the specialty of residency. The formation of an anti-corruption culture at the university is implemented in accordance with the document "Anti-Corruption Policy" (Anti-Corruption Policy).

When conducting interviews, the EEC members noted that the University has a Department of Science and Consulting (hereinafter referred to as DNA), a library, a local ethics commission, and publishes a scientific and practical journal to support teaching staff and students in organizing scientific research, help in publishing scientific results in leading domestic and foreign publications, and promote the commercialization of scientific results. "Medicine, Science and Education"; organized a Council of young scientists, designed to promote the development of the potential of scientific youth, search for grant support; developed a Regulation on the Council of Young Scientists.

LLP KMU "KSPH" provides an opportunity for residents to participate in research in the relevant field of healthcare by involving them in research projects; organizing training in scientific foundations and methods used in the field of specialization, as well as evidence-based medicine, ensuring access for each resident to databases, library collections and electronic resources formed according to the full list disciplines of the main educational program, the Internet; annual publications and reports at conferences of young scientists.

At the same time, the EEC experts noted that when interviewing and analyzing documents at departments and courses, there are no approved research topics necessary for implementing the residency program in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and Resuscitation for adults and children", 7R01128 "General Surgery", 7R01133 " Obstetrics and Gynecology adult, children's", which does not meet the criteria of the NAAR standard.

LLP KMU "KSPH" guarantees the participation of all interested parties (university administration and departments, teachers, representatives of professional communities, students) in determining the Mission of the OP and the final results of training, by including them in the composition of collegial advisory bodies, EMC, AC, etc.

LLP KMU "KSPH" provides representation of employees, students and other interested parties in the planning of EP. The working groups on the formation of the EP include heads of departments and courses, professors, associate professors, teachers of departments that provide the educational process, leading specialists in practical healthcare, employers, and representatives of the student body. The composition of the working group is approved by the rector of LLP KMU "KSPH" (link: Order "On the creation of project teams for the development of EP").

LLP KMU "KSPH" guarantees free access to regulatory documentation (state standards, Regulations approved at the university level) and educational and methodological documentation (EMC), library resources, and the Platonus educational portal. Students will have the opportunity to get acquainted with the Regulations governing the educational process in the residency program, get a teacher's consultation, and choose elective subjects (interviews, documents).

When developing the EP, the needs of stakeholders, in particular, employers, are taken into account. Monitoring of employers' needs in LLP KMU "KSPH" is carried out during the organization of the "Open Day" event, meetings of the university management with the heads of medical organizations (link: <https://ksph.edu.kz/den-otkrytyh-dverej-4/>); in the annual survey of employers conducted by the Department of Strategic Development and QMS (link: Employer satisfaction analysis).

Analytical part

The analysis of the university's compliance with the criteria of this Standard generally indicates the responsibility of the management of LLP KMU "KSPH" in understanding the importance of clear strategic planning in achieving the goals and objectives set, the presence of a Development Strategy in this organization, the corresponding mission and vision (reference: Strategic Development Plan of LLP KMU "KSPH").

LLP KMU "KSPH" has institutional autonomy in the selection and placement of personnel, implementation of educational, scientific, financial, economic and other activities in accordance with the legislation and the Charter approved in accordance with the procedure established by law and at the Academic Council.

LLP KMU “KSPH” has "institutional autonomy" with effective interaction/cooperation with healthcare management bodies, heads of healthcare institutions of various forms of ownership, executive authorities and other partners, due to the availability of professional human resources, and is accompanied by the provision of clinical facilities and equipment, ensuring access to patients, which is a strong point for the implementation of the educational process. It meets the criteria of the NAAR standard (interviews, database visits, documents).

The work on development of research projects necessary for the development of scientific competencies of students in conducting research within the framework of the implementation of the residency program in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation for adults and children", 7R01128 "General Surgery", 7R01133 "Obstetrics and gynecology for adults and children".

Thus, the analysis of documents, interviews with heads of structural divisions, heads of educational programs and teaching staff showed the absence of approved scientific projects within the framework of the implementation of the residency program, which limits the academic freedom of students to develop scientific competencies and does not meet the criteria of the NAAR standard and requires improvement.

The analysis of the participation of stakeholders (teaching staff, employers, representatives of practical healthcare) in the formulation of the mission and expected learning outcomes showed their low awareness of this process, does not ensure the involvement of all participants in the educational process in the development and updating of the Mission of LLP KMU “KSPH” and the Mission of the EP, which is largely due to insufficient work on promotion and Popularization of the Mission of LLP KMU “KSPH” and the Mission of the EP residency in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children". At the same time, the EEC members note that some shortcomings, heads of structural divisions and teaching staff found it difficult to clearly reproduce the mission of the EP during interviews with EEC members and give specific examples of what exactly their personal participation in the development of the EP mission was.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

The institutional autonomy of LLP KMU “KSPH” and constructive interaction with the healthcare sector of the region and Almaty, executive authorities and other partners, the availability of step-by-step and professional human resources is a strong point in the implementation of the residency program in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General surgery", 7R01133 "Obstetrics and gynecology adult, children".

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The Vice-rector for Clinical Activities, the Vice-rector for Academic and Scientific Activities, together with the heads of clinical departments and courses, develop and approve research projects with various sources of funding necessary for the development of scientific competencies of students in conducting research within the framework of the residency program in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 " Anesthesiology and resuscitation adult, children", 7R01128 "General surgery", 7R01133 "Obstetrics and gynecology adult, children". The deadline for execution is December 2024, then permanently.

2. The Vice-rector for Clinical Activities, the Vice-rector for Academic and scientific activities, together with the heads of clinical departments and courses, should ensure the procedure for attracting students to participate in scientific research within the framework of the EP residency

program in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General surgery", 7R01133 "Obstetrics and gynecology for adults and children". The deadline for execution is December 2024, then permanently.

3. The Vice-Rector for Clinical Activities, together with the heads of structural divisions, should develop regulatory documents related to ensuring the proper behavior of students in the EP of the residency program in the following specialties: 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 " Obstetrics and Gynecology adult, children". The deadline for execution is September 2024, then permanently.

4. The Vice-Rector for Clinical Affairs, together with the heads of clinical departments and courses, should ensure that stakeholders are informed and involved in the formulation of the mission and expected learning outcomes. The deadline for execution is September 2024, then permanently.

5. The Vice-Rector for Clinical Activities, together with the heads of clinical departments and courses, should develop and implement an algorithm to ensure that the stated Mission of the residency program in accredited specialties and the expected results are based on the opinion/proposal of other interested parties. Due in September 2024.

EEC conclusions on criteria: about the standard "Mission and learning outcomes"

EP "7R01118 Therapy" 1-strong, 1 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01102 Pediatrics" 1-strong, 1 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 1-strong, 1 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01128 General surgery" 1-strong, 12 - satisfactory, 1 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01133 Obstetrics and Gynecology adult, children" 1-strong, 1 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

6.22. Educational Program Standard

- ✓ Approach to learning
- ✓ An educational organization must:
 - ✓ determine the approach to training based on expected learning outcomes and official certificates of qualification provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level.
 - ✓ determine the approach to training based on the results of basic medical education, systematically and transparently, using practice-oriented training that includes and supports personal participation of the student in providing medical care and responsibility for the patient, their own educational process and clinical practice.
 - ✓ demonstrate evidence of readiness to ensure that appropriate teaching methods are used that integrate practical and theoretical components, guide the learner through mentoring and regular assessment and feedback, including adherence to ethical requirements and norms.
 - ✓ demonstrate evidence of readiness to ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, the rights and obligations of students.
 - ✓ increase the degree of independence and responsibility of the student as they improve their knowledge, skills, and experience.
 - ✓ provide an opportunity to identify gender, cultural and religious characteristics and properly prepare the student to interact with the specified patient population.
- ✓ The scientific method
 - ✓ An educational organization must:
 - ✓ throughout the entire training program, teach students the principles of scientific methodology, including methods of analytical and critical thinking; research methods in healthcare and evidence-based medicine.
 - ✓ aim to include critical evaluation of literature and scientific data, adapt content based on scientific developments in medicine, change the OP, taking into account the achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the health system.
 - ✓ Training content
 - ✓ An educational organization must:
 - ✓ include the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decisions, communication skills, medical ethics, public health, medical law and forensic medicine, management disciplines, patient safety, physician protection, and complementary medicine in the learning process.
 - ✓ organize an educational program with an appropriate focus on patient safety and independence
 - ✓ demonstrate evidence of readiness to provide adjustments and changes to the EP to ensure the development of knowledge, skills and thinking of different roles of the graduate, matching the content of the EP to changing conditions and needs of society and the health system.
 - ✓ Structure of the educational program, content and duration
 - ✓ An educational organization must:
 - ✓ provide a description of the content, scope and sequence of courses and duration of the EP; identify mandatory and selective components; integrate practice and theory in the learning process; ensure compliance with national legislation that should be presented and described; ensure adequate impact on how local, national or regional health systems address health issues and health care needs. assistance to the population.
 - ✓ take into account the results of previous basic medical education related to the chosen field of medicine.
 - ✓ identify graduate requirements for various roles in the healthcare system
 - ✓ Organization of training
 - ✓ An educational organization must:
 - ✓ define responsibilities and authorities for organizing, coordinating, managing, and evaluating the individual learning environment and learning process.
 - ✓ ensure that adequate representation from teaching staff, students, and other key and relevant stakeholders is included in the planning and development of the educational program.
 - ✓ plan training in such a way as to introduce the student to a wide range of existing practical experience in the chosen field of medicine.
 - ✓ guarantee diverse training locations, coordinate multiple training locations to gain appropriate access to different aspects of the chosen field of medicine.
 - ✓ Linking education, medical practice, and the healthcare system
 - ✓ An educational organization must:
 - ✓ provide and ensure integration between theoretical training and professional development, develop training through medical practice and professional development; integrate training and medical practice through patient care; ensure that training complements and addresses the needs of medical care.
 - ✓ effectively use the capabilities of the healthcare system to provide medical care for training purposes.

Proof part

LLP KMU “KSPH” has developed regulations and rules that determine the procedure and organization of training specialists in residency, in the context of clinical specialties at clinical departments: "Academic policy of LLP KMU “KSPH” (link: Academic Policy of LLP KMU “KSPH”, Rules for developing educational programs of LLP KMU “KSPH” (link: Rules developments of EP LLP KMU “KSPH”).

The list of AP competencies corresponds to the approved Classifier of specialties of higher and postgraduate education of the Republic of Kazakhstan, in accordance with the National Qualifications Framework, professional standards.

At the LLP KMU “KSPH”, the residency program is implemented in accordance with the principles of equality, informing students about the program, the rights and obligations of students, which is confirmed by local documents (Academic policy of LLP KMU “KSPH”).

Implementation of the EP residency in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General

Surgery", 7R01133 "Obstetrics and Gynecology adult, children" will be carried out in full-time. According to the order of the Ministry of Health of the Republic of Kazakhstan dated July 04, 2022 No. KR DSM-63 "On approval of state mandatory standards for levels of education in the field of healthcare", the educational program for 2-year training includes 140 credits, of which 130 are a mandatory component, 4 credits are an elective component and 2 credits are final certification.

The educational program for 3-year training includes 210 credits, of which 194 are mandatory, 4 credits are optional and 2 credits are final certification. The educational program for 4-year training includes 280 credits, of which 258 are a mandatory component, 4 credits are an elective component, and 2 credits are final certification. According to the State Budget of the Republic of Kazakhstan-2022, WEPs have been developed, which reflect the general structure, composition and duration of the EP.

The EP includes classroom work, independent work under the guidance of a clinical mentor (hereinafter referred to as the IWM), and the actual independent work of a resident (hereinafter referred to as the IRR). In the EP, the volume of classroom work is planned to be 10% of the volume of each discipline, independent work under the guidance of a clinical mentor-75%, SWR-15%. It should be noted that the planned amount of classroom work (10%) does not meet the requirements and requires adjustment. Analysis of documents, interviews with teaching staff showed that no educational and methodological documentation was developed for the implementation of EP residency in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children" (there are no methodological recommendations for The educational platform "Moodle" does not contain the information necessary for mastering the EP), which does not meet the criteria of the NAAR standard and requires improvement.

The formation of responsibility that increases the degree of independence of students in the implementation of EP in accordance with the State Educational Standard MHRK and WEP is provided by mastering the profile disciplines of the mandatory component and the component of choice, working with a teacher (10%), performing independent work (90% of the IWM and SWR): IWM (with a clinical mentor) - 75% and SWR -15% hours, as well as free access to independent work in primary health care organizations for 0.5 rates as a doctor, if you have a certificate. At the same time, HEC experts, when conducting interviews with interested parties, revealed that an algorithm has not been defined that ensures the implementation of an approach to training based on the results of basic medical education, systematically and transparently, using practice-oriented training that includes and supports the student's personal participation in providing medical care and responsibility for the patient, their own educational process and clinical practice.

Also, the interview notes the low level of awareness of heads of structural divisions and teaching staff about the algorithm that ensures the implementation of an approach to training based on the results of basic medical education, systematically and transparently, practice-oriented training, including and supporting the student's personal participation in providing medical care and responsibility for the patient, their own educational process and clinical practice, does not meet the criteria of the NAAR standard.

In the course of implementing the EP, LLP KMU "KSPH" provides for the introduction of new forms and methods of teaching into the educational process, means of activating cognitive activity: seminars at the junction of related disciplines, practical exercises based on a clinical case (CBL), team-oriented training (TBL), problem-oriented training (PBL), the use of situational approaches to the development of tasks in practical classes, simulation technologies. However, the interview of teaching staff showed a low level of their awareness of modern teaching methods, which does not meet the criteria of the NAAR standard (interview).

Updating and correction of the educational program is planned to be carried out annually based on the inclusion of elective subjects of the elective component in the working curriculum for EP 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126" Anesthesiology and resuscitation

adult, children", 7R01128" General Surgery", 7R01133"Obstetrics and Gynecology adult, children". Changes and additions to syllabuses and kissas are also planned to be made annually in the core disciplines of the mandatory component and elective component, based on scientific achievements, changing conditions and needs of healthcare and society (reference: Rules for the development of EP LLP KMU "KSPH"). At the same time, to ensure an individual learning path, it is necessary to develop a "Catalog of elective disciplines", expanding the list of offered disciplines.

The University has identified clinical bases where students can get access to patients in their profile of the educational residency program at all levels of medical care and consolidate practical skills in performing clinical work: "Children's City Clinical Hospital No. 2", "Central City Clinical Hospital", " Center children's emergency medical care", "City Emergency Hospital". Clinical work of residents during training at clinical bases will be conducted under the guidance of advisors and clinical mentors. Resident advisors will be appointed from among the teaching staff of departments (departments) who have the academic degree of doctor, Candidate of Medical Sciences, PhD, as well as the highest or first qualification category, are actively engaged in scientific and practical activities in this industry, and carry out training in residency. The list of practical skills mastered by the resident will be recorded in the resident's Portfolio during the entire training period. At the same time, the list of clinical mentors who will implement the EP in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children has not been formed.

It is planned to implement a three-level training program at LLP KMU "KSPH", which includes clinical training-OM-residency – PhD, as well as scientific and pedagogical direction-bachelor's degree – master's degree – PhD. Each resident will be engaged in scientific activities under the scientific supervision of a clinical mentor/assistant of a specialized department Within the framework of the IWM to master the topic of disciplines, residents will plan to perform tasks in the form of a scientific project, draw up individual programs for diagnosis, treatment, rehabilitation for various diseases in accordance with clinical protocols and principles of evidence-based medicine.

The experts of the LLP KMU "KSPH" revealed the lack of approved research topics necessary for the development of students' scientific competencies, which would allow them to implement the principles of scientific methodology, including methods of analytical and critical thinking, research methods in healthcare and evidence-based medicine, which does not meet the criteria of the NAAR standard.

The University is responsible for organizing, coordinating, managing and evaluating the individual educational environment in the following structures: the teaching and clinical department (whose functions are to conduct final certification, draw up employment contracts for graduates, etc.); clinical departments and courses responsible for accredited residency programs (department head, course head and teaching staff, among which an adviser is appointed); Registrar's office (registration of all academic achievements of students). Conclusion and registration of contracts with clinical databases is carried out by a lawyer of LLP KMU "KSPH". However, interviews with heads of structural divisions and teaching staff showed a low level of their awareness of the organization, coordination, management and evaluation of the individual educational environment, which does not meet the criteria of the NAAR standard.

LLP KMU "KSPH" guarantees the participation of all interested parties (university administration and departments, teachers, employers, representatives of professional communities, students) in determining the mission and final results of training, planning and developing the EP by including them in the composition of collegial advisory bodies, EMC, AC, etc. (link: Order on the creation of project teams for the development of EP).

However, interviews with supervisors and teaching staff showed that they did not plan to include students studying in the specialty residency program in the composition of collegial bodies.

Analytical part

During the visit, the EEC members conducted a detailed analysis of accredited medical schools in the specialties of residency 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation for adults, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology for adults, children" for compliance with the requirements of the modern education market, principles and methods of organizing the educational process. research and educational processes focused on meeting the interests of students and all participants in the educational process of the EP.

LLP KMU "KSPH" has developed regulations and rules that determine the procedure and organization of training specialists in residency, in the context of clinical specialties at clinical departments: "Academic policy of LLP KMU "KSPH" (link: Academic Policy of LLP KMU "KSPH", Rules for developing educational programs of LLP KMU "KSPH" (link: Rules developments of EP LLP KMU "KSPH").

The formation of responsibility that increases the degree of independence of students in the implementation of EP in accordance with the State Educational Standard MHRK and WEP is provided by mastering the profile disciplines of the mandatory component and the component of choice, working with a teacher (10%), performing independent work (90% of the IWR and SWR): IWM (with a clinical mentor) - 75% and IWM-15% hours, as well as free access to independent work in primary health care organizations for 0.5 rates as a doctor, if you have a certificate.

The planned amount of classroom work (10%) does not meet the requirements and requires adjustment. Analysis of documents and interviews with teaching staff showed that no educational and methodological documentation has been developed for the implementation of the OP residency in the specialty 7R01126 "Anesthesiology and resuscitation for adults and children" (there are no methodological recommendations on the topics of classes, the educational platform "Moodle" does not contain information necessary for mastering the EP), which does not meet the criteria of the NAAR standard and requires improvements.

There is a low level of awareness of the heads of structural divisions and teaching staff about the algorithm that ensures the introduction of an approach to training based on the results of basic medical education, systematically and transparently, practice-oriented training, including and supporting the student's personal participation in providing medical care and responsibility for the patient, their own educational process and clinical practice, which the NAAR standard (interview).

An interview with the heads of structural divisions, heads of EP and teaching staff showed that the list of clinical mentors who will implement EP in the specialties of residency 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 " Obstetrics and Gynecology adult, children", will ensure the implementation and use of training methods based on the integration of practical and theoretical components using a system of mentoring, regular evaluation and feedback, including adherence to ethical requirements and norms that do not meet the criteria of the NAAR standard.

Departments and courses responsible for accredited EP residencies do not have approved research topics that are necessary for developing students' scientific competencies and would allow them to implement the principles of scientific methodology, including methods of analytical and critical thinking; research methods in healthcare and evidence-based medicine, which does not meet the criteria of the NAAR standard.

Updating and correction of the educational program is planned to be carried out annually based on the inclusion of elective subjects of the elective component in the working curriculum in the specialties 7R01118 "Therapy", 7R01102" Pediatrics", 7R01126" Anesthesiology and resuscitation adult, children", 7R01128" General Surgery", 7R01133"Obstetrics and Gynecology adult, children". However, the proposed list of elective subjects is not sufficient to provide an individual training trajectory in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children", which does not meet the criteria of the NAAR standard.

The analysis of interviews with heads of structural divisions, heads of educational institutions and teaching staff showed a low level of their awareness about the organization, coordination, management and evaluation of the individual learning environment and the educational process in the implementation of the EP, which does not meet the criteria of the NAAR standard.

There is a low level of awareness of heads of structural divisions, teaching staff about the procedure for including changes and additions to the EP based on a critical assessment of literature and scientific data; adaptation of the content of the EP taking into account scientific developments in medicine, achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the health system.

The analysis of the representation of students, representatives of practical healthcare, professional associations in collegial bodies for participation in the development of the residency program in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children" showed their low involvement and awareness of this process, which does not correspond to the principles of student-centered learning.

There is a low level of awareness of teaching staff about the algorithm that provides integration between theoretical training and professional development, based on training through medical practice and professional development; through the provision of medical care to patients, taking into account its needs of society, which does not meet the criteria of the NAAR standard.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The management of the LLP KMU "KSPH", the Vice-rector for Clinical Affairs, together with the heads of clinical departments and courses, should ensure the implementation of an approach to training based on the results of basic medical education, systematically and transparently, using practice-oriented training that includes and supports the student's personal participation in providing medical care and responsibility for the patient, and their own educational process and clinical practice. The deadline for implementation is during the 2024/2025 academic year, then-permanently.

2. The management of the LLP KMU "KSPH", the Vice-Rector for Clinical Affairs, together with the heads of clinical departments and courses, should ensure the introduction and use of training methods based on the integration of practical and theoretical components using a system of mentoring, regular evaluation and feedback, including adherence to ethical requirements and norms. Due date-September 2024; further-permanently

3. The management of the LLP KMU "KSPH", the Vice-rector for Clinical Activities, the Vice-rector for Academic and Scientific Activities, together with the heads of clinical departments and courses, should ensure the development and implementation of the residency program in the specialties 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and Resuscitation for Adults and children", 7R01128 "General Surgery", 7R01133 "Obstetrics and gynecology adult, children", based on the principles of scientific methodology, including methods of analytical and critical thinking; research methods in healthcare and evidence-based medicine. The deadline for implementation is during the 2024/2025 academic year, then-permanently.

4. The management of the LLP KMU "KSPH", the Vice-rector for Clinical Activities, the Vice-rector for Academic and Scientific Activities, together with the heads of clinical departments and courses, are recommended to develop and implement an algorithm that provides a procedure

for including changes and additions to the EP based on a critical assessment of the literature and scientific data; adapting the content of the EP taking into account scientific developments in medicine, achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system. The deadline for execution is September 2024, then permanently.

5. The Vice-Rector for Clinical Activities, head of the Educational and clinical Department, together with the heads of clinical departments and courses, is recommended to develop a "Catalog of elective subjects", expanding the list of elective subjects that provide an individual learning path for residents. The deadline for execution is September 2024, then permanently.

6. The Vice-Rector for Clinical Activities, head of the educational and clinical department should develop an algorithm for organizing, coordinating, managing and evaluating the individual learning environment and the educational process. The deadline for execution is September 2024, then permanently.

7. It is recommended that the management of the LLP KMU "KSPH" expand the representation of students, representatives of practical healthcare, and professional associations in collegial bodies to participate in the development, revision, and updating of the residency program in accredited specialties. The deadline for execution is September 2024, then permanently.

8. The management of the LLP KMU "KSPH", Vice-rector for Clinical Affairs, head of the educational and clinical Department, together with the heads of clinical departments and courses, is recommended to develop an algorithm that ensures integration between theoretical training and professional development, based on training through medical practice and professional development; through the provision of medical care to patients, taking into account its needs of society. The deadline for execution is during the 2024/2025 academic year, then permanently.

9. It is recommended that managers of accredited:

- make an adjustment to the EP related to an increase in the volume of classroom work up to 20%. The deadline is August 2024.
- develop and approve research topics that are necessary for the development of scientific research competencies in students of the residency program. The deadline for execution is during the 2024/2025 academic year, then permanently.
- develop educational and methodological documentation necessary for students to master the EP and post it on the educational platform "Moodle". The deadline for execution is August 2024, then permanently.

EEC conclusions on criteria: about the standard "Educational program"

EP "7R01118 Therapy" 0-strong, 16 - satisfactory, 4 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01102 Pediatrics" 0-strong, 14 - satisfactory, 6 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 0-strong, 14 - satisfactory, 6 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01128 General surgery" 0-strong, 14 - satisfactory, 6 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01133 Obstetrics and Gynecology adult, children" 0-strong, 14 - satisfactory, 6 - suggest improvement, 0 – unsatisfactory positions.

6.33. Standard "Student Assessment Policy"

- ✓ Evaluation methods
- ✓ An educational organization must:
 - ✓ develop and implement a student assessment/assessment policy; define, approve and publish the principles, objectives, methods and practices of student assessment, including, if necessary, with expert review;
 - ✓ ensure that assessment procedures cover knowledge, skills, attitudes, and professional behavior
 - ✓ ensure that an additional set of evaluation methods and formats are used in accordance with their "evaluation performance", including the use of multiple evaluators and multiple evaluation methods;
 - ✓ determine the criteria for passing exams or other types of assessment, including the number of acceptable retakes.
 - ✓ provide for the possibility of documenting the reliability, validity and fairness of student assessment methods
 - ✓ implement an evaluation review system based on the principles of fairness or in accordance with appropriate legal procedures.
 - ✓ implement new assessment methods in accordance with the need, document different types and stages of training and assessment;
 - ✓ encourage external experts to review evaluation methods.
- ✓ Relationship between assessment and learning
- ✓ An educational organization must:
 - ✓ ensure the use of evaluation principles, methods and practices that are comparable to expected learning outcomes and methods; ensure that learners achieve the expected learning outcomes; promote learners' learning; ensure the adequacy and relevance of learning; provide timely, concrete, constructive and objective feedback to learners based on the assessment of their performance.
 - ✓ aim to use evaluation principles, methods and practices that encourage integrated learning, encourage student involvement in clinical practice, and promote interprofessional training.

Proof part

Assessment of students academic achievements will be carried out in accordance with the Academic Policy of the LLP KMU "KSPH", approved by the decision of the Academic Council on April 27, 2023, Protocol No. 9. The document is posted on the university's website (Academic Policy of LLP KMU "KSPH") and contains a description of the student assessment policy.

The Academic policy, OP and documents of the departments present the principles, goals, methods and scale of assessment, methods for calculating the academic rating, the procedure for intermediate and final certification, the main forms of monitoring students' academic achievements, such as current control, intermediate control and final control (exam).

To register the assessment of students' academic achievements, it is planned to use the automated information system "PLATONUS" and the e-learning system MOODLe,

The planned various forms and methods of monitoring students' knowledge, skills, behaviors, and attitudes emphasize the diversity of assessment methods and are consistent with common practice. Integrating knowledge, skills, and attitudes assessment into the learning process provides comprehensive training for students.

The proposed evaluation criteria relate to the goals of the EP and the expected results of training at the level of the EP, modules, and disciplines and are given in the EP, syllabuses. Assessment of practical skills is provided by evaluation sheets with the possibility of providing feedback. The academic policy of the LLP KMU "KSPH" provides for rules, procedures and the number of acceptable retakes, appeal procedures for appealing the results of final control in disciplines, intermediate and final attestation, indicating the terms and procedure for considering students' applications.

Analytical part

The planned methods for assessing the competencies of students at the LLP KMU "KSPH" are given in syllabuses of modules/disciplines and discussed at meetings of departments. In the self-assessment report, based on the results of interviews with focus groups, studying educational and methodological documentation, HEC members note the lack of documentation justifying the chosen assessment methods, specific methods of formative and summative assessment are not specified, there is no information about the feedback system between the teacher and the student when evaluating academic achievements, a description of monitoring procedures and updating assessment tools this raises questions about the validity and reliability of evaluation procedures.

Documentation of the reliability, validity and fairness of the planned assessment methods, coordination of learning outcomes, assessment methods and teaching and learning methods used, as well as a description of the procedures for analyzing the control and measurement fund were not properly reflected in the submitted documentation. This can create uncertainty about how accurately and fairly students' achievements will be measured.

Internal review of syllabuses and evaluation tools, involvement of external examiners in the Final certification of graduates and external experts for reviewing the EP are indicated as incentives for the examination of assessment methods, which does not cover the entire process of organizing the examination, including specialized training of experts, detailed regulations and criteria, analysis of the quality and impact of evaluation tools on the educational process.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. Provide development and documentation justifying the choice of forms and methods of assessment in the documents of departments and universities, including discussion of the effectiveness of various methods and their compliance with educational goals. The deadline is January 2025.

2. Establish procedures and criteria for documenting the reliability, validity and fairness of planned evaluation methods, to ensure transparency and objectivity of the evaluation process. The deadline is January 2025.

3. Develop procedures for monitoring the effectiveness of evaluation methods and updating them if necessary. The deadline is January 2025.

4. Organize the process of expert evaluation of assessment methods with the involvement of trained academic experts, develop appropriate regulations and criteria to ensure high quality and objectivity of this process. Due in September 2025.

5. Provide a feedback system between teachers and students when evaluating academic achievements, including specific methods of formative and summative assessment, providing adequate feedback to support students' learning and development. The deadline is January 2025.

6. Provide support for integrated learning and interprofessional training, including assessment of skills in working in interprofessional teams and interacting with other specialists in the clinical environment, providing feedback to understand the progress of students. Due in September 2025.

EEC conclusions on criteria: about the standard "Student Assessment Policy"

EP "7R01118 Therapy" 0-strong, 6 - satisfactory, 4 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01102 Pediatrics" 0-strong, 6 - satisfactory, 4 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 0-strong, 4 - satisfactory, 6 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01128 General surgery" 0-strong, 4 - satisfactory, 6 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01133 Obstetrics and Gynecology adult, children" 0-strong, 4 - satisfactory, 6 - suggest improvement, 0 - unsatisfactory positions.

6.44. The "Learners" Standard

- ✓ Selection and admission policy
- ✓ An educational organization must:
 - ✓ have a policy and implement admissions practices that are based on the organization's mission and include a clearly defined position on the student selection process.
 - ✓ ensure a balance between learning opportunities and admission of students; formulate and implement policies/rules for the selection of students according to the established criteria; have a policy and implement the practice of admission of students with disabilities in accordance with the current laws and regulations of the country; ensure a high level of knowledge and skills in the field of basic biomedical sciences, achieved at the previous at the level of basic medical education; ensure transparency and fairness of the selection process.
 - ✓ have a policy and implement the practice of transferring students from other educational institutions, including foreign ones.
 - ✓ ensure that the selection procedure provides opportunities for potential students to improve the quality of training in the chosen field of medicine; ensure transparency of the selection procedure; provide for an appeal mechanism for admission decisions,
 - ✓ demonstrate a willingness to involve student associations and other stakeholders in policy development and the selection process by periodically reviewing the admission policy and rules.
 - ✓ Number of students
 - ✓ An educational organization must:
 - ✓ determine the number of accepted students in accordance with: clinical / practical training opportunities, the ability of the NGO to conduct appropriate control and monitoring of the educational process, material, technical and other available resources, information about the health needs of the society and society.
 - ✓ provide for the possibility of periodically reviewing the number and number of students accepted in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector.
 - ✓ provide for the possibility of adapting the number of potential trainees based on available information on the number of qualified candidates and information on national and international labor markets; adjust the number of potential trainees based on the inherent unpredictability of the exact labor requirements of specialists in various fields of medicine.
 - ✓ Advising and supporting students
 - ✓ An educational organization must:
 - ✓ demonstrate readiness to provide students with access to the system of academic counseling of students.
 - ✓ demonstrate readiness to provide academic advice when monitoring and monitoring student progress, including analysis of unintentional incidents.
 - ✓ demonstrate readiness to provide a student support program that addresses social, financial, and personal needs.
 - ✓ demonstrate willingness to allocate resources for social and personal support of students; ensure confidentiality regarding counseling and support.
 - ✓ demonstrate readiness for professional guidance, counseling, and career planning.
 - in solving students' problem situations.
 - ✓ Student representation
 - ✓ An educational organization must:
 - ✓ have policies and implement practices for representing students and their respective participation in the development of the mission and intended learning outcomes, in the development of the EP, in planning the learning environment for students, and in the evaluation and management of the EP.
 - ✓ demonstrate the willingness to encourage students' representatives to participate in decision-making on educational processes, conditions and rules of study.
 - Working conditions
 - ✓ An educational organization must:
 - ✓ implement a training program with appropriate remuneration/ scholarships or other means of financing and motivating students
 - ✓ ensure that trainees have access to patient care, including calling a doctor where appropriate
 - ✓ define and publish students' working conditions and responsibilities
 - ✓ provide for interruptions of education caused by pregnancy (including maternity/paternity leave, child care), illness, military service, or secondment for additional training
 - ✓ strive to ensure that the work components in the student's work do not dominate the educational component/training
 - ✓ take into account the needs of patients, the continuity of medical care and the educational needs of students when drawing up a work plan and schedule, including on-call work
 - ✓ allow distance learning under special circumstances, in accordance with the individual educational trajectory and work experience of the student, providing evidence that the total duration and quality of distance learning is not less than in full-time training.
 - ✓ provide for the possibility of continuing education under conditions of study breaks related to pregnancy (including maternity / paternity leave), illness, military service or secondment.

Proof part

The mission of LLP KMU "KSPH" is "Improving public health through quality education, applied science and effective consulting". In accordance with the mission, the admission policy will be aimed at selecting the best candidates for the residency program and correspond to the mission of the LLP KMU "KSPH". EP 7R01118 Therapy, 7R01102 Pediatrics, 7R01126 Anesthesiology and resuscitation adult, children, 7R01128 General surgery, 7R01133 Obstetrics and Gynecology adult, children assume a clinical orientation of training and in-depth specialized training in the relevant specialty. LLP KMU "KSPH" plans to implement residency programs at LLP KMU "KSPH" from the 2024-2025 academic year.

LLP KMU "KSPH" was accredited by the Ministry of Education and Science of the Republic of Kazakhstan on December 15, 2020 as a subject of scientific and (or) scientific and technical activities (certificate of accreditation: MK series No. 006347) (reference: Certificate of

Accreditation (of scientific and (or) scientific and technical activities).

The policy and criteria for admission to the Higher School of Economics residency program are regulated in accordance with regulatory documents: Constitution of the Republic of Kazakhstan dated August 30, 1995; Law of the Republic of Kazakhstan "On Education" dated July 27, 2007 No. 319-III SAM; Order of the Minister of Education and Science of the Republic of Kazakhstan dated October 31, 2018 No. 600 <https://adilet.zan.kz/rus/docs/V1800017650>; Order of the Minister of Health of the Republic of Kazakhstan dated December 15, 2020 No. KR DSM-270/2020 " On approval of rules for placing a state order, admission to training and training of medical personnel in residency" <https://adilet.zan.kz/rus/docs/V2000021802> Order of the Minister of Health of the Republic of Kazakhstan dated July 4, 2022 No. KR DSM-63 "On approval of state mandatory standards for levels of education in the field of healthcare" <https://adilet.zan.kz/rus/docs/V2200028716> Academic Policy of the LLP KMU "KSPH" (link: Academic Policy of LLP KMU "KSPH", Residency Admission Rules "(reference: Residency Admission Rules), which are revised depending on changes and additions to the above-mentioned regulatory document and have a policy on the criteria for selecting and accepting residency students, developed on the basis of objectivity, transparency and openness. LLP KMU "KSPH" will periodically review the number and contingent of accepted students in consultation with the Employers ' Council, with the active participation with clinical bases and departments. Joint work with the Ministry of Health of the Republic of Kazakhstan and the DPR will annually allow LLP KMU "KSPH" to adapt the number of potential students.

The selection procedure and conditions for admission of residents are regulated by the internal document " Rules for admission to the Residency program "(link: Rules for admission to the residency program), which will determine the procedure for admission to the residency program. LLP KMU "KSPH" has autonomy in determining the content and form of conducting the entrance exam in the specialty, selecting persons who are members of the examination and appeal commission, while meeting the requirements for the number of examiners and corresponding to the profile of the specialty of residency. Applications for the residency program will be accepted from July 3 to July 25 of the calendar year. Entrance exams for the residency program will be held from August 8 to August 16, enrollment-until August 28 of the calendar year.

The criteria for applicants entering the residency program in the specialty EP 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children" are determined according to the requirements of the State Educational Standard of the Ministry of Health of the Republic of Kazakhstan. The previous level of education of persons who want to master the residency program includes: basic medical education, higher medical education, internship. The previous level of education of persons who want to master the residency program provides for a high level of basic biomedical education and passing entrance exams to the residency program on a competitive basis.

The entrance exam for the residency specialty profile will be conducted independently by LLP KMU "KSPH". For the period of conducting entrance exams to the residency program of LLP KMU "KSPH", examination commissions will be created in the following specialties. The selection and admission policy fully complies with the current legislation and the Charter of LLP KMU "KSPH".

It is planned to hold an "Open Day" for applicants, where the applicant will be explained all information on the residency program (goals and results of the study program, competencies being developed, opportunities for further study), as well as on the quality of education, the employment program, the research environment of the university, etc.

Analytical part

Academic consultation of residents during the entire training period will be carried out with the direct participation of teaching staff, advisors, clinical mentors appointed from among the teachers of clinical departments or highly qualified doctors (first and highest category) of the

departments of the clinical base where residents will be trained. Advising residents on all issues related to the organization of the educational process for the development of mandatory and elective subjects will be carried out by an adviser (link: Regulations on the adviser), the head of the clinical department, clinical mentors.

LLP KMU “KSPH” will provide support to residents focused on social, financial and personal needs, and allocate appropriate resources for social and personal support. Financial support will consist in providing residents studying under the grant with a monthly scholarship, and those in need will be provided with a hostel. A system of discounts will be provided in accordance with contractual obligations (%). In order to provide conditions for personal development, the University has created a stable material and technical base: a coworking space, a sports gym, a coffee shop, equipment for holding cultural and sports events.

To provide feedback, trust boxes "For letters and appeals to the Rector of the University" are installed in the academic building, the dormitory of LLP KMU “KSPH”, as well as a helpline for students to prevent offenses in LLP KMU “KSPH” and the rector's blog is open.

In case of a professional crisis, as well as other emergency situations, residents will receive psychological support from a full-time psychologist.

During meetings with students, the EEC members made sure that residents have the opportunity to express their opinions and wishes regarding ensuring academic quality, solving their professional and social issues. The rector's blog functions. The Residency Department provides psychological counseling and career development counseling.

4 teachers will participate in the implementation of the educational program in the specialty 7R01118 "Therapy", of which they have the academic degree of Doctor of Medical Sciences – 1, Candidate of Medical Sciences – 1, Doctor of Philosophy (PhD) – 2. In general, the number of teaching staff who conduct classes at the Higher School of Medicine is stable. residents in the specialty 7R01118 "Therapy" 100%. The percentage of teaching staff with the highest / first category in profile disciplines 75%. The Department of Children's Diseases has been established in the LLP KMU “KSPH”. The number of staff at the department is 7 teaching staff.

10 teachers will participate in the implementation of the educational program in the specialty 7R01102 "Pediatrics", of which 2 have the degree of Doctor of Medical Sciences, 7 have the degree of Candidate of Medical Sciences. In general, the degree of teachers who teach classes with residents in the specialty 7R01102" Pediatrics " is 90%. The percentage of teaching staff with the highest / first category in profile disciplines is 70%.

A course of Anesthesiology and resuscitation has been created at the Higher School of Economics. The number of staff on the course is 3 teaching staff. 3 teachers will participate in the implementation of the educational program in the specialty 7R01126 "Anesthesiology and resuscitation adult, children", of which they have the degree of Doctor of Medical Sciences-1, candidate of Medical Sciences-2. In general, the stability of teaching staff leading classes with residents in the specialty 7R01126 "Anesthesiology and resuscitation adult, children" is 100%. The percentage of teaching staff with the highest / first category in profile disciplines is 100%.

The Department of Surgical Diseases has been established in the Higher School of Medicine of the Republic of Kazakhstan. The number of staff at the department is 9 teaching staff. 8 teachers will participate in the implementation of the OP in the specialty 7R01136 "General Surgery", of which 3 have the academic degree of Doctor of Medical Sciences, 4 have the academic degree, and 1 has the academic degree. In general, the percentage of teaching staff who teach classes with residents in the specialty 7R01136" General Surgery " is 87.5%. The percentage of teaching staff with the highest category in profile disciplines is 75%.

The course "Obstetrics and Gynecology" has been created in LLP KMU “KSPH”. The number of staff on the course is 4 teaching staff. 4 teachers will participate in the implementation of the OP in the specialty 7R01133 "Obstetrics and Gynecology adult, children", of which they have the academic degree of Doctor of Medical Sciences-2, Candidate of Medical Sciences-1, PhD-1. In general, the number of teaching staff who conduct classes with residents in the specialty 7R01133 "Obstetrics and Gynecology adult, children" is stable is 100%. The percentage of

teaching staff with the highest category in profile disciplines is 100%.

Analysis of the materials of the residency program report, the results of the interview during the interview, and the information provided on the university's website showed compliance with the anti-corruption culture at the university, as well as compliance with the requirements of accreditation standards.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The management of the LLP KMU "KSPH" should actively involve students in the development of new educational programs, the development, evaluation and management of educational programs, the development and evaluation of learning outcomes, and the planning of learning conditions. The deadline for execution is September 2024, then permanently.

2. The university management should demonstrate readiness to encourage students to participate in decision-making on educational processes, conditions and rules of study. The deadline for execution is September 2024, then permanently.

***Conclusions of the LLP KMU "KSPH" on the criteria of the "Learners" standard:
EP "7R01118 Therapy" 0-strong, 24 - satisfactory, 0 - suggest improvement, 0 – unsatisfactory positions.***

EP "7R01102 Pediatrics" 0-strong, 24 - satisfactory, 0 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 0-strong, 24 - satisfactory, 0 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01128 General surgery" 0-strong, 24 - satisfactory, 0 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01133 Obstetrics and gynecology adult, children" 0-strong, 24 - satisfactory, 0 - suggest improvement, 0 – unsatisfactory positions.

6.55. Academic Staff Standard/Teachers"

- ✓ Selection and recruitment policy
- ✓ The education organization should develop and implement a recruitment and selection policy that:
 - ✓ takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical / professional merits of applicants, including the proper ratio between pedagogical, scientific and professional qualifications.
 - ✓ defines the responsibilities of teachers, including the balance between teaching, research, and other functions, taking into account the mission of the EP, the needs of the education system, and the needs of the health system.
 - ✓ guarantees that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, and that teachers of narrow specialties, if necessary, are approved for the appropriate training periods, depending on their qualifications.
 - ✓ encourages participation in programs to develop their educational potential, use the expertise of educational activities to increase the potential of academic staff, and determine the level of remuneration for participation in postgraduate education.
- ✓ Staff development Policy
 - ✓ The educational organization should develop and implement a policy of activity and personnel development, which is aimed at:
 - ✓ ensure that teachers have sufficient time for training, counseling, and independent development.
 - ✓ the presence of a structure responsible for the development of academic staff, ensuring periodic assessment of academic staff.
 - ✓ develop and implement policies to support academic staff in pedagogy and professional development for further professional development; evaluate and recognize the academic and academic achievements of teachers.
 - ✓ the ability to take into account the ratio of "teacher-student " depending on the various components of the OP, taking into account the features that ensure close personal interaction and monitoring of students.

Proof part

The recruitment procedure is provided by the Administrative Department of the LLP KMU "KSPH" in accordance with the procedure established by the current labor legislation, developed by the Regulation on the Procedure for registration of Labor Relations of the LLP KMU "KSPH", through a competition to fill vacant positions (based on the Regulation on the Procedure for Competitive Replacement of Positions of Teaching Staff and Researchers of the LLP KMU "KSPH").

The search and selection of personnel is carried out in accordance with the requirements for the level of qualification and professional competence of candidates based on their professional and personal qualities (HR Policy of LLP KMU "KSPH").

In accordance with the State Educational Standard, a mentor will be appointed for clinical training in the residency program in specialties from among qualified practical healthcare specialists working at the residency bases with the first or highest qualification category, with the requirement for at least 5 years of experience in the relevant specialty (Regulations on clinical mentors of LLP KMU "KSPH"). At the same time, the amount of teaching load of a clinical mentor is determined in the amount of 0.5%.

When applying for a job, there are no restrictions based on gender, race, national origin, or language.

The staff of teaching staff of accredited specialties is approved by the staffing table. The total number of teaching staff is 24 people, of which 54% are main employees. The median age was 56 years. The rate of settling down is 91.6%.

The number of teaching staff involved in the implementation of the AP of accredited specialties is formed based on the total academic load.

The activity of teaching staff is regulated by:

- * Regulations on clinical departments/courses of LLP KMU "KSPH";
- * job descriptions of teachers, depending on the position they hold;
- * individual curriculum of teachers' work,
 - and is divided into classroom (academic) and extracurricular (methodological; research, educational; medical; advanced training). The academic load of each teacher is determined depending on the position held by him, the level of qualification.

Assessment of the achievements of teaching staff is carried out on the basis of an individual plan-report of the teacher's work, which is discussed at a meeting of the department and approved by the head of the department. Analysis of the performance indicators of teaching staff of departments is carried out by the head of the department and the head of the Educational and Clinical Department.

In order to encourage employees to get a high-quality result of work, as well as to reward

them for their work, LLP KMU “KSPH” has established incentive payments in addition to the official salary. Personnel incentives are regulated by the Regulation on the organization of the Remuneration and Incentive system of the LLP KMU “KSPH”. The Regulation determines the size of official salaries for professional qualification groups, the size of increasing coefficients to salaries; conditions and amounts of payments of a compensatory and stimulating nature. Taking into account the working conditions of teaching staff, compensation payments, incentive allowances and bonus payments are established.

Additional professional training and advanced training of NPS is carried out in accordance with the requirements of professional standards. Teachers of clinical departments improve their pedagogical competencies: they are trained in advanced training courses "Pedagogical skills", "Development of EP in accordance with ECST", "Methodology of medical education". In 2023, 9 teachers were trained to improve their pedagogical competencies.

In addition to teaching competencies, teachers also receive advanced training in medical specialties. In 2023, 13 teachers completed advanced training.

The Department of Science and Consulting keeps records of the publishing activity of teaching staff and the results of research work (patents, author's certificates).

The University provides all employees with equal opportunities to realize their potential and career growth. According to the Personnel Policy, teachers are recommended for higher-level positions by competition in case of effective performance of their official duties, active scientific, educational and methodological activities, and successful clinical work; potentially in-demand employees are included in the personnel reserve system.

To encourage and motivate teaching staff to further professional development, support research and educational innovations, a competition for the title "Best Teacher of LLP KMU “KSPH” is being held.

Analytical part

LLP KMU “KSPH” has developed and implemented a selection and recruitment policy that defines their professional competence, job responsibilities, and responsibilities.

The strong point of the academic staff of accredited specialties is that a significant part of the teachers are recognized specialists in their field, have extensive practical experience and a high level of sedentariness (91.6%), and enjoy well-deserved authority in clinical databases. This will make it possible to attract practical healthcare workers to participate in the educational process and organize effective practical training for residents.

Most teaching staff work as primary employees, with full-time employment in the educational process. External part-timers include highly qualified managers and employees of practical healthcare, whose activities are related to the focus of implemented programs.

Almost all teachers participate in various types of activities (pedagogical, scientific, organizational and methodological, etc.).

Professional development of teaching staff is carried out in accordance with the existing requirements set out in state and local regulatory documents. At the same time, it should be noted that teachers of clinical departments mainly improve their qualifications in the context of the immediate clinical specialty and pay less attention to professional development in the field of pedagogy and andrology.

A systematic analysis of the effectiveness of the educational process in clinical departments, conducting an expert examination of the educational activities of teaching staff and, as a result, training teachers on the basis of monitoring, would significantly increase the educational potential of teachers.

The University motivates teaching staff to achieve the strategic goals of the university through material and non-material incentive measures. At the same time, attention should be paid to the insufficient use of measures to encourage teachers to engage in scientific activities: for scientific publications in international peer-reviewed journals, for the preparation and publication of textbooks, monographs, teaching aids, etc.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

Bolshoy practical experience and a high level of stability of teachers of clinical departments.

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

The university management is recommended to introduce expertise and monitoring of the educational activities of teachers of clinical departments, followed by the development of a program to improve their pedagogical competencies. Term of execution-from 01.09.2024, then permanently.

Conclusions of the HEC on the criteria of the "Academic Staff" standard/Teachers":

EP "7R01118 Therapy" 1-strong, 6 - satisfactory, 1 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01102 Pediatrics" 1-strong, 6 - satisfactory, 1 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 1-strong, 6 - satisfactory, 1 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01128 General surgery" 1-strong, 6 - satisfactory, 1 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01133 Obstetrics and Gynecology adult, children" 1-strong, 6 - satisfactory, 1 - suggest improvement, 0 - unsatisfactory positions.

6.66. Educational Resources Standard

- ✓ Material and technical base
- ✓ An educational organization must:
 - ✓ demonstrate readiness to provide students with a sufficient material and technical base that allows them to ensure adequate implementation of the OP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies; modern equipment for teaching practical methods; a safe learning environment.
 - ✓ demonstrate a willingness to improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of postgraduate education.
- ✓ Educational environment
- ✓ An educational organization must:
 - ✓ demonstrate a willingness to provide the necessary resources for students to acquire adequate practical experience, including the selection and approval of a clinical base as an educational environment; access to sufficient clinical / practical facilities/bases to provide training; sufficient number and diversity of patients; appropriate diversity of clinical cases to meet the goals and objectives of training, including the use of resources in both inpatient and as well as at the outpatient level, to provide the student with a wide range of experience in the chosen field of medicine.
 - ✓ demonstrate a willingness, when choosing a learning environment, to guarantee the number of patients and the corresponding variety of clinical cases, allowing for clinical experience in all aspects of the chosen specialty, including training in health care organization and management and disease prevention; training in a university clinic, as well as training in other relevant clinics/institutions and community facilities/locations, if necessary necessary.
- ✓ Information technology
- ✓ An educational organization must:
 - ✓ ensure access to information and communication technologies and other electronic media.
 - ✓ demonstrate readiness to use information and communication technologies effectively and ethically in the field of public relations.
 - ✓ provide for the possibility of access for teachers and students to use information and communication technologies: for independent training; communication with colleagues; access to health information resources and relevant patient data; patient supervision and work in the health care system to provide medical care.
- ✓ Clinical teams
- ✓ An educational organization must:
 - ✓ demonstrate a willingness to provide students with the opportunity to gain experience working in a team with colleagues and other healthcare professionals.
 - ✓ demonstrate a willingness to encourage training in a multidisciplinary / interprofessional team, and promote the ability to guide and train other health professionals.
- ✓ Medical and scientific research
- ✓ An educational organization must:
 - ✓ demonstrate readiness to guarantee and provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, to ensure integration and balance between training and research.
 - ✓ demonstrate a willingness to encourage students to participate in medical research related to the study of the state and quality of public health and the health system, provide sufficient time for students to conduct research within the educational program, and provide access to research facilities and activities at training sites.
- ✓ Expertise in the field of education
- ✓ An educational organization must:
 - ✓ define and implement policies for the use of educational expertise in the planning, implementation and evaluation of the program.
 - ✓ encourage the development of expertise in the evaluation of education and research in medical education as a discipline, promote the desire and interests of employees in conducting research in medical education.
- ✓ Alternative learning and exchange in the field of education
- ✓ An educational organization must:
 - ✓ define and implement policies for the availability of individual learning opportunities in other educational institutions of the appropriate level within or outside the country, transfer and offset of educational credits and learning outcomes.
 - ✓ demonstrate a willingness to facilitate regional and international exchange of staff (academic, administrative and teaching staff) and trainees, providing appropriate resources; establish links with relevant national and international bodies to exchange and mutually recognize learning elements

Proof part

According to the educational programs 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children's", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children's", has a sufficient number of clinical bases to provide the necessary volume of clinical training and industrial practices: in the educational process, the following areas are considered: the process involved

The material and technical base of the University includes: lecture halls, study rooms, a library/co-working center, an educational and clinical center with simulation rooms, computer classes, a dormitory, a fitness room, a coffee shop, a medical office, clinical bases – multidisciplinary clinical hospitals in Almaty and regions of the Republic of Kazakhstan.

Based on the cooperation agreement, the Department of Internal Medicine is based on the following clinical databases: "City hospital of emergency care", "City polyclinic No. 17", "Central City Clinical Hospital" of the Department of Health of Almaty.

Based on the cooperation agreement, the Department of Children's Diseases is based on the following clinical databases: "Children's City Clinical Hospital No. 2", "City Polyclinic No. 17"

Department of health of Almaty, "Center of Perinatology and Pediatric Cardiac Surgery", "Center of Pediatric Emergency Medical Care", "National Scientific Center of Phthisiopulmonology", "City Clinical Infectious Diseases Hospital named after Izatima Zhekenova.

Based on the cooperation agreement, the course of Anesthesiology and resuscitation is based on the following clinical databases: "Children's City Clinical Hospital No. 2", "Central City Clinical Hospital", "Center for Children's Emergency Medical Care", "City Emergency Hospital".

Our Department of Surgical Diseases is based on the following clinical bases: "Central City clinical Hospital", "City polyclinic No. 17 " Department of health of Almaty, "City Emergency Hospital".

The number of accepted residents will be determined by the state order of the Ministry of Health of the Republic of Kazakhstan for the training of medical personnel, and taking into account the possibilities of clinical and practical training, the maximum allowable load on teachers, the availability of educational, methodological and scientific literature, the capacity of clinical bases, as well as the material and technical resources of In the direction of training in the specialty 7R01133 "Obstetrics and gynecology adult, children", on the basis of a cooperation agreement, the course "Obstetrics and Gynecology" is based on the following clinical bases: LLP "Keruen-Medicus", "Center of Perinatology and Pediatric Cardiac Surgery", "City Polyclinic No. 17" of Department of Health of Almaty. The course "Obstetrics and Gynecology" has 3 study rooms with a total area of 74 sq. m., a lecture hall with a total area of 36 sq.m. and 1 office of the head of the department, with an area of 12 sq. m., at the main clinical base – LLP Keruen-Medicus. During the training, resident doctors, in addition to working in the emergency department, maternity and gynecological departments and the operating unit, will have the opportunity to work in medical and diagnostic rooms at clinical bases equipped with modern diagnostic equipment and clinical laboratories. It also has 1 personal computer, 1 laptop, 1 printer, 1 projector. Joint work with the Ministry of Health of the Republic of Kazakhstan and the DPR will annually allow LLP KMU "KSPH" to adapt the number of potential students.

During the period of study in the residency program, students will have the opportunity to master theoretical and practical skills in the field of internal diseases and related specialties, with the ability to provide medical services in a polyclinic, hospital, emergency room, emergency care.

The library of the LLP KMU "KSPH" is one of the most important divisions of the university, which is a scientific and informational institution, a reference base for the educational, methodological and scientific process for training qualified specialists in the field of healthcare.

The library's collection is fully equipped with educational, methodical, scientific and reference literature. Additional sources of acquisition are books received as gifts from the university's faculty and other organizations.

The library operates under the automated library and information system "KABIS", which meets international standards. There is an electronic catalog (EC), which reflects all scientific and educational literature in the state, Russian and foreign languages, dissertations and abstracts are introduced. The electronic catalog forms the databases "Book Fund", "Readers' Card File " and "Electronic resources and articles". Provided access to the Cochrane Library evidence-based medicine database, Student Advisor www.studentlibrary.ru and a doctor's consultant www.rosmedlib.ru.

LLP KMU "KSPH" provides free access to national and foreign databases in the field of medicine for students and teachers: Wiley Online Library <https://onlinelibrary.wiley.com/>, Cochrane library <https://www.cochranelibrary.com/>, to the "Web of Science" platform <http://apps.webofknowledge.com/>, the "Scopus" DATABASE www.scopus.com, THE "Science direct" DATABASE www.sciencedirect.com, Springer Link (Springer) <https://link.springer.com/>.

LLP KMU "KSPH" is a member of 5 leading international associations:

1. Asia-Pacific Academic Consortium for Public Health «APACPH»
2. (Asia-Pacific Academic Consortium for Public Health).
3. Association of Schools of Public Health in the European Region "ASPHER" (Association of Schools of Public Health in the European region).

4. International Union for Health Promotion and Education «IUHPE»
5. (International Union for Health Promotion and Health Education).
6. Organization for PhD Education in Biomedicine and Health Sciences in the European System (ORPHEUS) союз по докторским программам.
7. The European Public Health Association.

Analytical part

The educational process at clinical departments is provided with sufficient number and specialization of clinical databases.

During the visit to the clinical bases, the EEC members were convinced that the departments of the university have full access to all opportunities for carrying out both medical and diagnostic activities and educational activities at the clinical bases. The relations between the clinical base and departments are very close, many doctors involved in the educational process are both part-time as clinical mentors, and work with residents on a trust-free basis.

The study rooms of the departments are located conveniently and in close proximity to the departments, but the principle of patient safety is strictly observed. When interviewing the heads of clinics, employers, and representatives of the Department of Health of Almaty, we can trace the constructive interaction between the university departments and practical health care on clinical, educational, and research issues.

LLP KMU “KSPH” has enough resources to provide an educational environment: academic buildings, laboratories, equipment, access to electronic resources and IT support, a simulation center. This can contribute to the development of employees' interests in conducting research in medical education, which will allow them to find more effective models and approaches to training, and respond in a timely manner to the changing needs of the healthcare system.

For the implementation of the educational process and methodological work, training and support resources for students were created and attracted: the AIS “Platonus” educational process management system, the Moodle educational portal. The AIS “Platonus” is loaded with syllabuses of disciplines for all educational programs, teachers make assessments of the current and final control.

To implement exchange programs at the international level, the University has signed Memorandums and cooperation Agreements with Universities in Russia, Turkey, Uzbekistan, Kyrgyzstan, Belarus, etc.

Academic mobility at the national level is also carried out on the basis of a memorandum signed with S. D. Asfendiyarov KazNMU.

Currently, negotiations are underway with universities in Russia and Uzbekistan to introduce joint educational programs in the fields of “Public Health” and “Medicine”, with the subsequent possibility of opening representative offices or branches of LLP KMU “KSPH” on the basis of partner universities. There is also a joint two-degree program “Management in Healthcare”, “Management in Healthcare ” with the Higher School of Economics and Innovation (Lublin, Poland).

Agreements were signed with a Strategic Partner - Shenzhen University, China. At the moment, a Memorandum of mutually beneficial cooperation has been signed with him.

Currently, 40 research centers, research institutes, large clinics and outpatient organizations of the Republic of Kazakhstan are the bases of pedagogical, professional and research practices of LLP KMU “KSPH”. Contracts were signed with 52 organizations that are clinical bases of LLP KMU “KSPH”.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The LLP KMU "KSPH" management should provide students with a sufficient material and technical base for adequate implementation of the EP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies; modern equipment for teaching practical methods; and a safe learning environment. Purchase according to the calendar and thematic plan for preparing residents for laparoscopic surgery LapSim device. The deadline for completion is during the 2024/2025 academic year.

2. The management of the LLP KMU "KSPH" should provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, and ensure integration and balance between training and research. The deadline for completion is during the 2024/2025 academic year.

3. The management of the LLP KMU "KSPH" should participate in medical scientific research devoted to the study of the state and quality of public health and the health care system, provide sufficient time for students to conduct research within the framework of the educational program, and provide access to research facilities and activities at training sites. The deadline for completion is during the 2024/2025 academic year.

4. The management of the LLP KMU "KSPH" should define and implement a policy of using expertise in the field of education at the stage of planning, implementing and evaluating the program. The deadline for completion is during the 2024/2025 academic year.

5. The management of the LLP KMU "KSPH" should develop expertise in evaluating education and research in medical education as a discipline, and promote the desire and interests of employees in conducting research in medical education. The deadline for execution is during the 2024/2025 academic year, then permanently.

Conclusions of the LLP KMU "KSPH" on the criteria of the "Educational Resources" standard:

EP "7R01118 Therapy" 0-strong, 11 - satisfactory, 4 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01102 Pediatrics" 0-strong, 11 - satisfactory, 4 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 0-strong, 11 - satisfactory, 4 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01128 General surgery" 0-strong, 1 - satisfactory, 4 - suggest improvement, 0 - unsatisfactory positions.

EP "7R01133 Obstetrics and gynecology adult, children" 0-strong, 11 - satisfactory, 4 - suggest improvement, 0 - unsatisfactory positions.

6.77. Educational Program Assessment Standard

- ✓ *Mechanisms for monitoring and evaluating the program*
- ✓ *An educational organization must:*
- ✓ *have regulated procedures for monitoring and periodically evaluating students ' OP, learning outcomes, progress, and academic performance, with the involvement of key stakeholders.*
- ✓ *demonstrate evidence of readiness to regularly monitor the EP, assess the relationship between HR policies and educational and health system needs, evaluate the educational process, student assessment methods, student progress, academic staff qualifications, evaluate and analyze identified problems, and ensure that the relevant assessment results affect the quality of the EP.*
- ✓ *demonstrate a willingness to make the evaluation process and results transparent to all stakeholders.*
- ✓ *Teacher and student feedback*
- ✓ *An educational organization must:*
- ✓ *demonstrate evidence of a willingness to systematically conduct, analyze, and respond to feedback from teachers and students.*
- ✓ *demonstrate evidence of a willingness to actively involve teachers and students in program evaluation planning and use evaluation results to improve the program.*
- ✓ *Results of training of qualified specialists*
- ✓ *An educational organization must:*
- ✓ *demonstrate evidence of readiness to continuously monitor qualified professionals; provide feedback on the clinical practice of qualified professionals from employers; establish and apply a mechanism for evaluating the program, using the collected data on the results of performing the clinical practice of qualified professionals.*
- ✓ *demonstrate evidence of readiness to inform the structural units responsible for selecting students, developing and planning an educational program, and advising students about the results of evaluating students ' clinical practice.*
- ✓ *Stakeholder engagement*
- ✓ *An educational organization must:*
- ✓ *demonstrate evidence of willingness to involve key stakeholders in monitoring and evaluating the EP.*
- ✓ *demonstrate evidence of readiness to provide stakeholders with access to the results of the course and educational program evaluation; take into account the results of feedback from qualified specialists; take into account the results of feedback on the EP.*

Proof part

The self-assessment report, based on the results of interviews with focus groups and studying supporting documentation, describes the regulated procedures covering the organization, implementation and evaluation of the EP, including the development, approval of the EP, organization and conduct of the educational process, achievement of expected learning outcomes by residents, analysis of the results of external and internal audit of the EP and the educational process in".

According to the submitted documents, it is planned to involve stakeholders in the monitoring and evaluation of the EP, including students, employers, teachers and other representatives of the university. This is planned in holding meetings of departments with the participation of students and employers, as well as in planning and conducting final certification with the participation of representatives of medical organizations and other specialists.

It provides for periodic assessment of the content of the EP and the results of training of residents through monitoring the availability of resources in the educational process, compliance of the curriculum with the requirements of state educational standards, compliance of the content of training with the requirements of professional standards, and analysis of feedback from interested parties on the quality of the EP (Regulation on Monitoring and Evaluation of the EP).

LLP KMU "KSPH" plans to monitor the training and professional activities, career growth and achievements of future graduates, for which it is planned to use feedback in the form of questionnaires from employers.

The University has demonstrated the readiness of structural divisions and persons responsible for the educational process at the university and at departments to inform students about the results of evaluating their clinical practice and take the necessary measures based on the results of monitoring the EP, analyzing and discussing academic performance.

The results of the interview confirmed the readiness of structural divisions, including departments, to involve key stakeholders in the monitoring and evaluation of educational programs, including the description of monitoring mechanisms, data recording, decision-making taking into account the opinions of various stakeholders, the inclusion of experts from practical health care and the academic community is guaranteed, which will ensure communication with the real needs of the EP.

The self-assessment report indicates the readiness of the university to provide interested parties with access to the results of the course and educational program evaluation, as well as to

take into account feedback from qualified specialists and graduates, which is confirmed by the results of interviews and studying documentation.

Analytical part

The self-assessment report indicates that monitoring and evaluation of the EP is planned, but the HEC members were not provided with clear instructions on the evaluation criteria, continuity of information collection throughout the implementation of the entire EP and ensuring the independence of appraisers, appropriate training of stakeholders for their active participation in the evaluation process.

The submitted documents did not specify what information will be provided to interested parties (teaching methods and assessments, academic performance, feedback, provision of resources, etc.).

HEC members did not receive information on how confidentiality and anonymity will be ensured, especially in cases of complaints and comments. How to ensure that the data received is regularly reviewed and how to ensure transparency in the process of analyzing and responding to feedback, so that students and teachers can see that their opinions are taken into account and lead to timely and concrete changes or improvements in the educational program. In addition to questionnaires, you can also use other methods of collecting feedback, such as focus groups, interviews, open forums, etc., to get a better understanding of the opinions and impressions of participants in the educational process.

The self-assessment report and university documents do not clearly describe the process of analysis and response, how exactly the feedback collected will be analyzed, and what steps will be taken in response to identified problems or suggestions. Examples of questionnaires and surveys that will be used to collect feedback from residents and teachers were not provided, so that HEC members could make sure that these tools adequately cover all aspects of the educational program and provide information for further improvement of the program.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. Develop qualitative and quantitative indicators that will be used in monitoring and evaluating the EP. Ensure that information is continuously collected throughout the entire implementation period of the EP. The deadline is January 2025.

2. Define a list of information to be provided to stakeholders, including teaching methods and assessments, academic performance, feedback, resource provision, etc., and document transparency and regularity in the provision of this information. The deadline is January 2025.

3. Ensure confidentiality and anonymity when collecting feedback from teachers and students, regulate that the data obtained is regularly analyzed and transparently presented for responding to feedback. The deadline is January 2025.

4. Describe the process of analyzing and responding to the feedback collected, including specific steps that will be taken in response to identified problems or suggestions. The deadline is January 2025.

Conclusions of the LLP KMU "KSPH" on the criteria of the "Student Assessment Policy" standard:

EP "7R01118 Therapy" 0-strong, 5 - satisfactory, 4 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01102 Pediatrics" 0-strong, 5 - satisfactory, 4 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 0-strong, 5 - satisfactory, 4 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01128 General surgery" 0-strong, 5 - satisfactory, 4 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01133 Obstetrics and Gynecology adult, children" 0-strong, 5 - satisfactory, 4 - suggest improvement, 0 – unsatisfactory positions.



6.88. Management and Administration Standard

- ✓ *Management*
- ✓ *The educational organization must:*
- ✓ *demonstrate evidence of a willingness to document completion of training by issuing degrees, diplomas, certificates or other formal certificates of qualification; provide evidence of formal qualifications provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level.*
- ✓ *demonstrate evidence of willingness to be responsible for quality assurance processes.*
- ✓ *demonstrate evidence of readiness to ensure that the OP meets the health needs of society and the health system, and ensure transparency in the work of management structures and their decisions.*
- ✓ *Academic leadership*
- ✓ *The educational organization must:*
- ✓ *demonstrate evidence of readiness for leadership/academic leadership and organization of postgraduate medical education.*
- ✓ *demonstrate evidence of willingness to periodically evaluate academic leadership regarding the achievement of the OP's mission and expected learning outcomes.*
- ✓ *Training budget and resource allocation*
- ✓ *An educational organization must:*
- ✓ *have a clear distribution of responsibility and authority for providing resources for the educational program, including the target budget for training.*
- ✓ *demonstrate evidence of readiness to allocate the resources necessary for the implementation of the EP and allocate educational resources in accordance with their needs*
- ✓ *demonstrate evidence of readiness to manage the budget in such a way as to meet the functional responsibilities of the academic staff and students, and to introduce innovations into the program.*
- ✓ *Administrative staff and management*
- ✓ *An educational organization must:*
- ✓ *have an appropriate administrative staff, including their number and composition in accordance with their qualifications, to ensure the implementation of the EP and related activities; ensure proper management and allocation of resources.*
- ✓ *develop and implement an internal management quality assurance program that includes regular reviews and academic management submission of the EP for regular review to achieve high quality.*
- ✓ *Requirements and rules*
- ✓ *An educational organization must:*
- ✓ *comply with national legislation regarding the number and types of recognized medical specialties for which approved GP programs are developed.*
- ✓ *conduct discussion and approval of the postgraduate medical education program in cooperation with all interested parties.*
- ✓ *Informing the public*
- ✓ *An educational organization must:*
- ✓ *demonstrate evidence of readiness to publish complete and reliable information about the educational program and its achievements on the official website of the educational organization and in the media.*

Proof part

Resident doctors who have completed training in the educational programs of the residency 7R01118 "Therapy", 7R01102 "Pediatrics", 7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children" and have successfully passed the final certification are issued a certificate of completion of residency. The issuance of state-issued educational documents and the assignment of qualifications in the relevant specialty of residency is carried out in accordance with the orders of the Minister of Science and Higher Education, the Minister of Health of the Republic of Kazakhstan.

LLP KMU "KSPH" has developed, implemented and certified a quality management system based on the requirements of the International Standard ISO 9001-2015; the last recertification was made on 13.04.2023. An analysis of the functioning of the management system is carried out in order to assess the degree of functioning, taking into account the quality policy and goals. Based on the analysis, the effectiveness of the QMS is evaluated, as well as the policy and goals of LLP KMU "KSPH" are clarified, revised, and updated.

The University has developed the manual "System of internal quality assurance of LLP KMU "KSPH", approved on 28.03.2023.

In accordance with the organizational structure, the educational process of the residency is supervised by the Vice-rector for Clinical Activities, who is subordinate to the educational and clinical department. This structure is responsible for the development of documents regulating the educational process on the basis of the State Educational Standard of the Republic of Kazakhstan; regulations on the organization of the educational process; control and monitoring of the educational process in residency; conclusion and registration of contracts with clinical databases; monitoring the interaction of departments with clinical databases. The key structural divisions directly responsible for training students in the residency program are specialized departments.

Periodic assessment of the activities of the management of LLP KMU "KSPH" is carried

out by analyzing and forming reports and plans; conducting internal audit and self-assessment; analyzing the implementation of strategic goals of the university; conducting risk analysis of the university; work of internal and external commissions.

Heads of administrative divisions report to the staff meeting and the Academic Council. Reports of vice-rectors are heard at meetings of the Academic Council. The rector of LLP KMU “KSPH” reports at the extended meeting of the Academic Council of the University.

Determination of the budget of LLP KMU “KSPH” is the responsibility of the first head of the university - the Rector. The position of Commercial Director is provided for managing financial issues in LLP KMU “KSPH”; his powers and duties are defined in the job description. Long-term and current budget planning is carried out by the Department of Economics and Finance, which conducts pricing policy, develops a development plan, analyzes the implementation of plans, develops estimates of income and expenses, and submits reports on the results of financial and economic activities.

Analysis of the growth of cash receipts for 2019-2023 shows stable growth. At the same time, about 70% of the income is generated by paid services: professional development and retraining of personnel, scientific activities.

The principles of distribution of financial resources and formation of tangible assets are based on the Development Strategy of LLP KMU “KSPH” and correspond to the mission and goals of the university.

LLP KMU “KSPH” operates on the basis of its constituent documents: a certificate of state registration, a statistical map, a certificate of registration with the tax authority, the Charter of LLP KMU “KSPH”, a state license for educational activities in the field of postgraduate education, a state license for medical and medical activities. The educational process is managed according to the organizational structure, which is approved by the general meeting of participants and approved by the Rector.

The duties and powers of LLP KMU “KSPH” in relation to the implementation of residency specialties accredited by the OP are regulated by the current legislation of the Republic of Kazakhstan and internal regulatory documents. For this purpose, regulations on structural divisions have been developed and approved, defining their main goals and objectives, functions, rights and obligations. Based on the regulations, job descriptions of all employees of LLP KMU “KSPH” were developed, coordinated and approved, indicating the qualification requirements, job responsibilities, rights and responsibilities.

Compliance with the national legislation on the number and types of specialties of the residency program is carried out through the implementation of the State Educational Standard, interaction with the Ministry of Education of the Republic of Kazakhstan and the Ministry of Health of the Republic of Kazakhstan on the organization of the educational process in the residency program and is consistent with the priority areas of national legislative and program documents.

In order to effectively plan, develop and implement residency programs, LLP KMU “KSPH” has included representatives of practical healthcare in the advisory bodies (UMS, Academic Council). There are "Open Days", "Job Fairs" with the participation of representatives of practical healthcare, meetings of the university management with the heads of medical organizations. The Employers' Council has been established, and the minutes of the Council meeting have been presented to the members of the EEC.

Information support for the public on the implementation of the residency program is provided through the media (Facebook, Telegram, etc.), the website of LLP KMU “KSPH”; an electronic ticker; a television monitor in the lobby of the building; official information boards at the university, in the dormitory and departments.

Analytical part

LLP KMU “KSPH” has an approved organizational structure, management bodies have been established for the educational programs of residency 7R01118 "Therapy", 7R01102 "Pediatrics",

7R01126 "Anesthesiology and resuscitation adult, children", 7R01128 "General Surgery", 7R01133 "Obstetrics and Gynecology adult, children". It has been established that appropriate administrative personnel and management are available to implement these EP, carry out other activities, ensure proper management and allocate resources.

At the same time, when conducting interviews with the head of the Department Educational and Clinical, the HEC members did not receive sufficient evidence of the responsibility and readiness of the department's management to organize the educational process in accredited residency specialties. There are no distinctions of powers and areas of responsibility between the Department Teaching and Clinical and the Department of Postgraduate Education in the academic management of the implementation of the residency program. It is necessary to create a clear and understandable, first of all, for future residents, the management structure of the EE specialties of the residency, which will allow evaluating the effectiveness of academic leadership in achieving the mission of the EE specialties and the expected learning outcomes.

The main document regulating the educational process in LLP KMU "KSPH" is the Academic Policy, which is a system of measures, rules and procedures for planning and managing educational activities and effectively organizing the educational process; in particular, sections are included concerning the implementation of the OP of residency specialties. Quality assurance processes at the university are regulated by the quality management system based on MS ISO 9001:2015. At the same time, the main task of the QMS is to create a documented database of management system processes, ensuring optimal management of procedures.

Despite the guidelines developed at the University "System of internal quality assurance of LLP KMU "KSPH", approved on 28.03.2023, the EEC members did not receive convincing evidence about the systematic measures taken by the heads of educational residency programs in the field of ensuring the quality of the educational process: conducting constant monitoring and evaluation of the residency program, internal and external quality the relationship between research, learning and teaching, etc. The reason for this is the lack of a single coordinating structure with the authority to implement measures to ensure the quality of the educational process.

According to the Order of the Acting Ministry of Education and Science of the Republic of Kazakhstan dated January 20, 2023 No. 23 On Amendments to the Order of the Minister of Education and Science of the Republic of Kazakhstan dated October 30, 2018 No. 595 "On Approval of Standard Rules for the Activities of organizations of higher and (or) Postgraduate Education"(item 34) for ensuring the quality of the educational process, LLP KMU "KSPH" should create a structure for academic quality that will monitor the content and conditions of educational programs, including in the residency program, evaluation policy; solve academic issues, conduct questionnaires of students for compliance with the quality of educational programs/disciplines. This structure will include teachers, students, and representatives of ATS.

In order to ensure the connection of educational residency programs with the needs of the healthcare system of the Republic of Kazakhstan, LLP KMU "KSPH" maintains constant and effective communication with practical healthcare organizations and employers, for which the Employers' Council functions. The involvement of practical healthcare in the implementation of the residency program is reflected in the fulfillment of the terms of contracts with clinical bases and the readiness of clinic doctors to mentor future residents.

The University has created a system for planning financial and economic activities, targeted spending of funds, including for the implementation of EP specialties of residency. At the same time, taking into account the type of economic organization of the University, it is necessary to make greater use of the possibilities of independent distribution of financial resources to achieve the final results of training.

The official source of information about LLP KMU "KSPH" is the website <https://ksph.edu.kz/ru/home/>. The site's information resource is open and publicly accessible. The main information and resource components of the site are information about the University, reference materials, materials on the organization of the educational process, scientific activities, international projects and competitions of the university, materials about the current life of the

university.

At the same time, the "Residency" section is incomplete, and it does not reflect the regulatory documents related to admission to the residency program and regulating the educational process in the residency program, the academic calendar, the catalog of elective subjects, working curricula, and technical specification of test tasks for admission to the residency program.

In addition, content in the state language is required in order to fully inform about the main specialties of the residency program.

Strengths/best practices in the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

Recommendations of the Higher Attestation Commission for the EP residencies "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The university management is recommended to create a structure for academic quality that will monitor the content and conditions of implementation, review and evaluate educational programs, including in the residency program. The deadline is until 01.09.2024.

2. The university management is recommended to define the powers and areas of responsibility between the Teaching and Clinical Department and the Department of Postgraduate Education in the academic management of the Residency Training Center. The deadline is until 01.09.2024.

3. It is recommended that OP managers post full information about the conditions for implementing the residency OP with mandatory content in the state language on the official website of the University. Term-from 01.09.2023, then-permanently.

Conclusions of the HEC on the criteria of the "Management and Administration" standard:

EP "7R01118 Therapy" 0-strong, 11 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01102 Pediatrics" 0-strong, 11 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01126 Anesthesiology and resuscitation adult, children" 0-strong, 11 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01128 General surgery" 0-strong, 1 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

EP "7R01133 Obstetrics and Gynecology adult, children" 0-strong, 11 - satisfactory, 2 - suggest improvement, 0 – unsatisfactory positions.

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

According to the "MISSION AND LEARNING OUTCOMES" standard:

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

Institutional autonomy of LLP KMU "KSPH" and constructive interaction with the healthcare sector of the region and Almaty, executive authorities and other partners, availability of established and professional human resources.

According to the standard "EDUCATIONAL PROGRAM":

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

According to the standard "STUDENT ASSESSMENT POLICY":

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

According to the "STUDENTS" standard:

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

According to the "ACADEMIC STAFF" standard/TEACHERS":

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

Practical experience and a high level of stability of teachers of clinical departments.

According to the EDUCATIONAL RESOURCES standard:

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

According to the standard "EVALUATION OF THE EDUCATIONAL PROGRAM":

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

According to the MANAGEMENT AND ADMINISTRATION standard:

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

No strengths were identified.

(VIII) OVERVIEW QUALITY IMPROVEMENT RECOMMENDATIONS FOR EACH STANDARD

According to the "MISSION AND LEARNING OUTCOMES" standard:

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The Vice-Rector for Clinical Activities, the Vice-rector for Academic and Scientific Activities, together with the heads of clinical departments and courses, develop and approve research projects with various sources of funding necessary for the development of research competencies of residency students. The deadline for execution is December 2024, then permanently.

2. The Vice-rector for Clinical Activities, the Vice-rector for Academic and Scientific Activities, together with the heads of clinical departments and courses, should ensure the procedure for attracting students to participate in scientific research of students within the framework of the implementation of the residency program. The deadline for execution is December 2024, then permanently.

3. The Vice-Rector for Clinical Affairs, together with the heads of structural divisions, should develop regulatory documents related to ensuring proper behavior of students. Due in September 2024.

4. The Vice-Rector for Clinical Affairs, together with the heads of clinical departments and courses, should ensure that stakeholders are informed and involved in the formulation of the mission and expected learning outcomes. The deadline for execution is September 2024, then permanently.

1. The Vice-Rector for Clinical Activities, together with the heads of clinical departments and courses, should develop and implement an algorithm to ensure that the stated Mission of the residency program in accredited specialties and the expected results are based on the opinion/proposal of other interested parties. Due in September 2024.

According to the standard "EDUCATIONAL PROGRAM":

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The management of the LLP KMU "KSPH", the Vice-rector for Clinical Affairs, together with the heads of clinical departments and courses, should ensure the implementation of an approach to training based on the results of basic medical education, systematically and transparently, using practice-oriented training that includes and supports the student's personal participation in providing medical care and responsibility for the patient, and their own educational process and clinical practice. The deadline for implementation is during the 2024/2025 academic year, then-permanently.

2. The management of the LLP KMU "KSPH", the Vice-Rector for Clinical Affairs, together with the heads of clinical departments and courses, should ensure the introduction and use of training methods based on the integration of practical and theoretical components using a system of mentoring, regular evaluation and feedback, including adherence to ethical requirements and norms. Due September 2024; further-permanently

3. The management of the LLP KMU "KSPH", the Vice-rector for Clinical Activities, the Vice-rector for Academic and Scientific Activities, together with the heads of clinical departments and courses, should ensure the development and implementation of educational residency programs based on the principles of scientific methodology, including methods of analytical and critical thinking; research methods in healthcare and evidence-based medicine. The deadline for implementation is during the 2024/2025 academic year, then-permanently.

4. The management of the LLP KMU “KSPH”, the Vice-rector for Clinical Activities, the Vice-rector for Academic and Scientific Activities, together with the heads of clinical departments and courses, are recommended to develop and implement an algorithm that provides a procedure for including changes and additions to the OP based on a critical assessment of the literature and scientific data; adapting the content of the OP taking into account scientific developments in medicine, achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system. The deadline for execution is September 2024, then permanently.

5. The Vice-Rector for Clinical Activities, head of the Educational and clinical Department, together with the heads of clinical departments and courses, is recommended to develop a "Catalog of elective subjects", expanding the list of elective subjects that provide an individual learning path for residents. The deadline for execution is September 2024, then permanently.

6. The Vice-Rector for Clinical Activities, head of the educational and clinical department should develop an algorithm for organizing, coordinating, managing and evaluating the individual learning environment and the educational process. The deadline for execution is September 2024, then permanently.

7. It is recommended that the management of the LLP KMU “KSPH” expand the representation of students, representatives of practical healthcare, and professional associations in collegial bodies to participate in the development, revision, and updating of the residency program in accredited specialties. The deadline for execution is September 2024, then permanently.

8. The management of the LLP KMU “KSPH”, Vice-rector for Clinical Affairs, head of the educational and clinical Department, together with the heads of clinical departments and courses, is recommended to develop an algorithm that ensures integration between theoretical training and professional development, based on training through medical practice and professional development; through the provision of medical care to patients, taking into account its needs of society. The deadline for execution is during the 2024/2025 academic year, then permanently.

9. It is recommended that managers of accredited ops:

- make an adjustment to the EP related to an increase in the volume of classroom work up to 20%. The deadline is August 2024.

- develop and approve research topics that are necessary for the development of scientific research competencies in students of the residency program. The deadline for execution is during the 2024/2025 academic year, then permanently.

- develop educational and methodological documentation necessary for students to master the OP and place it on the educational platform "Moodle". The deadline for execution is August 2024, then permanently.

According to the standard "STUDENT ASSESSMENT POLICY":

Recommendations for EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and gynecology adult, children":

1. The Vice-Rector for Clinical Work and the heads of educational institutions should ensure the development of internal documents, regulating the justification procedure and the choice of assessment forms and methods, including discussion of the effectiveness of various methods and their compliance with educational goals. Due date: January 2025.

2. Establish procedures and criteria for documenting the reliability, validity and fairness of planned evaluation methods, and to ensure transparency and objectivity of the evaluation process. The deadline is January 2025.

3. Develop procedures for monitoring the effectiveness of evaluation methods and updating them if necessary. Due date: January 2025.

4. Organize the process of evaluating assessment methods with the involvement of trained academic experts, develop appropriate regulations and criteria to ensure the quality and objectivity of this process. Due date: September 2025.

5. Provide feedback system between teachers and students when evaluating academic achievements, including specific methods of formative and summative assessment, and providing adequate feedback to support learning and student development. Due date: January 2025.

6. Provide support for integrated learning and interprofessional training, including evaluating skills in working in interprofessional teams and interacting with other professionals in a clinical environment, and providing feedback to assess and understand student progress. Due date: September 2025.

According to the "STUDENTS" standard:

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The management of the LLP KMU "KSPH" actively involve students in the development of new educational programs, the development, evaluation and management of educational programs, the development and evaluation of learning outcomes, and the planning of learning conditions. The deadline for execution is September 2024, then permanently.

2. The university management should demonstrate readiness to encourage students to participate in decision-making on educational processes, conditions and rules of study. The deadline for execution is September 2024, then permanently.

According to the "ACADEMIC STAFF" standard/TEACHERS":

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The university management is recommended to introduce expertise and monitoring of the educational activities of teachers of clinical departments, followed by the development of a program to improve their pedagogical competencies. Term-from 01.09.2024, then-permanently

According to the EDUCATIONAL RESOURCES standard:

For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The management LLP KMU "KSPH" should provide students with a sufficient material and technical base for adequate implementation of the EP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies; modern equipment for teaching practical methods; and a safe learning environment. Purchase according to the calendar and thematic plan for preparing residents for laparoscopic operations. The deadline for completion is during the 2024/2025 academic year.

2. The management of the LLP KMU "KSPH" should provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, and ensure integration and balance between training and research. The deadline for completion is during the 2024/2025 academic year.

3. The management of LLP KMU "KSPH" should participate in medical scientific research devoted to the study of the state and quality of public health, provide возможность students with the opportunity to conduct research within the framework of the educational program, and provide access to research facilities at the place of study. The deadline for completion is during the 2024/2025 academic year.

4. The management LLP KMU “KSPH” determine and implement the policy of conducting expertise in the field of education at the stage of planning, implementation and evaluation of educational programs. The deadline for completion is during the 2024/2025 academic year.

5. The management of the LLP KMU “KSPH” should conduct research and promote the desire and interests of employees in conducting research in medical education. The deadline for execution is during the 2024/2025 academic year, then permanently.

According to the standard "EVALUATION OF THE EDUCATIONAL PROGRAM":
For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The Vice-Rector for Clinical Work and heads of educational programs should develop qualitative and quantitative indicators that will be used in monitoring and evaluating EP. Ensure continuous collection of information throughout the entire implementation period of the EP. The deadline is January 2025.

2. The university management should limit the list of information that will be provided to interested parties, including teaching methods and assessments, academic performance results, feedback, provision of resources, etc., and document transparency and regularity in the provision of this information. The deadline is January 2025.

3. The university management should ensure the confidentiality and anonymity of feedback from teachers and students, ensure that the data obtained is regularly analyzed and transparently presented for responding to feedback. The deadline is January 2025.

4. The university management and responsible entities should write a process for analyzing and responding to feedback, including specific steps that will be taken in response to identified problems or suggestions. The deadline is January 2025.

According to the MANAGEMENT AND ADMINISTRATION standard:
For EP "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children":

1. The university management is recommended to create a structure for academic quality that will monitor the content and conditions of implementation, review and evaluate educational programs, including in the residency program. The deadline is until 01.09.2024.

2. The university management is recommended to define the powers and areas of responsibility between the Teaching and Clinical Department and the Department of Postgraduate Education in the academic management of the Residency Training Center. The deadline is until 01.09.2024.

3. It is recommended that EP managers post full information about the conditions for implementing the residency EP with mandatory content in the state language on the official website of the University. Term—from 01.09.2023, then—permanently.

(IX) OVERVIEW RECOMMENDATIONS FOR THE DEVELOPMENT OF AN EDUCATIONAL ORGANIZATION

-

(X) RECOMMENDATION TO THE ACCREDITATION COUNCIL

The members of the EEC came to a unanimous opinion that the residency programs "7R01118 Therapy", "7R01102 Pediatrics", "7R01126 Anesthesiology and Resuscitation adult, children", "7R01128 General Surgery", "7R01133 Obstetrics and Gynecology adult, children" are recommended for accreditation for a period of 3 years.



Appendix 1. Evaluation table "Conclusion of the external Expert Commission"**7R01118 Therapy**

| # N\N | # N\N | # Crete. | EVALUATION CRITERIA | NGO Position | | | |
|--|----------|-------------|--|--------------|--------------|---------------------|----------------|
| | | | | Strong | Satisfactory | Implies Improvement | Unsatisfactory |
| Standard 1 "MISSION AND LEARNING OUTCOMES" | | | | | | | |
| 1.1 Mission definition | | | | | | | |
| The educational organization should: | | | | | | | |
| 1 | 1 | 1.1.1. | define the mission of the Post-graduate Medical Education Center and bring it to the attention of stakeholders and the health sector | | + | | |
| 2 | 2 | 1.1.2. | define the mission based on the needs of society in health issues, the needs of the health care system, and other aspects of social responsibility | | + | | |
| 3 | 3 | 1.1.3. | define the training program, containing theoretical and practical components with an emphasis on for the last one, the result of which will be the doctor: <ul style="list-style-type: none"> ▪ competent in the chosen field of medicine, which includes good medical practice, ▪ able to work independently at a high professional level, ▪ able to work in a professional and interprofessional team, ▪ ready to learn throughout life and to participate in continuing medical education /professional development. ▪ able to provide appropriate patient care that is appropriate, effective, compassionate and safe in addressing health problems and health promotion issues, including a patient-centered and systematic approach | | + | | |
| 4 | 4 | 1.1.4. | provide a willingness to provide appropriate working conditions for students to maintain their health | | + | | |
| 5 | 5 | 1.1.5. | ensure that the mission of the EP is to: It includes the development of innovations in the educational process that allow the development of broader and more specialized competencies than those defined in the framework of the main required competencies; the development of scientific competence of students so that doctors can conduct research in the chosen field of medicine; opportunities for doctors to become active participants in solving issues related to social determinants of health | | | + | |
| 1.2 Professionalism and professional autonomy | | | | | | | |
| The educational organization should: | | | | | | | |
| 6 | 6 | 1.2.1. | include professionalism in the training of physicians and ensure that training promotes professional autonomy to enable them to act in the best interests of the patient and society in the future | | + | | |
| 7 | 7 | 1.2.2. | provide for cooperation with the government and other partners, while maintaining appropriate independence from them | + | | | |
| 1.3. Learning Outcomes | | | | | | | |
| The educational organization should: | | | | | | | |
| 8 | 8 | 1.3.1. | determine the expected learning outcomes that students are expected to achieve. At the end of their training, they must have achieved all their post-graduate achievements in terms of knowledge, skills and behaviors/attitudes, an appropriate | | + | | |

| | | | | | | | |
|---|----|---------|--|----------|-----------|----------|----------|
| | | | foundation for a future career in their chosen field of medicine, their future roles in the health sector, commitment and skills in implementing continuing education, the health needs of society, the needs of the health system and other aspects of social responsibility, professional development behavior | | | | |
| 9 | 9 | 1.3.2. | define and publish the expected learning outcomes: general and specialty-specific, which students need to achieve | | + | | |
| 10 | 10 | 1.3.3. | demonstrate evidence of readiness to ensure appropriate behavior of students in relation to fellow students, teachers, medical staff, patients and their relatives | | + | | |
| 11 | 11 | 1.3.4. | determine the expected learning outcomes based on the results obtained at the level of basic medical education to ensure interaction between basic and postgraduate medical education | | + | | |
| 12 | 12 | 1.3.5 | provide for the possibility of students ' participation in research in the relevant field of healthcare | | | + | |
| 1.4. Participation in the formulation of the mission and learning outcomes | | | | | | | |
| The educational organization should: | | | | | | | |
| 13 | 13 | 1.4.14. | ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes | | + | | |
| 14 | 14 | 1.4.2. | ensure that the stated mission and expected learning outcomes are based on the opinions/suggestions of other stakeholders | | + | | |
| Total | | | | 1 | 11 | 2 | 0 |
| Standard 2. EDUCATIONAL PROGRAM | | | | | | | |
| 2.1. Training approach | | | | | | | |
| The educational organization should: | | | | | | | |
| 15 | 1 | 2.1.1. | determine the training approach based on the expected results of training and official certificates of qualification provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level | | + | | |
| 16 | 2 | 2.1.2. | determine the training approach based on the results of basic medical education in a systematic and transparent manner, using practice-oriented training that includes and supports the learner's personal involvement in health care delivery and patient responsibility, their own learning process and clinical practice | | + | | |
| 17 | 3 | 2.1.3. | demonstrate evidence of readiness to ensure that appropriate training methods are used that integrate practical and theoretical components, guide the learner through mentoring and regular evaluation and feedback, including adherence to ethical requirements and norms | | | + | |
| 18 | 4 | 2.1.4. | demonstrate evidence of a willingness to ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, rights and responsibilities of students | | + | | |
| 19 | 5 | 2.1.5. | increase the degree of independence and responsibility of the student as they improve their knowledge, skills, and experience | | + | | |
| 20 | 6 | 2.1.6. | provide the opportunity to identify gender, cultural, and religious characteristics and properly prepare the student for interaction with the specified patient population | | + | | |
| 2.2. Scientific method | | | | | | | |
| The educational organization should: | | | | | | | |
| 21 | 7 | 2.2.1. | throughout the entire training program, instill in students the principles of scientific methodology, including methods of analytical and critical thinking; methods of research in healthcare and evidence-based medicine | | | + | |
| 22 | 8 | 2.2.2. | strive to include in the EP a critical assessment of literature and scientific data, adapt content based on scientific developments in medicine, change the EP taking into account the achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system | | | + | |
| 2.3 Content of training | | | | | | | |

| | | | | | | | | |
|--|----|--------|--|--------------|----------|-----------|----------|----------|
| The educational organization should: | | | | | | | | |
| 23 | 9 | 2.3.1. | include in the training process the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decisions, communication skills, medical ethics, public health, medical law and forensic medicine, management disciplines, patient safety, physician protection, complementary medicine | | + | | | |
| 24 | 10 | 2.3.2. | organize an educational program with an appropriate focus on patient safety and independence | | + | | | |
| 25 | 11 | 2.3.3. | demonstrate evidence of readiness to provide adjustments and changes to the EP to ensure the development of knowledge, skills and thinking of different roles of graduates, compliance of the content of the EP with changing conditions and needs of society and the health system | | + | | | |
| 2.4. Structure of the educational program, content and duration | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 26 | 12 | 2.4.1. | describe the content, scope and sequence of courses and the duration of the EP; identify mandatory and selective components; combine practice and theory in the learning process; ensure compliance with national legislation that should be presented and described; ensure adequate impact on the quality of education. how local, national or regional health systems address the health problems and health care needs of the population | | | + | | |
| 27 | 13 | 2.4.2. | take into account the results of previous basic medical education related to the chosen field of medicine | | + | | | |
| 28 | 14 | 2.4.3. | define the graduate requirements for performing various roles in the healthcare system | | + | | | |
| 2.5. Organization of training | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 29 | 15 | 2.5.1. | define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process | | | + | | |
| 30 | 16 | 2.5.2. | include in the planning and development of the educational program proper representation from teaching staff, students and other key and relevant stakeholders | | + | | | |
| 31 | 17 | 2.5.3. | plan training in such a way as to introduce the student to a wide range of existing practical experience in the chosen field of medicine | | + | | | |
| 32 | 18 | 2.5.4. | guarantee a variety of training locations, coordinate multiple training locations to gain appropriate access to different aspects of your chosen field of medicine | | + | | | |
| 2.6. Communication of training, medical practice and the health system care | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 33 | 19 | 2.6.1. | provide for and ensure integration between theoretical training and professional development, develop training through medical practice and professional development; integrate training and medical practice through patient care; ensure that training complements and takes into account the needs for medical | | | + | | |
| 34 | 20 | 2.6.2. | make effective use of the health system's capacity to provide medical care for training purposes | | + | | | |
| | | | | Total | 0 | 14 | 6 | 0 |
| Standard 3. STUDENT ASSESSMENT POLICY | | | | | | | | |
| 3.1. Methods of evaluation | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 35 | 1 | 3.1.1. | to develop and implement a policy of assessment/evaluation of students; to determine, approve and publish the principles, objectives, methods and practices of assessment of students, including, if necessary, to the audit specialists | | + | | | |
| 36 | 2 | 3.1.2. | to ensure that the procedures of assessment covers the knowledge, skills, attitudes and professional behavior | | + | | | |

| | | | | | | | | |
|--|----|--------|---|--------------|----------|----------|----------|----------|
| 37 | 3 | 3.1.3. | to guarantee the use of an additional set of methods and formats of assessment in accordance with their "assessment", including the use of multiple assessors and multiple assessment methods | | | + | | |
| 38 | 4 | 3.1.4. | to determine the criteria for examinations or other forms of assessment, including the number of mulligans | | | + | | |
| 39 | 5 | 3.1.5. | to provide for the possibility of documenting the reliability, validity and fairness of assessment methods students | | | + | | |
| 40 | 6 | 3.1.6. | implement a system of appeal against assessment results, based on the principles of justice, or in accordance with the relevant legal procedures | | | + | | |
| 41 | 7 | 3.1.7. | to introduce new methods of assessment in accordance with the need to document the various types and stages of training and evaluation | | | + | | |
| 42 | 8 | 3.1.8. | to provide for the promotion of the examination process methods evaluation by external experts | | | + | | |
| 3.2. The relationship between assessment and learning | | | | | | | | |
| The educational organization must: | | | | | | | | |
| 43 | 9 | 3.2.1. | to guarantee the use of principles, methods and practices of assessment, which are comparable to the expected outcomes and teaching methods; to ensure that students will achieve the expected learning outcomes; to promote the training of students; to ensure the adequacy and relevance of education; provide timely, specific, constructive and objective feedback from trainees on the basis of their evaluation | | | + | | |
| 44 | 10 | 3.2.2. | strive to use evaluation principles, methods and practices that encourage integrated learning, encourage student involvement in clinical practice, and promote interprofessional training | | | + | | |
| | | | | Total | 0 | 6 | 4 | 0 |
| Standard 4. TRAINEES | | | | | | | | |
| 4.1. Selection and Admission Policy | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 45 | 1 | 4.1.1. | have a policy and implement admission practices based on the organization's mission and include a clearly defined position on the student selection process | | | + | | |
| 46 | 2 | 4.1.2. | ensure a balance between learning opportunities and student admission; formulate and implement policies/rules for the selection of students according to the established criteria; have a policy and implement the practice of admission, admission of students with disabilities in accordance with the current laws and regulations of the country; ensure a high level of knowledge and skills in the field of basic biomedical sciences, achieved at the previous level of basic medical education; ensure transparency and fairness selection procedures | | | + | | |
| 47 | 3 | 4.1.3. | have a policy and implement the practice of transferring students from other educational institutions, including foreign | | | + | | |
| 48 | 4 | 4.1.4. | guarantee in the selection procedure the opportunities of potential students to improve the quality of training in the chosen field of medicine; guarantee the transparency of the selection procedure; provide for an appeal mechanism for admission decisions | | | + | | |
| 49 | 5 | 4.1.5 | demonstrate a willingness to involve student associations and other stakeholders in policy development and the selection process by periodically reviewing the admission policy and rules | | | + | | |
| 4.2. Number of students | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 50 | 6 | 4.2.1. | determine the number of accepted students in accordance with: clinical / practical training opportunities, the ability of the public organization to conduct appropriate control and monitoring of the educational process, material, technical and other available resources, information about the health needs of the society and the society | | | + | | |

| | | | | | | | |
|---|----|--------|---|--|---|--|--|
| 51 | 7 | 4.2.2. | provide for the possibility of periodically review the number and pool of accepted trainees in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector | | + | | |
| 52 | 8 | 4.2.3. | make it possible to adapt the number of potential trainees based on available information on the number of qualified candidates and information on national and international labor markets; adjust the number of potential trainees based on inherent unpredictability precise labor requirements of specialists in various fields of medicine | | + | | |
| 4.3. Student counseling and support | | | | | | | |
| The educational organization must: | | | | | | | |
| 53 | 9 | 4.3.1. | demonstrate readiness to provide students with access to the student academic counseling system | | + | | |
| 54 | 10 | 4.3.2. | demonstrate readiness to provide academic counseling when monitoring and monitoring student progress, including the analysis of unintentional incidents | | + | | |
| 55 | 11 | 4.3.3. | demonstrate readiness to provide students with access to the student academic counseling system + 54 10 4.3.2, provide a student support program focused on social, financial and personal needs | | + | | |
| 56 | 12 | 4.3.4. | demonstrate readiness to allocate resources for social and personal support of students; ensure confidentiality regarding counseling and support | | + | | |
| 57 | 13 | 4.3.5. | demonstrate readiness for professional orientation, counseling and career planning | | + | | |
| 58 | 14 | 4.3.6. | demonstrate readiness to provide advice and support in the event of a professional crisis; involve student organizations/associations in solving students' problem situations | | + | | |
| 4.4. Student representation | | | | | | | |
| The educational organization should: | | | | | | | |
| 59 | 15 | 4.4.1. | have a policy and implement the practice of student representation and their respective participation in the development of the mission and intended learning outcomes, in the development of the EP, planning training conditions for students, assessment and management of the EP | | + | | |
| 60 | 16 | 4.4.2. | demonstrate readiness to encourage representatives of students to participate in decision-making on educational processes, conditions and rules of training | | + | | |
| 4.5 Working conditions | | | | | | | |
| The educational organization should: | | | | | | | |
| 61 | 17 | 4.5.1. | provide a training program with appropriate remuneration/scholarships or other means of financing and motivating students | | + | | |
| 62 | 18 | 4.5.2. | guarantee students' access to patient care, including calling a doctor, where appropriate | | + | | |
| 63 | 19 | 4.5.3. | demonstrate evidence of readiness to define and publish conditions work and responsibility of students | | + | | |
| 64 | 20 | 4.5.4. | provide for interruptions of training caused by pregnancy (including maternity/paternity leave, child care), illness, military service or secondment for additional training | | + | | |
| 65 | 21 | 4.5.5. | strive to ensure that the work components in the student's work do not dominate the educational component / training | | + | | |
| 66 | 22 | 4.5.6. | take into account the needs of patients, continuity of medical care and educational needs of students, when drawing up a work plan and schedule, including work on call | | + | | |
| 67 | 23 | 4.5.7. | allow distance learning in special circumstances, in accordance with the individual educational trajectory and work experience of the student, providing evidence that the total duration and quality of distance learning is not less than that of full-time | | + | | |

| | | | | | | | |
|---|----|--------|--|----------|-----------|----------|----------|
| | | | training | | | | |
| 68 | 24 | 4.5.8. | provide for the possibility of continuing education under conditions of study breaks related to pregnancy (including maternity / paternity leave), illness, military service or secondment | | + | | |
| Total | | | | 0 | 24 | 0 | 0 |
| Standard 5. ACADEMIC STAFF/TEACHERS | | | | | | | |
| 5.1. Recruitment and Selection Policy | | | | | | | |
| The education organization should develop and implement a recruitment and selection policy that: | | | | | | | |
| 69 | 1 | 5.1.1. | takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical / professional merits of applicants, including the proper ratio between pedagogical, scientific and professional qualifications | | + | | |
| 70 | 2 | 5.1.2. | defines the duties of teachers, including the balance between teaching, scientific and other functions, taking into account the mission of the EP educational and health system needs | | + | | |
| 71 | 3 | 5.1.3. | ensures that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, and that teachers of narrow specialties, if necessary, are approved for appropriate training periods depending on their qualifications | + | | | |
| 72 | 4 | 5.1.4. | encourages participation in development programs use the expertise of educational activities to increase the potential of academic staff, determine the level of remuneration for participation in postgraduate education | | | + | |
| 5.2. | | | | | | | |
| Staff Development Policy | | | | | | | |
| The educational organization should develop and implement a staff development policy that aims to: | | | | | | | |
| 73 | 5 | 5.2.1. | ensure that teachers have sufficient time for training, consulting and independent development | | + | | |
| 74 | 6 | 5.2.2. | have a structure responsible for the development of academic staff, ensure that academic staff is regularly evaluated | | + | | |
| 75 | 7 | 5.2.3. | development and implementation of a policy to support academic staff in pedagogy and professional development for further professional development; evaluate and recognize the scientific and academic achievements of teachers | | + | | |
| 76 | 8 | 5.2.4. | the ability to take into account the ratio of “teacher-student” depending on the various components of the EP, taking into account the features that ensure close personal communication with interaction and monitoring of students | | + | | |
| Total | | | | 1 | 6 | 1 | 0 |
| Standard 6. EDUCATIONAL RESOURCES | | | | | | | |
| 6.1. Material and technical base | | | | | | | |
| The educational organization must: | | | | | | | |
| 77 | 1 | 6.1.1. | demonstrate its readiness to provide students with sufficient material and technical base to ensure adequate implementation of the EP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies | | + | | |
| 78 | 2 | 6.1.2. | demonstrate readiness to improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of education at the postgraduate level | | + | | |
| 6.2. Educational environment | | | | | | | |
| The educational organization should: | | | | | | | |
| 79 | 3 | 6.2.1. | demonstrate a willingness to provide the necessary resources for students to acquire adequate practical experience, including the selection and approval of a clinical base as an educational environment; access to sufficient clinical / practical facilities/bases to provide training; sufficient number and diversity of patients; appropriate diversity of clinical cases to | | + | | |

| | | | | | | | |
|---|----|--------|--|--|---|--|--|
| | | | meet the goals and objectives of training, including the use of resources in both inpatient | | | | |
| 80 | 4 | 6.2.2. | demonstrate a willingness to guarantee the number of patients and the corresponding variety of clinical cases when choosing a training environment, allowing you to gain clinical experience in all aspects of the chosen specialty, including training in organization and management in the field of health and disease prevention; training in a university environment; training in the field of health care and prevention; training in the field of health care; training in the field of health care. clinic, as well as training in other relevant clinics/institutions and community facilities / locations, if necessary | | + | | |
| 6.3. Information technologies | | | | | | | |
| The educational organization should: | | | | | | | |
| 81 | 5 | 6.3.1. | guarantee access to information and communication technologies and other electronic media | | + | | |
| 82 | 6 | 6.3.2. | demonstrate readiness to use information and communication technologies effectively and ethically in the educational | | + | | |
| 83 | 7 | 6.3.3. | provide access for teachers and students to use information and communication technologies: for independent learning; communication with colleagues; access to health information resources and relevant patient data; patient supervision and work in the health care system to provide medical care | | + | | |
| 6.4 Clinical teams | | | | | | | |
| The educational organization should: | | | | | | | |
| 84 | 8 | 6.4.1. | demonstrate readiness to provide students with the opportunity to gain experience working in a team with colleagues and other medical professionals | | + | | |
| 85 | 9 | 6.4.2. | demonstrate willingness to encourage training in a multidisciplinary / interprofessional team, and promote the ability to guide and train other health professionals | | + | | |
| 6.5. Medical and scientific research | | | | | | | |
| The educational organization should: | | | | | | | |
| 86 | 10 | 6.5.1. | demonstrate readiness to guarantee and provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, ensure integration and balance between training and research | | + | | |
| 87 | 11 | 6.5.2. | demonstrate readiness to encourage students to participate in medical scientific research devoted to the study of the state and quality of health of the population and the health care system, provide sufficient time for students to conduct research within the educational program, provide access to research facilities and activities in the places of training | | + | | |
| 6.6. Educational expertise | | | | | | | |
| The educational organization should: | | | | | | | |
| 88 | 12 | 6.6.1. | define and implement a policy for the use of educational expertise at the stage of planning, implementing and evaluating the program | | + | | |
| 89 | 13 | 6.6.2. | encourage the development of expertise in the evaluation of education and research in medical education as a discipline, promote the desire and interests of employees in conducting research in medical education | | + | | |
| 6.7. Alternative learning and exchange in the field of education | | | | | | | |
| The educational organization should: | | | | | | | |
| 90 | 14 | 6.7.1. | define and implement a policy of accessibility of individual learning opportunities in other educational institutions of the | | + | | |

| | | | | | | | |
|--|----|--------|--|----------|-----------|----------|----------|
| | | | appropriate level within or outside the country, transfer and offset of educational credits and learning outcomes | | | | |
| 91 | 15 | 6.7.2. | demonstrate readiness to promote regional and international exchange staff (academic, administrative and teaching staff) and students, providing appropriate resources; establish links with relevant national and international bodies for the exchange and mutual recognition of learning elements | | + | | |
| Total | | | | 0 | 11 | 4 | 0 |
| Standard 7. EVALUATION OF THE EDUCATIONAL PROGRAM | | | | | | | |
| 7.1. Mechanisms for monitoring and evaluating the program | | | | | | | |
| The educational organization should: | | | | | | | |
| 92 | 1 | 7.1.1. | have regulated procedures for monitoring and periodically evaluating the EP, learning outcomes, progress and academic performance of students with the involvement of key stakeholders | | + | | |
| 93 | 2 | 7.1.2. | demonstrate evidence of readiness to regularly monitor the EP, assess the relationship between personnel policy and needs in the field of education and the health system, evaluate the educational process, methods for evaluating students, student progress, qualifications academic staff, assessment and analysis of identified problems, make sure that the relevant evaluation results affect the quality of the EP | | | + | |
| 94 | 3 | 7.1.3. | demonstrate a willingness to make the evaluation process and results transparent to all stakeholders | | | + | |
| 7.2. Teacher and student feedback | | | | | | | |
| The educational organization should: | | | | | | | |
| 95 | 4 | 7.2.1. | demonstrate evidence of readiness to systematically conduct, analyze and respond to feedback from teachers and students | | | + | |
| 96 | 5 | 7.2.2. | demonstrate evidence of readiness to actively involve teachers and students in the planning of the program evaluation and use the evaluation results to improve the program | | | + | |
| 7.3 Results of training of qualified specialists | | | | | | | |
| The educational organization should: | | | | | | | |
| 97 | 6 | 7.3.1. | demonstrate evidence of readiness to continuously monitor qualified specialists; provide feedback on the clinical practice of qualified specialists from employers; establish and apply a mechanism for evaluating the program, using the collected data on the results of performing clinical practice of qualified specialists | | + | | |
| 98 | 7 | 7.3.2. | demonstrate evidence of readiness to inform students about the results of evaluating clinical practice structural units, responsible for the selection of students, development and planning of the educational program, advising students | | + | | |
| 7.4. Stakeholder engagement | | | | | | | |
| The educational organization should: | | | | | | | |
| 99 | 8 | 7.4.1. | demonstrate evidence of readiness to involve key stakeholders in monitoring and evaluating the EP | | + | | |
| 100 | 9 | 7.4.2. | demonstrate evidence of readiness to provide interested parties with access to the results of the course and educational program evaluation; take into account the results of feedback from qualified specialists; take into account the results of feedback on the EP | | + | | |
| Total | | | | 0 | 5 | 4 | 0 |
| Standard 8. MANAGEMENT AND ADMINISTRATION | | | | | | | |
| 8.1. Management | | | | | | | |
| The educational organization should: | | | | | | | |
| 101 | 1 | 8.1.1. | demonstrate evidence of readiness to document completion of training by issuing degrees, diplomas, certificates or other official certificates of qualification; provide evidence of formal qualifications provided as a basis for official recognition of a specialist in the chosen field of medicine at the national level at | | + | | |

| | | | | | | | |
|---|----|--------|--|----------|-----------|-----------|----------|
| | | | the national and international level | | | | |
| 102 | 2 | 8.1.2. | demonstrate evidence of readiness to be responsible for quality assurance processes | | | + | |
| 103 | 3 | 8.1.3. | demonstrate evidence of readiness to ensure that the EP meets the health needs of society and the health system, to ensure transparency in the work of management structures and their decisions | | | + | |
| 8.2. Academic leadership | | | | | | | |
| The educational organization should: | | | | | | | |
| 104 | 4 | 8.2.1. | demonstrate evidence of a willingness to take responsibility for the leadership/academic leadership and organization of postgraduate medical education. | | | + | |
| 105 | 5 | 8.2.2. | demonstrate evidence of readiness to periodically evaluate academic leadership regarding the achievement миссии of the EP's mission and expected results. learning outcomes | | | + | |
| 8.3. Training budget and allocation of resources | | | | | | | |
| The educational organization should: | | | | | | | |
| 106 | 6 | 8.3.1. | have a clear distribution of responsibility and authority for providing resources to the educational program, including the target training budget | | | + | |
| 107 | 7 | 8.3.2. | demonstrate evidence of readiness to allocate resources necessary for the implementation of the EP and allocate educational resources in accordance with their needs | | | + | |
| 108 | 8 | 8.3.3. | demonstrate evidence of readiness to manage the budget in such a way as to meet the functional responsibilities of the academic staff and students, by introducing innovations in the program | | | + | |
| 8.4. Administrative staff and management | | | | | | | |
| The educational organization must: | | | | | | | |
| 109 | 9 | 8.4.1. | have an appropriate administrative staff, including their number and composition in accordance with their qualifications, to ensure the implementation of ensure proper management and allocation of resources | | | + | |
| 110 | 10 | 8.4.2. | develop and implement an internal management quality assurance program that includes regular reviews and submission of the EP by academic management for regular review in order to achieve high quality | | | | + |
| 8.5. Requirements and rules | | | | | | | |
| An educational organization should: | | | | | | | |
| 111 | 11 | 8.5.1. | comply with national legislation regarding the number and types of recognized medical specialties for which approved GP programs are developed | | | + | |
| 112 | 12 | 8.5.2. | discuss and approve the postgraduate medical education program in cooperation with all interested parties | | | + | |
| 8.6. Informing the public | | | | | | | |
| The educational organization must: | | | | | | | |
| 113 | 13 | 8.6.1. | demonstrate evidence of readiness to publish on the official website of the educational organization and in the media complete and reliable information about the EP and its achievements | | | + | |
| Total | | | | 0 | 11 | 2 | 0 |
| TOTAL IN GENERAL | | | | 2 | 88 | 23 | 0 |

7R01102 Pediatrics

| # N\N | # N\N | # Crete. | EVALUATION CRITERIA | NGO Position | | | |
|--|----------|-------------|--|--------------|--------------|---------------------|----------------|
| | | | | Strong | Satisfactory | Implies Improvement | Unsatisfactory |
| Standard 1 "MISSION AND LEARNING OUTCOMES" | | | | | | | |
| 1.1 Mission definition | | | | | | | |
| The educational organization should: | | | | | | | |
| 1 | 1 | 1.1.11. | define the mission of the Post-graduate Medical Education Center and bring it to the attention of stakeholders and the health sector | | + | | |
| 2 | 2 | 1.1.2. | define the mission based on the needs of society in health issues, the needs of the health care system, and other aspects of social responsibility | | + | | |
| 3 | 3 | 1.1.3. | define the training program, containing theoretical and practical components with an emphasis on for the last one, the result of which will be the doctor: <ul style="list-style-type: none"> ▪ competent in the chosen field of medicine, which includes good medical practice, ▪ able to work independently at a high professional level, ▪ able to work in a professional and interprofessional team, ▪ ready to learn throughout life and to participate in continuing medical education /professional development. ▪ able to provide appropriate patient care that is appropriate, effective, compassionate and safe in addressing health problems and health promotion issues, including a patient-centered and systematic approach | | + | | |
| 4 | 4 | 1.1.4. | provide a willingness to provide appropriate working conditions for students to maintain their health | | + | | |
| 5 | 5 | 1.1.5. | ensure that the mission of the EP is to: It includes the development of innovations in the educational process that allow the development of broader and more specialized competencies than those defined in the framework of the main required competencies; the development of scientific competence of students so that doctors can conduct research in the chosen field of medicine; opportunities for doctors to become active participants in solving issues related to social determinants of health | | | + | |
| 1.2 Professionalism and professional autonomy | | | | | | | |
| The educational organization should: | | | | | | | |
| 6 | 6 | 1.2.1. | include professionalism in the training of physicians and ensure that training promotes professional autonomy to enable them to act in the best interests of the patient and society in the future | | + | | |
| 7 | 7 | 1.2.2. | provide for cooperation with the government and other partners, while maintaining appropriate independence from them | + | | | |
| 1.3. Learning outcomes | | | | | | | |

| The educational organization should: | | | | | | | |
|---|----|---------|---|--------------|----------|-----------|------------|
| 8 | 8 | 1.3.1. | determine the expected learning outcomes that students are expected to achieve. At the end of their training, they must have achieved all their post-graduate achievements in terms of knowledge, skills and behaviors/attitudes, an appropriate foundation for a future career in their chosen field of medicine, their future roles in the health sector, commitment and skills in implementing continuing education, the health needs of society, the needs of the health system and other aspects of social responsibility, professional development behavior | | + | | |
| 9 | 9 | 1.3.2. | define and publish the expected learning outcomes: general and specialty-specific, which students need to achieve | | + | | |
| 10 | 10 | 1.3.3. | demonstrate evidence of readiness to ensure appropriate behavior of students in relation to fellow students, teachers, medical staff, patients and their relatives | | + | | |
| 11 | 11 | 1.3.4. | determine the expected learning outcomes based on the results obtained at the level of basic medical education to ensure interaction between basic and postgraduate medical education | | + | | |
| 12 | 12 | 1.3.5 | provide for the possibility of students ' participation in research in the relevant field of healthcare | | | + | |
| 1.4. Participation in the formulation of the mission and learning outcomes | | | | | | | |
| The educational organization should: | | | | | | | |
| 13 | 13 | 1.4.14. | ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes | | + | | |
| 14 | 14 | 1.4.2. | ensure that the stated mission and expected learning outcomes are based on the opinions/suggestions of other stakeholders | | + | | |
| | | | | Total | 1 | 11 | 2 0 |
| Standard 2. EDUCATIONAL PROGRAM | | | | | | | |
| 2.1. Training approach | | | | | | | |
| The educational organization should: | | | | | | | |
| 15 | 1 | 2.1.1. | determine the training approach based on the expected results of training and official certificates of qualification provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level | | + | | |
| 16 | 2 | 2.1.2. | determine the training approach based on the results of basic medical education in a systematic and transparent manner, using practice-oriented training that includes and supports the learner's personal involvement in health care delivery and patient responsibility, their own learning process and clinical practice | | + | | |
| 17 | 3 | 2.1.3. | demonstrate evidence of readiness to ensure that appropriate training methods are used that integrate practical and theoretical components, guide the learner through mentoring and regular evaluation and feedback, including adherence to ethical requirements and norms | | | + | |
| 18 | 4 | 2.1.4. | demonstrate evidence of a willingness to ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, rights and responsibilities of students | | + | | |
| 19 | 5 | 2.1.5. | increase the degree of independence and responsibility of the student as they improve their knowledge, skills, and experience | | + | | |
| 20 | 6 | 2.1.6. | provide the opportunity to identify gender, cultural, and religious characteristics and properly prepare the student for interaction with the specified patient population | | + | | |

| 2.2. Scientific method | | | | | | | |
|---|----|--------|--|--|--|---|--|
| The educational organization should: | | | | | | | |
| 21 | 7 | 2.2.1. | throughout the entire training program, instill in students the principles of scientific methodology, including methods of analytical and critical thinking; methods of research in healthcare and evidence-based medicine | | | + | |
| 22 | 8 | 2.2.2. | strive to include in the EP a critical assessment of literature and scientific data, adapt content based on scientific developments in medicine, change the EP taking into account the achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system | | | + | |
| 2.3 Content of training | | | | | | | |
| The educational organization should: | | | | | | | |
| 23 | 9 | 2.3.1. | include in the training process the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decisions, communication skills, medical ethics, public health, medical law and forensic medicine, management disciplines, patient safety, physician protection, complementary medicine | | | + | |
| 24 | 10 | 2.3.2. | organize an educational program with an appropriate focus on patient safety and independence | | | + | |
| 25 | 11 | 2.3.3. | demonstrate evidence of readiness to provide adjustments and changes to the EP to ensure the development of knowledge, skills and thinking of different roles of graduates, compliance of the content of the EP with changing conditions and needs of society and the health system | | | + | |
| 2.4. Structure of the educational program, content and duration | | | | | | | |
| The educational organization should: | | | | | | | |
| 26 | 12 | 2.4.1. | describe the content, scope and sequence of courses and the duration of the EP; identify mandatory and selective components; combine practice and theory in the learning process; ensure compliance with national legislation that should be presented and described; ensure adequate impact on the quality of education. how local, national or regional health systems address the health problems and health care needs of the population | | | + | |
| 27 | 13 | 2.4.2. | take into account the results of previous basic medical education related to the chosen field of medicine | | | + | |
| 28 | 14 | 2.4.3. | define the graduate requirements for performing various roles in the healthcare system | | | + | |
| 2.5. Organization of training | | | | | | | |
| The educational organization should: | | | | | | | |
| 29 | 15 | 2.5.1. | define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process | | | + | |
| 30 | 16 | 2.5.2. | include in the planning and development of the educational program proper representation from teaching staff, students and other key and relevant stakeholders | | | + | |
| 31 | 17 | 2.5.3. | plan training in such a way as to introduce the student to a wide range of existing practical experience in the chosen field of medicine | | | + | |
| 32 | 18 | 2.5.4. | guarantee a variety of training locations, coordinate multiple training locations to gain appropriate access to different aspects of your chosen field of medicine | | | + | |
| 2.6. Communication of training, medical practice and the health system | | | | | | | |
| The educational organization should: | | | | | | | |
| 33 | 19 | 2.6.1. | provide for and ensure integration between theoretical training and professional development, develop training | | | + | |

| | | | | | | | |
|--|----|--------|---|----------|-----------|----------|----------|
| | | | through medical practice and professional development; integrate training and medical practice through patient care; ensure that training complements and takes into account the needs for medical | | | | |
| 34 | 20 | 2.6.2. | make effective use of the health system's capacity to provide medical care for training purposes | | + | | |
| Total | | | | 0 | 14 | 6 | 0 |
| Standard 3. STUDENT ASSESSMENT POLICY | | | | | | | |
| 3.1. Methods of evaluation of the | | | | | | | |
| The educational organization should: | | | | | | | |
| 35 | 1 | 3.1.1. | to develop and implement a policy of assessment/evaluation of students; to determine, approve and publish the principles, objectives, methods and practices of assessment of students, including, if necessary, to the audit specialists | | + | | |
| 36 | 2 | 3.1.2. | to ensure that the procedures of assessment covers the knowledge, skills, attitudes and professional behavior | | + | | |
| 37 | 3 | 3.1.3. | to guarantee the use of an additional set of methods and formats of assessment in accordance with their "assessment", including the use of multiple assessors and multiple assessment methods | | | + | |
| 38 | 4 | 3.1.4. | to determine the criteria for examinations or other forms of assessment, including the number of mulligans | | + | | |
| 39 | 5 | 3.1.5. | to provide for the possibility of documenting the reliability, validity and fairness of assessment methods students | | | + | |
| 40 | 6 | 3.1.6. | implement a system of appeal against assessment results, based on the principles of justice, or in accordance with the relevant legal procedures | | + | | |
| 41 | 7 | 3.1.7. | to introduce new methods of assessment in accordance with the need to document the various types and stages of training and evaluation | | | + | |
| 42 | 8 | 3.1.8. | to provide for the promotion of the examination process methods evaluation by external experts | | | + | |
| 3.2. The relationship between assessment and learning | | | | | | | |
| The educational organization must: | | | | | | | |
| 43 | 9 | 3.2.1. | to guarantee the use of principles, methods and practices assessments that are comparable to the expected outcomes and teaching methods; to ensure that students will achieve the expected results of education; to promote the training of students; to ensure the adequacy and relevance of education; provide timely, specific, constructive and objective feedback from trainees on the basis of their evaluation | | | + | |
| 44 | 10 | 3.2.2. | strive to use evaluation principles, methods and practices that encourage integrated learning, encourage student involvement in clinical practice, and promote interprofessional training | | | + | |
| Total | | | | 0 | 4 | 6 | 0 |
| Standard 4. TRAINEES | | | | | | | |
| 4.1. Selection and Admission Policy | | | | | | | |
| The educational organization should: | | | | | | | |
| 45 | 1 | 4.1.1. | have a policy and implement admission practices based on the organization's mission and include a clearly defined position on the student selection process | | + | | |
| 46 | 2 | 4.1.2. | ensure a balance between learning opportunities and student admission; formulate and implement policies/rules for the selection of students according to the established criteria; have a policy and implement the practice of admission, admission of students with disabilities in accordance with the current laws and | | + | | |

| | | | | | | | |
|---|----|--------|--|-------|--|--|--|
| | | | regulations of the country; ensure a high level of knowledge and skills in the field of basic biomedical sciences, achieved at the previous level of basic medical education; ensure transparency and fairness selection procedures | | | | |
| 47 | 3 | 4.1.3. | have a policy and implement the practice of transferring students from other educational institutions, including foreign | ones+ | | | |
| 48 | 4 | 4.1.4. | guarantee in the selection procedure the opportunities of potential students to improve the quality of training in the chosen field of medicine; guarantee the transparency of the selection procedure; provide for an appeal mechanism for admission decisions | + | | | |
| 49 | 5 | 4.1.5 | demonstrate a willingness to involve student associations and other stakeholders in policy development and the selection process by periodically reviewing the admission policy and rules | + | | | |
| 4.2. Number of students | | | | | | | |
| The educational organization should: | | | | | | | |
| 50 | 6 | 4.2.1. | determine the number of accepted students in accordance with: clinical / practical training opportunities, the ability of the public organization to conduct appropriate control and monitoring of the educational process, material, technical and other available resources, information about the health needs of the society and the society | + | | | |
| 51 | 7 | 4.2.2. | provide for the possibility of periodically review the number and pool of accepted trainees in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector | + | | | |
| 52 | 8 | 4.2.3. | make it possible to adapt the number of potential trainees based on available information on the number of qualified candidates and information on national and international labor markets; adjust the number of potential trainees based on inherent unpredictability precise labor requirements of specialists in various fields of medicine | + | | | |
| 4.3. Student counseling and support | | | | | | | |
| The educational organization must: | | | | | | | |
| 53 | 9 | 4.3.1. | demonstrate readiness to provide students with access to the student academic counseling system | + | | | |
| 54 | 10 | 4.3.2. | demonstrate readiness to provide academic counseling when monitoring and monitoring student progress, including the analysis of unintentional incidents | + | | | |
| 55 | 11 | 4.3.3. | demonstrate readiness to provide students with access to the student academic counseling system + 54 10 4.3.2. provide a student support program focused on social, financial and personal needs | + | | | |
| 56 | 12 | 4.3.4. | demonstrate readiness to allocate resources for social and personal support of students; ensure confidentiality regarding counseling and support | + | | | |
| 57 | 13 | 4.3.5. | demonstrate readiness for professional orientation, counseling and career planning | + | | | |
| 58 | 14 | 4.3.6. | demonstrate readiness to provide advice and support in the event of a professional crisis; involve student organizations/associations in solving students ' problem situations | + | | | |
| 4.4. Student representation | | | | | | | |
| The educational organization should: | | | | | | | |
| 59 | 15 | 4.4.1. | have a policy and implement the practice of student representation and their respective participation in the development of the mission and intended learning | + | | | |

| | | | | | | | |
|---|----|--------|---|----------|-----------|----------|----------|
| | | | outcomes, in the development of the EP, planning training conditions for students, assessment and management of the EP | | | | |
| 60 | 16 | 4.4.2. | demonstrate readiness to encourage representatives of students to participate in decision-making on educational processes, conditions and rules of training | | + | | |
| 4.5 Working conditions | | | | | | | |
| The educational organization should: | | | | | | | |
| 61 | 17 | 4.5.1. | provide a training program with appropriate remuneration/ scholarships or other means of financing and motivating students | | + | | |
| 62 | 18 | 4.5.2. | guarantee students ' access to patient care, including calling a doctor, where appropriate | | + | | |
| 63 | 19 | 4.5.3. | demonstrate evidence of readiness to define and publish conditions work and responsibility of students | | + | | |
| 64 | 20 | 4.5.4. | provide for interruptions of training caused by pregnancy (including maternity/paternity leave, child care), illness, military service or secondment for additional training | | + | | |
| 65 | 21 | 4.5.5. | strive to ensure that the work components in the student's work do not dominate the educational component / training | | + | | |
| 66 | 22 | 4.5.6. | take into account the needs of patients, continuity of medical care and educational needs of students, when drawing up a work plan and schedule, including work on call | | + | | |
| 67 | 23 | 4.5.7. | allow distance learning in special circumstances, in accordance with the individual educational trajectory and work experience of the student, providing evidence that the total duration and quality of distance learning is not less than that of full-time training | | + | | |
| 68 | 24 | 4.5.8. | provide for the possibility of continuing education under conditions of study breaks related to pregnancy (including maternity / paternity leave), illness, military service or secondment | | + | | |
| Total | | | | 0 | 24 | 0 | 0 |
| Standard 5. ACADEMIC STAFF/TEACHERS | | | | | | | |
| 5.1. Recruitment and Selection Policy | | | | | | | |
| The education organization should develop and implement a recruitment and selection policy that: | | | | | | | |
| 69 | 1 | 5.1.1. | takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical / professional merits of applicants, including the proper ratio between pedagogical, scientific and professional qualifications | | + | | |
| 70 | 2 | 5.1.2. | defines the duties of teachers, including the balance between teaching, scientific and other functions, taking into account the mission of the EP educational and health system needs | | + | | |
| 71 | 3 | 5.1.3. | ensures that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, and that teachers of narrow specialties, if necessary, are approved for appropriate training periods depending on their qualifications | + | | | |
| 72 | 4 | 5.1.4. | encourages participation in development programs use the expertise of educational activities to increase the potential of academic staff, determine the level of remuneration for participation in postgraduate education | | | + | |
| 5.2. | | | | | | | |
| Staff Development Policy | | | | | | | |
| The educational organization should develop and implement a staff development policy that aims to: | | | | | | | |
| 73 | 5 | 5.2.1. | ensure that teachers have sufficient time for training, | | + | | |

| | | | | | | | |
|---|----|--------|---|----------|-----------|----------|----------|
| | | | communication technologies effectively and ethically in the educational | | | | |
| 83 | 7 | 6.3.3. | provide access for teachers and students to use information and communication technologies: for independent learning; communication with colleagues; access to health information resources and relevant patient data; patient supervision and work in the health care system to provide medical care | | + | | |
| 6.4 Clinical teams | | | | | | | |
| The educational organization should: | | | | | | | |
| 84 | 8 | 6.4.1. | demonstrate readiness to provide students with the opportunity to gain experience working in a team with colleagues and other medical professionals | | + | | |
| 85 | 9 | 6.4.2. | demonstrate willingness to encourage training in a multidisciplinary / interprofessional team, and promote the ability to guide and train other health professionals | | + | | |
| 6.5. Medical and scientific research | | | | | | | |
| The educational organization should: | | | | | | | |
| 86 | 10 | 6.5.1. | demonstrate readiness to guarantee and provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, ensure integration and balance between training and research | | | + | |
| 87 | 11 | 6.5.2. | demonstrate readiness to encourage students to participate in medical scientific research devoted to the study of the state and quality of health of the population and the health care system, provide sufficient time for students to conduct research within the educational program, provide access to research facilities and activities in the places of training | | | + | |
| 6.6. Educational expertise | | | | | | | |
| The educational organization should: | | | | | | | |
| 88 | 12 | 6.6.1. | define and implement a policy for the use of educational expertise at the stage of planning, implementing and evaluating the program | | | + | |
| 89 | 13 | 6.6.2. | encourage the development of expertise in the evaluation of education and research in medical education as a discipline, promote the desire and interests of employees in conducting research in medical education | | | + | |
| 6.7. Alternative learning and exchange in the field of education | | | | | | | |
| The educational organization should: | | | | | | | |
| 90 | 14 | 6.7.1. | define and implement a policy of accessibility of individual learning opportunities in other educational institutions of the appropriate level within or outside the country, transfer and offset of educational credits and learning outcomes | | + | | |
| 91 | 15 | 6.7.2. | demonstrate readiness to promote regional and international exchange staff (academic, administrative and teaching staff) and students, providing appropriate resources; establish links with relevant national and international bodies for the exchange and mutual recognition of learning elements | | + | | |
| Total | | | | 0 | 11 | 4 | 0 |
| Standard 7. EVALUATION OF THE EDUCATIONAL PROGRAM | | | | | | | |
| 7.1. Mechanisms for monitoring and evaluating the program | | | | | | | |
| The educational organization should: | | | | | | | |
| 92 | 1 | 7.1.1. | have regulated procedures for monitoring and periodically evaluating the EP, learning outcomes, progress and academic performance of students with the involvement of key stakeholders | | + | | |

| | | | | | | | | |
|---|---|--------|--|--------------|----------|----------|----------|----------|
| 93 | 2 | 7.1.2. | demonstrate evidence of readiness to regularly monitor the EP, assess the relationship between personnel policy and needs in the field of education and the health system, evaluate the educational process, methods for evaluating students, student progress, qualifications academic staff, assessment and analysis of identified problems, make sure that the relevant evaluation results affect the quality of the EP | | | + | | |
| 94 | 3 | 7.1.3. | demonstrate a willingness to make the evaluation process and results transparent to all stakeholders | | | + | | |
| 7.2. Teacher and student feedback | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 95 | 4 | 7.2.1. | demonstrate evidence of readiness to systematically conduct, analyze and respond to feedback from teachers and students | | | + | | |
| 96 | 5 | 7.2.2. | demonstrate evidence of readiness to actively involve teachers and students in the planning of the program evaluation and use the evaluation results to improve the program | | | + | | |
| 7.3 Results of training of qualified specialists | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 97 | 6 | 7.3.1. | demonstrate evidence of readiness to continuously monitor qualified specialists; provide feedback on the clinical practice of qualified specialists from employers; establish and apply a mechanism for evaluating the program, using the collected data on the results of performing clinical practice of qualified specialists | | | + | | |
| 98 | 7 | 7.3.2. | demonstrate evidence of readiness to inform students about the results of evaluating clinical practice structural units, responsible for the selection of students, development and planning of the educational program, advising students | | | + | | |
| 7.4. Stakeholder engagement | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 99 | 8 | 7.4.1. | demonstrate evidence of readiness to involve key stakeholders in monitoring and evaluating the EP | | | + | | |
| 100 | 9 | 7.4.2. | demonstrate evidence of readiness to provide interested parties with access to the results of the course and educational program evaluation; take into account the results of feedback from qualified specialists; take into account the results of feedback on the EP | | | + | | |
| | | | | Total | 0 | 5 | 4 | 0 |
| Standard 8. MANAGEMENT AND ADMINISTRATION | | | | | | | | |
| 8.1. Management | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 101 | 1 | 8.1.1. | demonstrate evidence of readiness to document completion of training by issuing degrees, diplomas, certificates or other official certificates of qualification; provide evidence of formal qualifications provided as a basis for official recognition of a specialist in the chosen field of medicine at the national level at the national and international level | | | + | | |
| 102 | 2 | 8.1.2. | demonstrate evidence of readiness to be responsible for quality assurance processes | | | | + | |
| 103 | 3 | 8.1.3. | demonstrate evidence of readiness to ensure that the OP meets the health needs of society and the health system, to ensure transparency in the work of management structures and their decisions | | | + | | |
| 8.2. Academic leadership | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 104 | 4 | 8.2.1. | demonstrate evidence of a willingness to take | | | + | | |

| | | | | | | | |
|---|----|--------|--|----------|-----------|-----------|----------|
| | | | responsibility for the leadership/academic leadership and organization of postgraduate medical education. | | | | |
| 105 | 5 | 8.2.2. | demonstrate evidence of readiness to periodically evaluate academic leadership regarding the achievement миссии of the EP's mission and expected results. learning outcomes | | + | | |
| 8.3. Training budget and allocation of resources | | | | | | | |
| The educational organization should: | | | | | | | |
| 106 | 6 | 8.3.1. | have a clear distribution of responsibility and authority for providing resources to the educational program, including the target training budget | | + | | |
| 107 | 7 | 8.3.2. | demonstrate evidence of readiness to allocate resources necessary for the implementation of the EP and allocate educational resources in accordance with their needs | | + | | |
| 108 | 8 | 8.3.3. | demonstrate evidence of readiness to manage the budget in such a way as to meet the functional responsibilities of the academic staff and students, by introducing innovations in the program | | + | | |
| 8.4. Administrative staff and management | | | | | | | |
| The educational organization must: | | | | | | | |
| 109 | 9 | 8.4.1. | have an appropriate administrative staff, including their number and composition in accordance with their qualifications, to ensure the implementation of ensure proper management and allocation of resources | | + | | |
| 110 | 10 | 8.4.2. | develop and implement an internal management quality assurance program that includes regular reviews and submission of the EP by academic management for regular review in order to achieve high quality | | | + | |
| 8.5. Requirements and rules | | | | | | | |
| An educational organization should: | | | | | | | |
| 111 | 11 | 8.5.1. | comply with national legislation regarding the number and types of recognized medical specialties for which approved GP programs are developed | | + | | |
| 112 | 12 | 8.5.2. | discuss and approve the postgraduate medical education program in cooperation with all interested parties | | + | | |
| 8.6. Informing the public | | | | | | | |
| The educational organization must: | | | | | | | |
| 113 | 13 | 8.6.1. | demonstrate evidence of readiness to publish on the official website of the educational organization and in the media complete and reliable information about the EP and its achievements | | + | | |
| Total | | | | 0 | 11 | 2 | 0 |
| TOTAL IN GENERAL | | | | 2 | 86 | 25 | 0 |

7R01126 Anesthesiology and resuscitation adult, children

| # N\N | # N\N | # Crete. | EVALUATION CRITERIA | NGO Position | | | |
|--|----------|-------------|--|--------------|--------------|---------------------|----------------|
| | | | | Strong | Satisfactory | Implies Improvement | Unsatisfactory |
| Standard 1 "MISSION AND LEARNING OUTCOMES" | | | | | | | |
| 1.1 Mission definition | | | | | | | |
| The educational organization should: | | | | | | | |
| 1 | 1 | 1.1.11. | define the mission of the Post-graduate Medical Education Center and bring it to the attention of stakeholders and the health sector | | + | | |
| 2 | 2 | 1.1.2. | define the mission based on the needs of society in health issues, the needs of the health care system, and other aspects of social responsibility | | + | | |
| 3 | 3 | 1.1.3. | define the training program, containing theoretical and practical components with an emphasis on for the last one, the result of which will be the doctor: <ul style="list-style-type: none"> ▪ competent in the chosen field of medicine, which includes good medical practice, ▪ able to work independently at a high professional level, ▪ able to work in a professional and interprofessional team, ▪ ready to learn throughout life and to participate in continuing medical education /professional development. ▪ able to provide appropriate patient care that is appropriate, effective, compassionate and safe in addressing health problems and health promotion issues, including a patient-centered and systematic approach | | + | | |
| 4 | 4 | 1.1.4. | provide a willingness to provide appropriate working conditions for students to maintain their health | | + | | |
| 5 | 5 | 1.1.5. | ensure that the mission of the EP is to: It includes the development of innovations in the educational process that allow the development of broader and more specialized competencies than those defined in the framework of the main required competencies; the development of scientific competence of students so that doctors can conduct research in the chosen field of medicine; opportunities for doctors to become active participants in solving issues related to social determinants of health | | | + | |
| 1.2 Professionalism and professional autonomy | | | | | | | |
| An educational organization should: | | | | | | | |
| 6 | 6 | 1.2.1. | include professionalism in the training of physicians and ensure that training promotes professional autonomy to enable them to act in the best interests of the patient and society in the future | | + | | |
| 7 | 7 | 1.2.2. | provide for cooperation with the government and other partners, while maintaining appropriate independence from them | + | | | |
| 1.3. Learning outcomes | | | | | | | |

| The educational organization should: | | | | | | | |
|---|----|---------|---|--------------|----------|-----------|------------|
| 8 | 8 | 1.3.1. | determine the expected learning outcomes that students are expected to achieve. At the end of their training, they must have achieved all their post-graduate achievements in terms of knowledge, skills and behaviors/attitudes, an appropriate foundation for a future career in their chosen field of medicine, their future roles in the health sector, commitment and skills in implementing continuing education, the health needs of society, the needs of the health system and other aspects of social responsibility, professional development behavior | | + | | |
| 9 | 9 | 1.3.2. | define and publish the expected learning outcomes: general and specialty-specific, which students need to achieve | | + | | |
| 10 | 10 | 1.3.3. | demonstrate evidence of readiness to ensure appropriate behavior of students in relation to fellow students, teachers, medical staff, patients and their relatives | | + | | |
| 11 | 11 | 1.3.4. | determine the expected learning outcomes based on the results obtained at the level of basic medical education to ensure interaction between basic and postgraduate medical education | | + | | |
| 12 | 12 | 1.3.5 | provide for the possibility of students ' participation in research in the relevant field of healthcare | | | + | |
| 1.4. Participation in the formulation of the mission and learning outcomes | | | | | | | |
| The educational organization should: | | | | | | | |
| 13 | 13 | 1.4.14. | ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes | | + | | |
| 14 | 14 | 1.4.2. | ensure that the stated mission and expected learning outcomes are based on the opinions/suggestions of other stakeholders | | + | | |
| | | | | Total | 1 | 11 | 2 0 |
| Standard 2. EDUCATIONAL PROGRAM | | | | | | | |
| 2.1. Training approach | | | | | | | |
| The educational organization should: | | | | | | | |
| 15 | 1 | 2.1.1. | determine the training approach based on the expected results of training and official certificates of qualification provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level | | + | | |
| 16 | 2 | 2.1.2. | determine the training approach based on the results of basic medical education in a systematic and transparent manner, using practice-oriented training that includes and supports the learner's personal involvement in health care delivery and patient responsibility, their own learning process and clinical practice | | + | | |
| 17 | 3 | 2.1.3. | demonstrate evidence of readiness to ensure that appropriate training methods are used that integrate practical and theoretical components, guide the learner through mentoring and regular evaluation and feedback, including adherence to ethical requirements and norms | | | + | |
| 18 | 4 | 2.1.4. | demonstrate evidence of a willingness to ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, rights and responsibilities of students | | + | | |
| 19 | 5 | 2.1.5. | increase the degree of independence and responsibility of the student as they improve their knowledge, skills, and experience | | + | | |
| 20 | 6 | 2.1.6. | provide the opportunity to identify gender, cultural, and religious characteristics and properly prepare the student for interaction with the specified patient population | | + | | |

| 2.2. Scientific method | | | | | | | |
|---|----|--------|--|--|--|--|---|
| The educational organization should: | | | | | | | |
| 21 | 7 | 2.2.1. | throughout the entire training program, instill in students the principles of scientific methodology, including methods of analytical and critical thinking; methods of research in healthcare and evidence-based medicine | | | | + |
| 22 | 8 | 2.2.2. | strive to include in the EP a critical assessment of literature and scientific data, adapt content based on scientific developments in medicine, change the EP taking into account the achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system | | | | + |
| 2.3 Content of training | | | | | | | |
| The educational organization should: | | | | | | | |
| 23 | 9 | 2.3.1. | include in the training process the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decisions, communication skills, medical ethics, public health, medical law and forensic medicine, management disciplines, patient safety, physician protection, complementary medicine | | | | + |
| 24 | 10 | 2.3.2. | organize an educational program with an appropriate focus on patient safety and independence | | | | + |
| 25 | 11 | 2.3.3. | demonstrate evidence of readiness to provide adjustments and changes to the EP to ensure the development of knowledge, skills and thinking of different roles of graduates, compliance of the content of the EP with changing conditions and needs of society and the health system | | | | + |
| 2.4. Structure of the educational program, content and duration | | | | | | | |
| The educational organization should: | | | | | | | |
| 26 | 12 | 2.4.1. | describe the content, scope and sequence of courses and the duration of the EP; identify mandatory and selective components; combine practice and theory in the learning process; ensure compliance with national legislation that should be presented and described; ensure adequate impact on the quality of education. how local, national or regional health systems address the health problems and health care needs of the population | | | | + |
| 27 | 13 | 2.4.2. | take into account the results of previous basic medical education related to the chosen field of medicine | | | | + |
| 28 | 14 | 2.4.3. | define the graduate requirements for performing various roles in the healthcare system | | | | + |
| 2.5. Organization of training | | | | | | | |
| The educational organization should: | | | | | | | |
| 29 | 15 | 2.5.1. | define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process | | | | + |
| 30 | 16 | 2.5.2. | include in the planning and development of the educational program proper representation from teaching staff, students and other key and relevant stakeholders | | | | + |
| 31 | 17 | 2.5.3. | plan training in such a way as to introduce the student to a wide range of existing practical experience in the chosen field of medicine | | | | + |
| 32 | 18 | 2.5.4. | guarantee a variety of training locations, coordinate multiple training locations to gain appropriate access to different aspects of your chosen field of medicine | | | | + |
| 2.6. Communication of training, medical practice and the health system | | | | | | | |
| The educational organization should: | | | | | | | |

| | | | | | | | | |
|--|----|--------|---|----------|-----------|----------|----------|--|
| 33 | 19 | 2.6.1. | provide for and ensure integration between theoretical training and professional development, develop training through medical practice and professional development; integrate training and medical practice through patient care; ensure that training complements and takes into account the needs for medical | | | + | | |
| 34 | 20 | 2.6.2. | make effective use of the health system's capacity to provide medical care for training purposes | | + | | | |
| Total | | | | 0 | 14 | 6 | 0 | |
| Standard 3. STUDENT ASSESSMENT POLICY | | | | | | | | |
| 3.1. Methods of evaluation | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 35 | 1 | 3.1.1. | to develop and implement a policy of assessment/evaluation of students; to determine, approve and publish the principles, objectives, methods and practices of assessment of students, including, if necessary, to the audit specialists | | + | | | |
| 36 | 2 | 3.1.2. | to ensure that the procedures of assessment covers the knowledge, skills, attitudes and professional behavior | | + | | | |
| 37 | 3 | 3.1.3. | to guarantee the use of an additional set of methods and formats of assessment in accordance with their "assessment", including the use of multiple assessors and multiple assessment methods | | | | + | |
| 38 | 4 | 3.1.4. | to determine the criteria for examinations or other forms of assessment, including the number of mulligans | | + | | | |
| 39 | 5 | 3.1.5. | to provide for the possibility of documenting the reliability, validity and fairness of assessment methods students | | | | + | |
| 40 | 6 | 3.1.6. | implement a system of appeal against assessment results, based on the principles of justice, or in accordance with the relevant legal procedures | | + | | | |
| 41 | 7 | 3.1.7. | to introduce new methods of assessment in accordance with the need to document the various types and stages of training and evaluation | | | | + | |
| 42 | 8 | 3.1.8. | to provide for the promotion of the examination process methods evaluation by external experts | | | | + | |
| 3.2. The relationship between assessment and learning | | | | | | | | |
| The educational organization must: | | | | | | | | |
| 43 | 9 | 3.2.1. | to guarantee the use of principles, methods and practices assessments that are comparable to the expected outcomes and teaching methods; to ensure that students will achieve the expected results of education; to promote the training of students; to ensure the adequacy and relevance of education; provide timely, specific, constructive and objective feedback from trainees on the basis of their evaluation | | | | + | |
| 44 | 10 | 3.2.2. | strive to use evaluation principles, methods and practices that encourage integrated learning, encourage student involvement in clinical practice, and promote interprofessional training | | | | + | |
| Total | | | | 0 | 4 | 6 | 0 | |
| Standard 4. TRAINEES | | | | | | | | |
| 4.1. Selection and Admission Policy | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 45 | 1 | 4.1.1. | have a policy and implement admission practices based on the organization's mission and include a clearly defined position on the student selection process | | + | | | |
| 46 | 2 | 4.1.2. | ensure a balance between learning opportunities and student admission; formulate and implement policies/rules for the selection of students according to the established criteria; have a policy and implement the | | + | | | |

| | | | | | | | |
|---|----|--------|--|--|---|--|--|
| | | | practice of admission, admission of students with disabilities in accordance with the current laws and regulations of the country; ensure a high level of knowledge and skills in the field of basic biomedical sciences, achieved at the previous level of basic medical education; ensure transparency and fairness selection procedures | | | | |
| 47 | 3 | 4.1.3. | have a policy and implement the practice of transferring students from other educational institutions, including foreign | | + | | |
| 48 | 4 | 4.1.4. | guarantee in the selection procedure the opportunities of potential students to improve the quality of training in the chosen field of medicine; guarantee the transparency of the selection procedure; provide for an appeal mechanism for admission decisions | | + | | |
| 49 | 5 | 4.1.5 | demonstrate a willingness to involve student associations and other stakeholders in policy development and the selection process by periodically reviewing the admission policy and rules | | + | | |
| 4.2. Number of students | | | | | | | |
| The educational organization should: | | | | | | | |
| 50 | 6 | 4.2.1. | determine the number of accepted students in accordance with: clinical / practical training opportunities, the ability of the public / organization to conduct appropriate control and monitoring of the educational process, material, technical and other available resources, information about the health needs of the society and the society | | + | | |
| 51 | 7 | 4.2.2. | provide for the possibility of periodically review the number and pool of accepted trainees in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector | | + | | |
| 52 | 8 | 4.2.3. | make it possible to adapt the number of potential trainees based on available information on the number of qualified candidates and information on national and international labor markets; adjust the number of potential trainees based on inherent unpredictability precise labor requirements of specialists in various fields of medicine | | + | | |
| 4.3. Student counseling and support | | | | | | | |
| The educational organization must: | | | | | | | |
| 53 | 9 | 4.3.1. | demonstrate readiness to provide students with access to the student academic counseling system | | + | | |
| 54 | 10 | 4.3.2. | demonstrate readiness to provide academic counseling when monitoring and monitoring student progress, including the analysis of unintentional incidents | | + | | |
| 55 | 11 | 4.3.3. | demonstrate readiness to provide students with access to the student academic counseling system + 54 10 4.3.2. provide a student support program focused on social, financial and personal needs | | + | | |
| 56 | 12 | 4.3.4. | demonstrate readiness to allocate resources for social and personal support of students; ensure confidentiality regarding counseling and support | | + | | |
| 57 | 13 | 4.3.5. | demonstrate readiness for professional orientation, counseling and career planning | | + | | |
| 58 | 14 | 4.3.6. | demonstrate readiness to provide advice and support in the event of a professional crisis; involve student organizations/associations in solving students ' problem situations | | + | | |
| 4.4. Student representation | | | | | | | |
| The educational organization should: | | | | | | | |
| 59 | 15 | 4.4.1. | have a policy and implement the practice of student | | + | | |

| | | | | | | | |
|---|----|--------|---|----------|-----------|----------|----------|
| | | | representation and their respective participation in the development of the mission and intended learning outcomes, in the development of the EP, planning training conditions for students, assessment and management of the EP | | | | |
| 60 | 16 | 4.4.2. | demonstrate readiness to encourage representatives of students to participate in decision-making on educational processes, conditions and rules of training | | + | | |
| 4.5 Working conditions | | | | | | | |
| The educational organization should: | | | | | | | |
| 61 | 17 | 4.5.1. | provide a training program with appropriate remuneration/ scholarships or other means of financing and motivating students | | + | | |
| 62 | 18 | 4.5.2. | guarantee students ' access to patient care, including calling a doctor, where appropriate | | + | | |
| 63 | 19 | 4.5.3. | demonstrate evidence of readiness to define and publish conditions work and responsibility of students | | + | | |
| 64 | 20 | 4.5.4. | provide for interruptions of training caused by pregnancy (including maternity/paternity leave, child care), illness, military service or secondment for additional training | | + | | |
| 65 | 21 | 4.5.5. | strive to ensure that the work components in the student's work do not dominate the educational component / training | | + | | |
| 66 | 22 | 4.5.6. | take into account the needs of patients, continuity of medical care and educational needs of students, when drawing up a work plan and schedule, including work on call | | + | | |
| 67 | 23 | 4.5.7. | allow distance learning in special circumstances, in accordance with the individual educational trajectory and work experience of the student, providing evidence that the total duration and quality of distance learning is not less than that of full-time training | | + | | |
| 68 | 24 | 4.5.8. | provide for the possibility of continuing education under conditions of study breaks related to pregnancy (including maternity / paternity leave), illness, military service or secondment | | + | | |
| Total | | | | 0 | 24 | 0 | 0 |
| Standard 5. ACADEMIC STAFF/TEACHERS | | | | | | | |
| 5.1. Recruitment and Selection Policy | | | | | | | |
| The education organization should develop and implement a recruitment and selection policy that: | | | | | | | |
| 69 | 1 | 5.1.1. | takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical / professional merits of applicants, including the proper ratio between pedagogical, scientific and professional qualifications | | + | | |
| 70 | 2 | 5.1.2. | defines the duties of teachers, including the balance between teaching, scientific and other functions, taking into account the mission of the EP educational and health system needs | | + | | |
| 71 | 3 | 5.1.3. | ensures that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, and that teachers of narrow specialties, if necessary, are approved for appropriate training periods depending on their qualifications | | + | | |
| 72 | 4 | 5.1.4. | encourages participation in development programs use the expertise of educational activities to increase the potential of academic staff, determine the level of remuneration for participation in postgraduate education | | | | + |
| 5.2. Staff Development Policy | | | | | | | |
| The educational organization should develop and implement a staff development policy that aims to: | | | | | | | |

| | | | | | | | | |
|---|---|--------|--|--------------|----------|----------|----------|----------|
| 73 | 5 | 5.2.1. | ensure that teachers have sufficient time for training, consulting and independent development | | + | | | |
| 74 | 6 | 5.2.2. | have a structure responsible for the development of academic staff, ensure that academic staff is regularly evaluated | | . + | | | |
| 75 | 7 | 5.2.3. | development and implementation of a policy to support academic staff in pedagogy and professional development for further professional development; evaluate and recognize the scientific and academic achievements of teachers | | + | | | |
| 76 | 8 | 5.2.4. | the ability to take into account the ratio of “teacher-student” depending on the various components of the OP, taking into account the features that ensure close personal communication with interaction and monitoring of students | | + | | | |
| | | | | Total | 1 | 6 | 1 | 0 |
| Standard 6. EDUCATIONAL RESOURCES | | | | | | | | |
| 6.1. Material and technical base | | | | | | | | |
| The educational organization must: | | | | | | | | |
| 77 | 1 | 6.1.1. | demonstrate its readiness to provide students with sufficient material and technical base to ensure adequate implementation of the EP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies | | + | | | |
| 78 | 2 | 6.1.2. | demonstrate readiness to improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of education at the postgraduate level | | + | | | |
| 6.2. Educational environment | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 79 | 3 | 6.2.1. | demonstrate a willingness to provide the necessary resources for students to acquire adequate practical experience, including the selection and approval of a clinical base as an educational environment; access to sufficient clinical / practical facilities/bases to provide training; sufficient number and diversity of patients; appropriate diversity of clinical cases to meet the goals and objectives of training, including the use of resources in both inpatient | | + | | | |
| 80 | 4 | 6.2.2. | demonstrate a willingness to guarantee the number of patients and the corresponding variety of clinical cases when choosing a training environment, allowing you to gain clinical experience in all aspects of the chosen specialty, including training in organization and management in the field of health and disease prevention; training in a university environment; training in the field of health care and prevention; training in the field of health care; training in the field of health care. clinic, as well as training in other relevant clinics/institutions and community facilities / locations, if necessary | | + | | | |
| 6.3. Information technologies | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 81 | 5 | 6.3.1. | guarantee access to information and communication technologies and other electronic media | | + | | | |

| | | | | | | | | |
|---|----|--------|---|--------------|----------|-----------|----------|----------|
| 82 | 6 | 6.3.2. | demonstrate readiness to use information and communication technologies effectively and ethically in the educational | | + | | | |
| 83 | 7 | 6.3.3. | provide access for teachers and students to use information and communication technologies: for independent learning; communication with colleagues; access to health information resources and relevant patient data; patient supervision and work in the health care system to provide medical care | | + | | | |
| 6.4 Clinical teams | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 84 | 8 | 6.4.1. | demonstrate readiness to provide students with the opportunity to gain experience working in a team with colleagues and other medical professionals | | + | | | |
| 85 | 9 | 6.4.2. | demonstrate willingness to encourage training in a multidisciplinary / interprofessional team, and promote the ability to guide and train other health professionals | | + | | | |
| 6.5. Medical and scientific research | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 86 | 10 | 6.5.1. | demonstrate readiness to guarantee and provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, ensure integration and balance between training and research | | | + | | |
| 87 | 11 | 6.5.2. | demonstrate readiness to encourage students to participate in medical scientific research devoted to the study of the state and quality of health of the population and the health care system, provide sufficient time for students to conduct research within the educational program, provide access to research facilities and activities in the places of training | | | + | | |
| 6.6. Educational expertise | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 88 | 12 | 6.6.1. | define and implement a policy for the use of educational expertise at the stage of planning, implementing and evaluating the program | | | + | | |
| 89 | 13 | 6.6.2. | encourage the development of expertise in the evaluation of education and research in medical education as a discipline, promote the desire and interests of employees in conducting research in medical education | | | + | | |
| 6.7. Alternative learning and exchange in the field of education | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 90 | 14 | 6.7.1. | define and implement a policy of accessibility of individual learning opportunities in other educational institutions of the appropriate level within or outside the country, transfer and offset of educational credits and learning outcomes | | + | | | |
| 91 | 15 | 6.7.2. | demonstrate readiness to promote regional and international exchange staff (academic, administrative and teaching staff) and students, providing appropriate resources; establish links with relevant national and international bodies for the exchange and mutual recognition of learning elements | | + | | | |
| | | | | Total | 0 | 11 | 4 | 0 |
| Standard 7. EVALUATION OF THE EDUCATIONAL PROGRAM | | | | | | | | |
| 7.1. Mechanisms for monitoring and evaluating the program | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 92 | 1 | 7.1.1. | have regulated procedures for monitoring and periodically evaluating the EP, learning outcomes, progress and academic performance of students with the | | + | | | |

| | | | | | | | | |
|---|---|--------|--|--------------|----------|----------|----------|----------|
| | | | involvement of key stakeholders | | | | | |
| 93 | 2 | 7.1.2. | demonstrate evidence of readiness to regularly monitor the EP, assess the relationship between personnel policy and needs in the field of education and the health system, evaluate the educational process, methods for evaluating students, student progress, qualifications academic staff, assessment and analysis of identified problems, make sure that the relevant evaluation results affect the quality of the EP | | | | + | |
| 94 | 3 | 7.1.3. | demonstrate a willingness to make the evaluation process and results transparent to all stakeholders | | | | + | |
| 7.2. Teacher and student feedback | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 95 | 4 | 7.2.1. | demonstrate evidence of readiness to systematically conduct, analyze and respond to feedback from teachers and students | | | | + | |
| 96 | 5 | 7.2.2. | demonstrate evidence of readiness to actively involve teachers and students in the planning of the program evaluation and use the evaluation results to improve the program | | | | + | |
| 7.3 Results of training of qualified specialists | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 97 | 6 | 7.3.1. | demonstrate evidence of readiness to continuously monitor qualified specialists; provide feedback on the clinical practice of qualified specialists from employers; establish and apply a mechanism for evaluating the program, using the collected data on the results of performing clinical practice of qualified specialists | | | | + | |
| 98 | 7 | 7.3.2. | demonstrate evidence of readiness to inform students about the results of evaluating clinical practice structural units, responsible for the selection of students, development and planning of the educational program, advising students | | | | + | |
| 7.4. Stakeholder engagement | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 99 | 8 | 7.4.1. | demonstrate evidence of readiness to involve key stakeholders in monitoring and evaluating the EP | | | | + | |
| 100 | 9 | 7.4.2. | demonstrate evidence of readiness to provide interested parties with access to the results of the course and educational program evaluation; take into account the results of feedback from qualified specialists; take into account the results of feedback on the EP | | | | + | |
| | | | | Total | 0 | 5 | 4 | 0 |
| Standard 8. MANAGEMENT AND ADMINISTRATION | | | | | | | | |
| 8.1. Management | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 101 | 1 | 8.1.1. | demonstrate evidence of readiness to document completion of training by issuing degrees, diplomas, certificates or other official certificates of qualification; provide evidence of formal qualifications provided as a basis for official recognition of a specialist in the chosen field of medicine at the national level at the national and international level | | | | + | |
| 102 | 2 | 8.1.2. | demonstrate evidence of readiness to be responsible for quality assurance processes | | | | | + |
| 103 | 3 | 8.1.3. | demonstrate evidence of readiness to ensure that the EP meets the health needs of society and the health system, to ensure transparency in the work of management structures and their decisions | | | | + | |
| 8.2. Academic leadership | | | | | | | | |
| The educational organization should: | | | | | | | | |

| | | | | | | | | |
|---|----|--------|--|-------------------------|----------|-----------|-----------|----------|
| 104 | 4 | 8.2.1. | demonstrate evidence of a willingness to take responsibility for the leadership/academic leadership and organization of postgraduate medical education. | | + | | | |
| 105 | 5 | 8.2.2. | demonstrate evidence of readiness to periodically evaluate academic leadership regarding the achievement миссии of the EP's mission and expected results. learning outcomes | | + | | | |
| 8.3. Training budget and allocation of resources | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 106 | 6 | 8.3.1. | have a clear distribution of responsibility and authority for providing resources to the educational program, including the target training budget | | + | | | |
| 107 | 7 | 8.3.2. | demonstrate evidence of readiness to allocate resources necessary for the implementation of the EP and allocate educational resources in accordance with their needs | | + | | | |
| 108 | 8 | 8.3.3. | demonstrate evidence of readiness to manage the budget in such a way as to meet the functional responsibilities of the academic staff and students, by introducing innovations in the program | | + | | | |
| 8.4. Administrative staff and management | | | | | | | | |
| The educational organization must: | | | | | | | | |
| 109 | 9 | 8.4.1. | have an appropriate administrative staff, including their number and composition in accordance with their qualifications, to ensure the implementation of ensure proper management and allocation of resources | | + | | | |
| 110 | 10 | 8.4.2. | develop and implement an internal management quality assurance program that includes regular reviews and submission of the EP by academic management for regular review in order to achieve high quality | | | | + | |
| 8.5. Requirements and rules | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 111 | 11 | 8.5.1. | comply with national legislation regarding the number and types of recognized medical specialties for which approved GP programs are developed | | + | | | |
| 112 | 12 | 8.5.2. | discuss and approve the postgraduate medical education program in cooperation with all interested parties | | + | | | |
| 8.6. Informing the public | | | | | | | | |
| The educational organization must: | | | | | | | | |
| 113 | 13 | 8.6.1. | demonstrate evidence of readiness to publish on the official website of the educational organization and in the media complete and reliable information about the EP and its achievements | | + | | | |
| | | | | Total | 0 | 11 | 2 | 0 |
| | | | | TOTAL IN GENERAL | 2 | 86 | 25 | 0 |

7R01128 General Surgery

| # N\N | # N\N | # Crete. | EVALUATION CRITERIA | NGO Position | | | |
|--|----------|-------------|--|--------------|--------------|---------------------|----------------|
| | | | | Strong | Satisfactory | Implies Improvement | Unsatisfactory |
| Standard 1 "MISSION AND LEARNING OUTCOMES" | | | | | | | |
| 1.1 Mission definition | | | | | | | |
| The educational organization should: | | | | | | | |
| 1 | 1 | 1.1.11. | define the mission of the Post-graduate Medical Education Center and bring it to the attention of stakeholders and the health sector | | + | | |
| 2 | 2 | 1.1.2. | define the mission based on the needs of society in health issues, the needs of the health care system, and other aspects of social responsibility | | + | | |
| 3 | 3 | 1.1.3. | define the training program, containing theoretical and practical components with an emphasis on for the last one, the result of which will be the doctor: <ul style="list-style-type: none"> ▪ competent in the chosen field of medicine, which includes good medical practice, ▪ able to work independently at a high professional level, ▪ able to work in a professional and interprofessional team, ▪ ready to learn throughout life and to participate in continuing medical education /professional development. ▪ able to provide appropriate patient care that is appropriate, effective, compassionate and safe in addressing health problems and health promotion issues, including a patient-centered and systematic approach | | + | | |
| 4 | 4 | 1.1.4. | provide a willingness to provide appropriate working conditions for students to maintain their health | | + | | |
| 5 | 5 | 1.1.5. | ensure that the mission of the EP is to: It includes the development of innovations in the educational process that allow the development of broader and more specialized competencies than those defined in the framework of the main required competencies; the development of scientific competence of students so that doctors can conduct research in the chosen field of medicine; opportunities for doctors to become active participants in solving issues related to social determinants of health | | + | | |
| 1.2 Professionalism and professional autonomy | | | | | | | |
| The educational organization should: | | | | | | | |
| 6 | 6 | 1.2.1. | include professionalism in the training of physicians and ensure that training promotes professional autonomy to enable them to act in the best interests of the patient and society in the future | | + | | |
| 7 | 7 | 1.2.2. | provide for cooperation with the government and other partners, while maintaining appropriate independence from them | + | | | |
| 1.3. Learning outcomes | | | | | | | |

| An educational organization should: | | | | | | | |
|---|----|---------|---|--------------|----------|-----------|------------|
| 8 | 8 | 1.3.1. | determine the expected learning outcomes that students are expected to achieve. At the end of their training, they must have achieved all their post-graduate achievements in terms of knowledge, skills and behaviors/attitudes, an appropriate foundation for a future career in their chosen field of medicine, their future roles in the health sector, commitment and skills in implementing continuing education, the health needs of society, the needs of the health system and other aspects of social responsibility, professional development behavior | | + | | |
| 9 | 9 | 1.3.2. | define and publish the expected learning outcomes: general and specialty-specific, which students need to achieve | | + | | |
| 10 | 10 | 1.3.3. | demonstrate evidence of readiness to ensure appropriate behavior of students in relation to fellow students, teachers, medical staff, patients and their relatives | | + | | |
| 11 | 11 | 1.3.4. | determine the expected learning outcomes based on the results obtained at the level of basic medical education to ensure interaction between basic and postgraduate medical education | | + | | |
| 12 | 12 | 1.3.5 | provide for the possibility of students ' participation in research in the relevant field of healthcare | | | + | |
| 1.4. Participation in the formulation of the mission and learning outcomes | | | | | | | |
| The educational organization should: | | | | | | | |
| 13 | 13 | 1.4.14. | ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes | | + | | |
| 14 | 14 | 1.4.2. | ensure that the stated mission and expected learning outcomes are based on the opinions/suggestions of other stakeholders | | + | | |
| | | | | Total | 1 | 12 | 1 0 |
| Standard 2. EDUCATIONAL PROGRAM | | | | | | | |
| 2.1. Training approach | | | | | | | |
| The educational organization should: | | | | | | | |
| 15 | 1 | 2.1.1. | determine the training approach based on the expected results of training and official certificates of qualification provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level | | + | | |
| 16 | 2 | 2.1.2. | determine the training approach based on the results of basic medical education in a systematic and transparent manner, using practice-oriented training that includes and supports the learner's personal involvement in health care delivery and patient responsibility, their own learning process and clinical practice | | + | | |
| 17 | 3 | 2.1.3. | demonstrate evidence of readiness to ensure that appropriate training methods are used that integrate practical and theoretical components, guide the learner through mentoring and regular evaluation and feedback, including adherence to ethical requirements and norms | | | + | |
| 18 | 4 | 2.1.4. | demonstrate evidence of a willingness to ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, rights and responsibilities of students | | + | | |
| 19 | 5 | 2.1.5. | increase the degree of independence and responsibility of the student as they improve their knowledge, skills, and experience | | + | | |
| 20 | 6 | 2.1.6. | provide the opportunity to identify gender, cultural, and religious characteristics and properly prepare the student for interaction with the specified patient population | | + | | |

| 2.2. Scientific method | | | | | | | |
|---|----|--------|--|--|--|--|---|
| The educational organization should: | | | | | | | |
| 21 | 7 | 2.2.1. | throughout the entire training program, instill in students the principles of scientific methodology, including methods of analytical and critical thinking; methods of research in healthcare and evidence-based medicine | | | | + |
| 22 | 8 | 2.2.2. | strive to include in the EP a critical assessment of literature and scientific data, adapt content based on scientific developments in medicine, change the OP taking into account the achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system | | | | + |
| 2.3 Content of training | | | | | | | |
| The educational organization should: | | | | | | | |
| 23 | 9 | 2.3.1. | include in the training process the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decisions, communication skills, medical ethics, public health, medical law and forensic medicine, management disciplines, patient safety, physician protection, complementary medicine | | | | + |
| 24 | 10 | 2.3.2. | organize an educational program with an appropriate focus on patient safety and independence | | | | + |
| 25 | 11 | 2.3.3. | demonstrate evidence of readiness to provide adjustments and changes to the EP to ensure the development of knowledge, skills and thinking of different roles of graduates, compliance of the content of the EP with changing conditions and needs of society and the health system | | | | + |
| 2.4. Structure of the educational program, content and duration | | | | | | | |
| The educational organization should: | | | | | | | |
| 26 | 12 | 2.4.1. | describe the content, scope and sequence of courses and the duration of the EP; identify mandatory and selective components; combine practice and theory in the learning process; ensure compliance with national legislation that should be presented and described; ensure adequate impact on the quality of education. how local, national or regional health systems address the health problems and health care needs of the population | | | | + |
| 27 | 13 | 2.4.2. | take into account the results of previous basic medical education related to the chosen field of medicine | | | | + |
| 28 | 14 | 2.4.3. | define the graduate requirements for performing various roles in the healthcare system | | | | + |
| 2.5. Organization of training | | | | | | | |
| The educational organization should: | | | | | | | |
| 29 | 15 | 2.5.1. | define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process | | | | + |
| 30 | 16 | 2.5.2. | include in the planning and development of the educational program adequate representation from teaching staff, students and other key and relevant stakeholders | | | | + |
| 31 | 17 | 2.5.3. | plan training in such a way as to introduce the student to a wide range of existing practical experience in the chosen field of medicine | | | | |
| 32 | 18 | 2.5.4. | guarantee diverse training locations, coordinate multiple places of study to gain appropriate access to different aspects of the chosen field of medicine | | | | + |
| 2.6. Communication of training, medical practice and the health system | | | | | | | |
| The educational organization should: | | | | | | | |

| | | | | | | | | |
|--|----|--------|--|----------|-----------|----------|----------|--|
| 33 | 19 | 2.6.1. | provide for and ensure integration between theoretical training and professional development, develop training through medical practice and professional development; integrate training and medical practice through patient care; ensure that training complements and takes into account the needs for medical | | | + | | |
| 34 | 20 | 2.6.2. | make effective use of the health system's capacity to provide medical care for training purposes | | | + | | |
| Total | | | | 0 | 14 | 6 | 0 | |
| Standard 3. STUDENT ASSESSMENT POLICY | | | | | | | | |
| 3.1. Methods of evaluation | | | | | | | | |
| The educational Organization should: | | | | | | | | |
| 35 | 1 | 3.1.1. | to develop and implement a policy of assessment/evaluation of students; to determine, approve and publish the principles, objectives, methods and practices of assessment of students, including, if necessary, to the audit specialists | | | + | | |
| 36 | 2 | 3.1.2. | to ensure that the procedures of assessment covers the knowledge, skills, attitudes and professional behavior | | | + | | |
| 37 | 3 | 3.1.3. | to guarantee the use of an additional set of methods and formats of assessment in accordance with their "assessment", including the use of multiple assessors and multiple assessment methods | | | | + | |
| 38 | 4 | 3.1.4. | to determine the criteria for examinations or other forms of assessment, including the number of mulligans | | | + | | |
| 39 | 5 | 3.1.5. | to provide for the possibility of documenting the reliability, validity and fairness of assessment methods students | | | | + | |
| 40 | 6 | 3.1.6. | implement a system of appeal against assessment results, based on the principles of justice, or in accordance with the relevant legal procedures | | | + | | |
| 41 | 7 | 3.1.7. | to introduce new methods of assessment in accordance with the need to document the various types and stages of training and evaluation | | | | + | |
| 42 | 8 | 3.1.8. | to provide for the promotion of the examination process methods evaluation by external experts | | | | + | |
| 3.2. The relationship between assessment and learning | | | | | | | | |
| The educational organization must: | | | | | | | | |
| 43 | 9 | 3.2.1. | to guarantee the use of principles, methods and practices assessments that are comparable to the expected outcomes and teaching methods; to ensure that students will achieve the expected learning outcomes; to promote the training of students; to ensure the adequacy and relevance of education; provide timely, specific, constructive and objective feedback from trainees on the basis of their evaluation | | | | + | |
| 44 | 10 | 3.2.2. | strive to use evaluation principles, methods and practices that encourage integrated learning, encourage student involvement in clinical practice, and promote interprofessional training | | | | + | |
| Total | | | | 0 | 4 | 6 | 0 | |
| Standard 4. TRAINEES | | | | | | | | |
| 4.1. Selection and Admission Policy | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 45 | 1 | 4.1.1. | have a policy and implement admission practices based on the organization's mission and include a clearly defined position on the student selection process | | | + | | |
| 46 | 2 | 4.1.2. | ensure a balance between learning opportunities and student admission; formulate and implement policies/rules for the selection of students according to the established criteria; have a policy and implement the | | | + | | |

| | | | | | | | |
|---|----|--------|--|--|-------|--|--|
| | | | practice of admission, admission of students with disabilities in accordance with the current laws and regulations of the country; ensure a high level of knowledge and skills in the field of basic biomedical sciences, achieved at the previous level of basic medical education; ensure transparency and fairness selection procedures | | | | |
| 47 | 3 | 4.1.3. | have a policy and implement the practice of transferring students from other educational institutions, including foreign | | ones+ | | |
| 48 | 4 | 4.1.4. | guarantee in the selection procedure the opportunities of potential students to improve the quality of training in the chosen field of medicine; guarantee the transparency of the selection procedure; provide for an appeal mechanism for admission decisions | | + | | |
| 49 | 5 | 4.1.5 | demonstrate a willingness to involve student associations and other stakeholders in policy development and the selection process by periodically reviewing the admission policy and rules | | + | | |
| 4.2. Number of students | | | | | | | |
| The educational organization should: | | | | | | | |
| 50 | 6 | 4.2.1. | determine the number of accepted students in accordance with: clinical / practical training opportunities, the ability of the public / organization to conduct appropriate control and monitoring of the educational process, material, technical and other available resources, information about the health needs of the society and the society | | + | | |
| 51 | 7 | 4.2.2. | provide for the possibility of periodically review the number and pool of accepted trainees in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector | | + | | |
| 52 | 8 | 4.2.3. | make it possible to adapt the number of potential trainees based on available information on the number of qualified candidates and information on national and international labor markets; adjust the number of potential trainees based on inherent unpredictability precise labor requirements of specialists in various fields of medicine | | + | | |
| 4.3. Student counseling and support | | | | | | | |
| The educational organization must: | | | | | | | |
| 53 | 9 | 4.3.1. | demonstrate readiness to provide students with access to the student academic counseling system | | + | | |
| 54 | 10 | 4.3.2. | demonstrate readiness to provide academic counseling when monitoring and monitoring student progress, including the analysis of unintentional incidents | | + | | |
| 55 | 11 | 4.3.3. | demonstrate readiness to provide students with access to the student academic counseling system + 54 10 4.3.2. provide a student support program focused on social, financial and personal needs | | + | | |
| 56 | 12 | 4.3.4. | demonstrate readiness to allocate resources for social and personal support of students; ensure confidentiality regarding counseling and support | | + | | |
| 57 | 13 | 4.3.5. | demonstrate readiness for professional orientation, counseling and career planning | | + | | |
| 58 | 14 | 4.3.6. | demonstrate a willingness counseling, to support in the case of a professional crisis; to attract organizations/associations of students to solving problematic situations students | | + | | |
| 4.4. Representation of students | | | | | | | |
| The educational Organization must: | | | | | | | |
| 59 | 15 | 4.4.1. | have policies and to introduce the practice of | | + | | |

| | | | | | | | |
|---|----|--------|---|----------|-----------|----------|----------|
| | | | representation of students and their respective involvement the development of the mission and intended outcomes of learning in the development of EP, planning the learning environment for the students, the assessment and management of EP | | | | |
| 60 | 16 | 4.4.2. | demonstrate a willingness to promote the representation of students to participate in decision-making on educational processes, conditions and rules of training | | + | | |
| 4.5 working Conditions | | | | | | | |
| The educational organization must: | | | | | | | |
| 61 | 17 | 4.5.1. | to provide a training program with appropriate fees/scholarships or other ways of funding and the motivation of students | | + | | |
| 62 | 18 | 4.5.2. | to guarantee the access of students to provide medical care to patients, including an on-call doctor, where appropriate | | + | | |
| 63 | 19 | 4.5.3. | to demonstrate proof of the readiness to identify and publish the conditions of work and responsibility of students | | + | | |
| 64 | 20 | 4.5.4. | to provide for the interruption of training, pregnancy (including pregnancy leave and maternity/paternity, child care), illness, military service or secondment for additional training | | + | | |
| 65 | 21 | 4.5.5. | strive to working components in the work the student does not dominate the educational component/training | | + | | |
| 66 | 22 | 4.5.6. | to take into account the needs of patients, continuity of medical care and educational needs of students, the plan and schedule of work, including work on call | | + | | |
| 67 | 23 | 4.5.7. | allow distance learning, in special circumstances, in accordance with the individual educational trajectory and experience of the student, providing evidence that the total duration and quality of distance learning is not less than the full training | | + | | |
| 68 | 24 | 4.5.8. | to provide the possibility to continue learning at the conditions of interruptions of study related to pregnancy (including maternity / maternity leave and paternity), illness, military service or secondment | | + | | |
| Total | | | | 0 | 24 | 0 | 0 |
| Standard 5. ACADEMIC STAFF/TEACHERS | | | | | | | |
| 5.1. Recruitment and Selection Policy | | | | | | | |
| The education organization should develop and implement a recruitment and selection policy that: | | | | | | | |
| 69 | 1 | 5.1.1. | takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical / professional merits of applicants, including the proper ratio between pedagogical, scientific and professional qualifications | | + | | |
| 70 | 2 | 5.1.2. | defines the duties of teachers, including the balance between teaching, scientific and other functions, taking into account the mission of the EP educational and health system needs | | + | | |
| 71 | 3 | 5.1.3. | ensures that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, and that teachers of narrow specialties, if necessary, are approved for appropriate training periods depending on their qualifications | + | | | |
| 72 | 4 | 5.1.4. | encourages participation in development programs use the expertise of educational activities to increase the potential of academic staff, determine the level of remuneration for participation in postgraduate education | | | + | |
| 5.2. | | | | | | | |

| Staff Development Policy | | | | | | | |
|---|---|--------|--|----------|----------|----------|----------|
| The educational organization should develop and implement a staff development policy that aims to: | | | | | | | |
| 73 | 5 | 5.2.1. | ensure that teachers have sufficient time for training, consulting and independent development | | + | | |
| 74 | 6 | 5.2.2. | have a structure responsible for the development of academic staff, ensure that academic staff is regularly evaluated | | . + | | |
| 75 | 7 | 5.2.3. | development and implementation of a policy to support academic staff in pedagogy and professional development for further professional development; evaluate and recognize the scientific and academic achievements of teachers | | + | | |
| 76 | 8 | 5.2.4. | the ability to take into account the ratio of “teacher-student” depending on the various components of the EP, taking into account the features that ensure close personal communication with interaction and monitoring of students | | + | | |
| Total | | | | 1 | 6 | 1 | 0 |
| Standard 6. EDUCATIONAL RESOURCES | | | | | | | |
| 6.1. Material and technical base | | | | | | | |
| The educational organization must: | | | | | | | |
| 77 | 1 | 6.1.1. | demonstrate its readiness to provide students with sufficient material and technical base to ensure adequate implementation of the EP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies learning environment | | + | | |
| 78 | 2 | 6.1.2. | demonstrate readiness to improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of education at the postgraduate level | | + | | |
| 6.2. Educational environment | | | | | | | |
| The educational organization should: | | | | | | | |
| 79 | 3 | 6.2.1. | demonstrate a willingness to provide the necessary resources for students to acquire adequate practical experience, including the selection and approval of a clinical base as an educational environment; access to sufficient clinical / practical facilities/bases to provide training; sufficient number and diversity of patients; appropriate diversity of clinical cases to meet the goals and objectives of training, including the use of resources in both inpatient | | + | | |
| 80 | 4 | 6.2.2. | demonstrate a willingness to guarantee the number of patients and the corresponding variety of clinical cases when choosing a training environment, allowing you to gain clinical experience in all aspects of the chosen specialty, including training in organization and management in the field of health and disease prevention; training in a university environment; training in the field of health care and prevention; training in the field of health care; training in the field of health care. clinic, as well as training in other relevant clinics/institutions and community facilities / locations, if necessary | | + | | |
| 6.3. Information technologies | | | | | | | |
| The educational organization should: | | | | | | | |

| | | | | | | | | |
|---|----|--------|---|--------------|----------|-----------|----------|----------|
| 81 | 5 | 6.3.1. | guarantee access to information and communication technologies and other electronic media | | + | | | |
| 82 | 6 | 6.3.2. | demonstrate readiness to use information and communication technologies effectively and ethically in the educational | | + | | | |
| 83 | 7 | 6.3.3. | provide access for teachers and students to use information and communication technologies: for independent learning; communication with colleagues; access to health information resources and relevant patient data; patient supervision and work in the health care system to provide medical care | | + | | | |
| 6.4 Clinical teams | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 84 | 8 | 6.4.1. | demonstrate readiness to provide students with the opportunity to gain experience working in a team with colleagues and other medical professionals | | + | | | |
| 85 | 9 | 6.4.2. | demonstrate willingness to encourage training in a multidisciplinary / interprofessional team, and promote the ability to guide and train other health professionals | | + | | | |
| 6.5. Medical and scientific research | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 86 | 10 | 6.5.1. | demonstrate readiness to guarantee and provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, ensure integration and balance between training and research | | | + | | |
| 87 | 11 | 6.5.2. | demonstrate readiness to encourage students to participate in medical scientific research devoted to the study of the state and quality of health of the population and the health care system, provide sufficient time for students to conduct research within the educational program, provide access to research facilities and activities in the places of training | | | + | | |
| 6.6. Educational expertise | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 88 | 12 | 6.6.1. | define and implement a policy for the use of educational expertise at the stage of planning, implementing and evaluating the program | | | + | | |
| 89 | 13 | 6.6.2. | encourage the development of expertise in the evaluation of education and research in medical education as a discipline, promote the desire and interests of employees in conducting research in medical education | | | + | | |
| 6.7. Alternative learning and exchange in the field of education | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 90 | 14 | 6.7.1. | define and implement a policy of accessibility of individual learning opportunities in other educational institutions of the appropriate level within or outside the country, transfer and offset of educational credits and learning outcomes | | + | | | |
| 91 | 15 | 6.7.2. | demonstrate readiness to promote regional and international exchange staff (academic, administrative and teaching staff) and students, providing appropriate resources; establish links with relevant national and international bodies for the exchange and mutual recognition of learning elements | | + | | | |
| | | | | Total | 0 | 11 | 4 | 0 |
| Standard 7. EVALUATION OF THE EDUCATIONAL PROGRAM | | | | | | | | |
| 7.1. Mechanisms for monitoring and evaluating the program | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 92 | 1 | 7.1.1. | have regulated procedures for monitoring and | | + | | | |

| | | | | | | | |
|---|---|--------|--|----------|----------|----------|----------|
| | | | periodically evaluating the EP, learning outcomes, progress and academic performance of students with the involvement of key stakeholders | | | | |
| 93 | 2 | 7.1.2. | demonstrate evidence of readiness to regularly monitor the EP, assess the relationship between personnel policy and needs in the field of education and the health system, evaluate the educational process, methods for evaluating students, student progress, qualifications academic staff, assessment and analysis of identified problems, make sure that the relevant evaluation results affect the quality of the EP | | | + | |
| 94 | 3 | 7.1.3. | demonstrate a willingness to make the evaluation process and results transparent to all stakeholders | | | + | |
| 7.2. Teacher and student feedback | | | | | | | |
| The educational organization should: | | | | | | | |
| 95 | 4 | 7.2.1. | demonstrate evidence of readiness to systematically conduct, analyze and respond to feedback from teachers and students | | | + | |
| 96 | 5 | 7.2.2. | demonstrate evidence of readiness to actively involve teachers and students in the planning of the program evaluation and use the evaluation results to improve the program | | | + | |
| 7.3 Results of training of qualified specialists | | | | | | | |
| The educational organization should: | | | | | | | |
| 97 | 6 | 7.3.1. | demonstrate evidence of readiness to continuously monitor qualified specialists; provide feedback on the clinical practice of qualified specialists from employers; establish and apply a mechanism for evaluating the program, using the collected data on the results of performing clinical practice of qualified specialists | | | + | |
| 98 | 7 | 7.3.2. | demonstrate evidence of readiness to inform students about the results of evaluating clinical practice structural units, responsible for the selection of students, development and planning of the educational program, advising students | | | + | |
| 7.4. Stakeholder engagement | | | | | | | |
| The educational organization should: | | | | | | | |
| 99 | 8 | 7.4.1. | demonstrate evidence of readiness to involve key stakeholders in monitoring and evaluating the EP | | | + | |
| 100 | 9 | 7.4.2. | demonstrate evidence of readiness to provide interested parties with access to the results of the course and educational program evaluation; take into account the results of feedback from qualified specialists; take into account the results of feedback on the EP | | | + | |
| Total | | | | 0 | 5 | 4 | 0 |
| Standard 8. MANAGEMENT AND ADMINISTRATION | | | | | | | |
| 8.1. Management | | | | | | | |
| The educational organization should: | | | | | | | |
| 101 | 1 | 8.1.1. | demonstrate evidence of readiness to document completion of training by issuing degrees, diplomas, certificates or other official certificates of qualification; provide evidence of formal qualifications provided as a basis for official recognition of a specialist in the chosen field of medicine at the national level at the national and international level | | | + | |
| 102 | 2 | 8.1.2. | demonstrate evidence of readiness to be responsible for quality assurance processes | | | + | |
| 103 | 3 | 8.1.3. | demonstrate evidence of readiness to ensure that the EP meets the health needs of society and the health system, to ensure transparency in the work of management structures and their decisions | | | + | |

| 8.2. Academic leadership | | | | | | | |
|---|----|--------|--|----------|-----------|-----------|----------|
| The educational organization should: | | | | | | | |
| 104 | 4 | 8.2.1. | demonstrate evidence of a willingness to take responsibility for the leadership/academic leadership and organization of postgraduate medical education. | | + | | |
| 105 | 5 | 8.2.2. | demonstrate evidence of readiness to periodically evaluate academic leadership regarding the achievement миссии of the EP's mission and expected results. learning outcomes | | + | | |
| 8.3. Training budget and allocation of resources | | | | | | | |
| The educational organization should: | | | | | | | |
| 106 | 6 | 8.3.1. | have a clear distribution of responsibility and authority for providing resources to the educational program, including the target training budget | | + | | |
| 107 | 7 | 8.3.2. | demonstrate evidence of readiness to allocate resources necessary for the implementation of the EP and allocate educational resources in accordance with their needs | | + | | |
| 108 | 8 | 8.3.3. | demonstrate evidence of readiness to manage the budget in such a way as to meet the functional responsibilities of the academic staff and students, by introducing innovations in the program | | + | | |
| 8.4. Administrative staff and management | | | | | | | |
| The educational organization must: | | | | | | | |
| 109 | 9 | 8.4.1. | have an appropriate administrative staff, including their number and composition in accordance with their qualifications, to ensure the implementation of ensure proper management and allocation of resources | | + | | |
| 110 | 10 | 8.4.2. | develop and implement an internal management quality assurance program that includes regular reviews and submission of the EP by academic management for regular review in order to achieve high quality | | | + | |
| 8.5. Requirements and rules | | | | | | | |
| The educational organization should: | | | | | | | |
| 111 | 11 | 8.5.1. | comply with national legislation regarding the number and types of recognized medical specialties for which approved GP programs are developed | | + | | |
| 112 | 12 | 8.5.2. | discuss and approve the postgraduate medical education program in cooperation with all interested parties | | + | | |
| 8.6. Informing the public | | | | | | | |
| The educational organization must: | | | | | | | |
| 113 | 13 | 8.6.1. | demonstrate evidence of readiness to publish complete and reliable information about the educational program and its achievements on the official website of the educational organization and in the media | | + | | |
| Total | | | | 0 | 11 | 2 | 0 |
| TOTAL IN TOTAL | | | | 2 | 87 | 24 | 0 |

7R01133 Obstetrics and Gynecology adult, children

| # N\N | # N\N | # Crete. | EVALUATION CRITERIA | NGO Position | | | |
|--|----------|-------------|--|--------------|--------------|---------------------|----------------|
| | | | | Strong | Satisfactory | Implies Improvement | Unsatisfactory |
| Standard 1 "MISSION AND LEARNING OUTCOMES" | | | | | | | |
| 1.1 Mission definition | | | | | | | |
| The educational organization should: | | | | | | | |
| 1 | 1 | 1.1.11. | define the mission of the Post-graduate Medical Education Center and bring it to the attention of stakeholders and the health sector | | + | | |
| 2 | 2 | 1.1.2. | define the mission based on the needs of society in health issues, the needs of the health care system, and other aspects of social responsibility | | + | | |
| 3 | 3 | 1.1.3. | define the training program, containing theoretical and practical components with an emphasis on for the last one, the result of which will be the doctor: <ul style="list-style-type: none"> ▪ competent in the chosen field of medicine, which includes good medical practice, ▪ able to work independently at a high professional level, ▪ able to work in a professional and interprofessional team, ▪ ready to learn throughout life and to participate in continuing medical education /professional development. ▪ able to provide appropriate patient care that is appropriate, effective, compassionate and safe in addressing health problems and health promotion issues, including a patient-centered and systematic approach | | + | | |
| 4 | 4 | 1.1.4. | provide a willingness to provide appropriate working conditions for students to maintain their health | | + | | |
| 5 | 5 | 1.1.5. | ensure that the mission of the EP is to: It includes the development of innovations in the educational process that allow the development of broader and more specialized competencies than those defined in the framework of the main required competencies; the development of scientific competence of students so that doctors can conduct research in the chosen field of medicine; opportunities for doctors to become active participants in solving issues related to social determinants of health | | | + | |
| 1.2 Professionalism and professional autonomy | | | | | | | |
| The educational organization should: | | | | | | | |
| 6 | 6 | 1.2.1. | include professionalism in the training of physicians and ensure that training promotes professional autonomy to enable them to act in the best interests of the patient and society in the future | | + | | |
| 7 | 7 | 1.2.2. | provide for cooperation with the government and other partners, while maintaining appropriate independence from them | + | | | |
| 1.3. Learning outcomes | | | | | | | |
| The educational organization should: | | | | | | | |
| 8 | 8 | 1.3.1. | determine the expected learning outcomes that students are expected to achieve. At the end of their training, they must | | + | | |

| | | | | | | | | |
|---|----|---------|---|--------------|----------|-----------|----------|----------|
| | | | have achieved all their post-graduate achievements in terms of knowledge, skills and behaviors/attitudes, an appropriate foundation for a future career in their chosen field of medicine, their future roles in the health sector, commitment and skills in implementing continuing education, the health needs of society, the needs of the health system and other aspects of social responsibility, professional development behavior | | | | | |
| 9 | 9 | 1.3.2. | define and publish the expected learning outcomes: general and specialty-specific, which students need to achieve | + | | | | |
| 10 | 10 | 1.3.3. | demonstrate evidence of readiness to ensure appropriate behavior of students in relation to fellow students, teachers, medical staff, patients and their relatives | + | | | | |
| 11 | 11 | 1.3.4. | determine the expected learning outcomes based on the results obtained at the level of basic medical education to ensure interaction between basic and postgraduate medical education | + | | | | |
| 12 | 12 | 1.3.5 | provide for the possibility of students ' participation in research in the relevant field of healthcare | | | + | | |
| 1.4. Participation in the formulation of the mission and learning outcomes | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 13 | 13 | 1.4.14. | ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes | + | | | | |
| 14 | 14 | 1.4.2. | ensure that the stated mission and expected learning outcomes are based on the opinions/suggestions of other stakeholders | + | | | | |
| | | | | Total | 1 | 11 | 2 | 0 |
| Standard 2. EDUCATIONAL PROGRAM | | | | | | | | |
| 2.1. Training approach | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 15 | 1 | 2.1.1. | determine the training approach based on the expected results of training and official certificates of qualification provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level | + | | | | |
| 16 | 2 | 2.1.2. | determine the training approach based on the results of basic medical education in a systematic and transparent manner, using practice-oriented training that includes and supports the learner's personal involvement in health care delivery and patient responsibility, their own learning process and clinical practice | + | | | | |
| 17 | 3 | 2.1.3. | demonstrate evidence of readiness to ensure that appropriate training methods are used that integrate practical and theoretical components, guide the learner through mentoring and regular evaluation and feedback, including adherence to ethical requirements and norms | | | + | | |
| 18 | 4 | 2.1.4. | demonstrate evidence of a willingness to ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, rights and responsibilities of students | + | | | | |
| 19 | 5 | 2.1.5. | increase the degree of independence and responsibility of the student as they improve their knowledge, skills, and experience | + | | | | |
| 20 | 6 | 2.1.6. | provide the opportunity to identify gender, cultural, and religious characteristics and properly prepare the student for interaction with the specified patient population | + | | | | |
| 2.2. Scientific method | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 21 | 7 | 2.2.1. | throughout the entire training program, instill in students the principles of scientific methodology, including methods of analytical and critical thinking; methods of research in healthcare and evidence-based medicine | | | + | | |

| | | | | | | | | |
|---|----|--------|--|--------------|----------|-----------|----------|----------|
| 22 | 8 | 2.2.2. | strive to include in the EP a critical assessment of literature and scientific data, adapt content based on scientific developments in medicine, change the OP taking into account the achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system | | | + | | |
| 2.3 Content of training | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 23 | 9 | 2.3.1. | include in the training process the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decisions, communication skills, medical ethics, public health, medical law and forensic medicine, management disciplines, patient safety, physician protection, complementary medicine | | | + | | |
| 24 | 10 | 2.3.2. | organize an educational program with an appropriate focus on patient safety and independence | | | + | | |
| 25 | 11 | 2.3.3. | demonstrate evidence of readiness to provide adjustments and changes to the EP to ensure the development of knowledge, skills and thinking of different roles of graduates, compliance of the content of the EP with changing conditions and needs of society and the health system | | | + | | |
| 2.4. Structure of the educational program, content and duration | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 26 | 12 | 2.4.1. | describe the content, scope and sequence of courses and the duration of the EP; identify mandatory and selective components; combine practice and theory in the learning process; ensure compliance with national legislation that should be presented and described; ensure adequate impact on the quality of education. how local, national or regional health systems address the health problems and health care needs of the population | | | + | | |
| 27 | 13 | 2.4.2. | take into account the results of previous basic medical education related to the chosen field of medicine | | | + | | |
| 28 | 14 | 2.4.3. | define the graduate requirements for performing various roles in the healthcare system | | | + | | |
| 2.5. Organization of training | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 29 | 15 | 2.5.1. | define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process | | | + | | |
| 30 | 16 | 2.5.2. | include in the planning and development of the educational program proper representation from teaching staff, students and other key and relevant stakeholders | | | + | | |
| 31 | 17 | 2.5.3. | plan training in such a way as to introduce the student to a wide range of existing practical experience in the chosen field of medicine | | | + | | |
| 32 | 18 | 2.5.4. | guarantee a variety of training locations, coordinate multiple training locations to gain appropriate access to different aspects of your chosen field of medicine | | | + | | |
| 2.6. Communication of training, medical practice and the health system | | | | | | | | |
| The educational organization should: | | | | | | | | |
| 33 | 19 | 2.6.1. | provide for and ensure integration between theoretical training and professional development, develop training through medical practice and professional development; integrate training and medical practice through patient care; ensure that training complements and takes into account the needs for medical | | | + | | |
| 34 | 20 | 2.6.2. | make effective use of the health system's capacity to provide medical care for training purposes | | | + | | |
| | | | | Total | 0 | 14 | 6 | 0 |
| Standard 3. STUDENT ASSESSMENT POLICY | | | | | | | | |

| 3.1. Methods of evaluation | | | | | | | |
|--|----|--------|---|----------|--------------|----------|----------|
| The educational organization should: | | | | | | | |
| 35 | 1 | 3.1.1. | to develop and implement a policy of assessment/evaluation of students; to determine, approve and publish the principles, objectives, methods and practices of assessment of students, including, if necessary, to the audit specialists | | + | | |
| 36 | 2 | 3.1.2. | to ensure that the procedures of assessment covers the knowledge, skills, attitudes and professional behavior | | + | | |
| 37 | 3 | 3.1.3. | to guarantee the use of an additional set of methods and formats of assessment in accordance with their "assessment", including the use of multiple assessors and multiple assessment methods | | | + | |
| 38 | 4 | 3.1.4. | to determine the criteria for examinations or other forms of assessment, including the number of mulligans | | + | | |
| 39 | 5 | 3.1.5. | to provide for the possibility of documenting the reliability, validity and fairness of assessment methods students | | | + | |
| 40 | 6 | 3.1.6. | implement a system of appeal against assessment results, based on the principles of justice, or in accordance with the relevant legal procedures | | + | | |
| 41 | 7 | 3.1.7. | to introduce new methods of assessment in accordance with the need to document the various types and stages of training and evaluation | | | + | |
| 42 | 8 | 3.1.8. | to provide for the promotion of the examination process methods evaluation by external experts | | | + | |
| 3.2. The relationship between assessment and learning | | | | | | | |
| The educational Organization must: | | | | | | | |
| 43 | 9 | 3.2.1. | to guarantee the use of principles, methods and practices assessments that are comparable to the expected outcomes and teaching methods; to ensure that students will achieve the expected learning outcomes; to promote the training of students; to ensure the adequacy and relevance of education; provide timely, specific, constructive and objective feedback from trainees on the basis of their evaluation | | | + | |
| 44 | 10 | 3.2.2. | strive to use evaluation principles, methods and practices that encourage integrated learning, encourage student involvement in clinical practice, and promote interprofessional training | | | + | |
| Total | | | | 0 | 4 | 6 | 0 |
| Standard 4. TRAINEES | | | | | | | |
| 4.1. Selection and Admission Policy | | | | | | | |
| An educational organization should: | | | | | | | |
| 45 | 1 | 4.1.1. | have a policy and implement admission practices based on the organization's mission and include a clearly defined position on the student selection process | | + | | |
| 46 | 2 | 4.1.2. | ensure a balance between learning opportunities and student admission; formulate and implement policies/rules for the selection of students according to the established criteria; have a policy and implement the practice of admission, admission of students with disabilities in accordance with the current laws and regulations of the country; ensure a high level of knowledge and skills in the field of basic biomedical sciences, achieved at the previous level of basic medical education; ensure transparency and fairness selection procedures | | + | | |
| 47 | 3 | 4.1.3. | have a policy and implement the practice of transferring students from other educational institutions, including foreign | | ones+ | | |
| 48 | 4 | 4.1.4. | guarantee in the selection procedure the opportunities of potential students to improve the quality of training in the chosen field of medicine; guarantee the transparency of the selection procedure; provide for an appeal mechanism for | | + | | |

| | | | | | | | |
|---|----|--------|--|---|--|--|--|
| | | | admission decisions | | | | |
| 49 | 5 | 4.1.5 | demonstrate a willingness to involve student associations and other stakeholders in policy development and the selection process by periodically reviewing the admission policy and rules | + | | | |
| 4.2. Number of students | | | | | | | |
| The educational organization should: | | | | | | | |
| 50 | 6 | 4.2.1. | determine the number of accepted students in accordance with: clinical / practical training opportunities, the ability of the public organization to conduct appropriate control and monitoring of the educational process, material, technical and other available resources, information about the health needs of the society and the society | + | | | |
| 51 | 7 | 4.2.2. | provide for the possibility of periodically review the number and pool of accepted trainees in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector | + | | | |
| 52 | 8 | 4.2.3. | make it possible to adapt the number of potential trainees based on available information on the number of qualified candidates and information on national and international labor markets; adjust the number of potential trainees based on inherent unpredictability precise labor requirements of specialists in various fields of medicine | + | | | |
| 4.3. Student counseling and support | | | | | | | |
| The educational organization must: | | | | | | | |
| 53 | 9 | 4.3.1. | demonstrate readiness to provide students with access to the student academic counseling system | + | | | |
| 54 | 10 | 4.3.2. | demonstrate readiness to provide academic counseling when monitoring and monitoring student progress, including the analysis of unintentional incidents | + | | | |
| 55 | 11 | 4.3.3. | demonstrate readiness to provide students with access to the student academic counseling system + 54 10 4.3.2. provide a student support program focused on social, financial and personal needs | + | | | |
| 56 | 12 | 4.3.4. | demonstrate readiness to allocate resources for social and personal support of students; ensure confidentiality regarding counseling and support | + | | | |
| 57 | 13 | 4.3.5. | demonstrate readiness for professional orientation, counseling and career planning | + | | | |
| 58 | 14 | 4.3.6. | demonstrate readiness to provide advice and support in the event of a professional crisis; involve student organizations/associations in solving students ' problem situations | + | | | |
| 4.4. Student representation | | | | | | | |
| The educational organization should: | | | | | | | |
| 59 | 15 | 4.4.1. | have a policy and implement the practice of student representation and their respective participation in the development of the mission and intended learning outcomes, in the development of the EP, planning training conditions for students, assessment and management of the OP | + | | | |
| 60 | 16 | 4.4.2. | demonstrate readiness to encourage representatives of students to participate in decision-making on educational processes, conditions and rules of training | + | | | |
| 4.5 Working conditions | | | | | | | |
| The educational organization should: | | | | | | | |
| 61 | 17 | 4.5.1. | provide a training program with appropriate remuneration/ scholarships or other means of financing and motivating students | + | | | |
| 62 | 18 | 4.5.2. | guarantee students ' access to patient care, including calling a doctor, where appropriate | + | | | |

| | | | | | | | | |
|---|----|--------|---|--|----------|-----------|----------|----------|
| 63 | 19 | 4.5.3. | demonstrate evidence of readiness to define and publish conditions work and responsibility of students | | + | | | |
| 64 | 20 | 4.5.4. | provide for interruptions of training caused by pregnancy (including maternity/paternity leave, child care), illness, military service or secondment for additional training | | + | | | |
| 65 | 21 | 4.5.5. | strive to ensure that the work components in the student's work do not dominate the educational component / training | | + | | | |
| 66 | 22 | 4.5.6. | take into account the needs of patients, continuity of medical care and educational needs of students, when drawing up a work plan and schedule, including work on call | | + | | | |
| 67 | 23 | 4.5.7. | allow distance learning in special circumstances, in accordance with the individual educational trajectory and work experience of the student, providing evidence that the total duration and quality of distance learning is not less than that of full-time training | | + | | | |
| 68 | 24 | 4.5.8. | provide for the possibility of continuing education under conditions of study breaks related to pregnancy (including maternity / paternity leave), illness, military service or secondment | | + | | | |
| Total | | | | | | 24 | | |
| Standard 5. ACADEMIC STAFF/TEACHERS | | | | | | | | |
| 5.1. Recruitment and Selection Policy | | | | | | | | |
| The education organization should develop and implement a recruitment and selection policy that: | | | | | | | | |
| 69 | 1 | 5.1.1. | takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical / professional merits of applicants, including the proper ratio between pedagogical, scientific and professional qualifications | | + | | | |
| 70 | 2 | 5.1.2. | defines the duties of teachers, including the balance between teaching, scientific and other functions, taking into account the mission of the EP educational and health system needs | | + | | | |
| 71 | 3 | 5.1.3. | ensures that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, and that teachers of narrow specialties, if necessary, are approved for appropriate training periods depending on their qualifications | | + | | | |
| 72 | 4 | 5.1.4. | encourages participation in development programs use the expertise of educational activities to increase the potential of academic staff, determine the level of remuneration for participation in postgraduate education | | | | | + |
| 5.2. | | | | | | | | |
| Staff Development Policy | | | | | | | | |
| The educational organization should develop and implement a staff development policy that aims to: | | | | | | | | |
| 73 | 5 | 5.2.1. | ensure that teachers have sufficient time for training, consulting and independent development | | + | | | |
| 74 | 6 | 5.2.2. | have a structure responsible for the development of academic staff, ensure that academic staff is regularly evaluated | | . + | | | |
| 75 | 7 | 5.2.3. | development and implementation of a policy to support academic staff in pedagogy and professional development for further professional development; evaluate and recognize the scientific and academic achievements of teachers | | + | | | |
| 76 | 8 | 5.2.4. | the ability to take into account the ratio of "teacher-student" depending on the various components of the EP, taking into account the features that ensure close personal communication with interaction and monitoring of students | | + | | | |
| Total | | | | | 1 | 6 | 1 | 0 |
| Standard 6. EDUCATIONAL RESOURCES | | | | | | | | |
| 6.1. Material and technical base | | | | | | | | |
| The educational organization must: | | | | | | | | |
| 77 | 1 | 6.1.1. | demonstrate its readiness to provide students with sufficient material and technical base to ensure adequate implementation of the EP, space and opportunities for | | + | | | |

| | | | | | | | |
|---|----|--------|--|---|--|---|--|
| | | | practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies for teaching practical methods; a safe learning environment | | | | |
| 78 | 2 | 6.1.2. | demonstrate readiness to improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of education at the postgraduate level | + | | | |
| 6.2. Educational environment | | | | | | | |
| The educational organization should: | | | | | | | |
| 79 | 3 | 6.2.1. | demonstrate a willingness to provide the necessary resources for students to acquire adequate practical experience, including the selection and approval of a clinical base as an educational environment; access to sufficient clinical / practical facilities/bases to provide training; sufficient number and diversity of patients; appropriate diversity of clinical cases to meet the goals and objectives of training, including the use of resources in both inpatient | + | | | |
| 80 | 4 | 6.2.2. | demonstrate a willingness to guarantee the number of patients and the corresponding variety of clinical cases when choosing a training environment, allowing you to gain clinical experience in all aspects of the chosen specialty, including training in organization and management in the field of health and disease prevention; training in a university environment; training in the field of health care and prevention; training in the field of health care; training in the field of health care. clinic, as well as training in other relevant clinics/institutions and community facilities / locations, if necessary | + | | | |
| 6.3. Information technologies | | | | | | | |
| The educational organization should: | | | | | | | |
| 81 | 5 | 6.3.1. | guarantee access to information and communication technologies and other electronic media | + | | | |
| 82 | 6 | 6.3.2. | demonstrate readiness to use information and communication technologies effectively and ethically in the educational | + | | | |
| 83 | 7 | 6.3.3. | provide access for teachers and students to use information and communication technologies: for independent learning; communication with colleagues; access to health information resources and relevant patient data; patient supervision and work in the health care system to provide medical care | + | | | |
| 6.4 Clinical teams | | | | | | | |
| The educational organization should: | | | | | | | |
| 84 | 8 | 6.4.1. | demonstrate readiness to provide students with the opportunity to gain experience working in a team with colleagues and other medical professionals | + | | | |
| 85 | 9 | 6.4.2. | demonstrate willingness to encourage training in a multidisciplinary / interprofessional team, and promote the ability to guide and train other health professionals | + | | | |
| 6.5. Medical and scientific research | | | | | | | |
| The educational organization should: | | | | | | | |
| 86 | 10 | 6.5.1. | demonstrate readiness to guarantee and provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, ensure integration and balance between training and research | | | + | |
| 87 | 11 | 6.5.2. | demonstrate readiness to encourage students to participate in medical scientific research devoted to the study of the state | | | + | |

| | | | | | | | |
|---|----|--------|--|----------|-----------|----------|----------|
| | | | and quality of health of the population and the health care system, provide sufficient time for students to conduct research within the educational program, provide access to research facilities and activities in the places of training | | | | |
| 6.6. Educational expertise | | | | | | | |
| The educational organization should: | | | | | | | |
| 88 | 12 | 6.6.1. | define and implement a policy for the use of educational expertise at the stage of planning, implementing and evaluating the program | | | + | |
| 89 | 13 | 6.6.2. | encourage the development of expertise in the evaluation of education and research in medical education as a discipline, promote the desire and interests of employees in conducting research in medical education | | | + | |
| 6.7. Alternative learning and exchange in the field of education | | | | | | | |
| The educational organization should: | | | | | | | |
| 90 | 14 | 6.7.1. | define and implement a policy of accessibility of individual learning opportunities in other educational institutions of the appropriate level within or outside the country, transfer and offset of educational credits and learning outcomes | | | + | |
| 91 | 15 | 6.7.2. | demonstrate readiness to promote regional and international exchange staff (academic, administrative and teaching staff) and students, providing appropriate resources; establish links with relevant national and international bodies for the exchange and mutual recognition of learning elements | | | + | |
| Total | | | | 0 | 11 | 4 | 0 |
| Standard 7. EVALUATION OF THE EDUCATIONAL PROGRAM | | | | | | | |
| 7.1. Mechanisms for monitoring and evaluating the program | | | | | | | |
| The educational organization should: | | | | | | | |
| 92 | 1 | 7.1.1. | have regulated procedures for monitoring and periodically evaluating the EP, learning outcomes, progress and academic performance of students with the involvement of key stakeholders | | | + | |
| 93 | 2 | 7.1.2. | demonstrate evidence of readiness to regularly monitor the EP, assess the relationship between personnel policy and needs in the field of education and the health system, evaluate the educational process, methods for evaluating students, student progress, qualifications academic staff, assessment and analysis of identified problems, make sure that the relevant evaluation results affect the quality of the EP | | | | + |
| 94 | 3 | 7.1.3. | demonstrate a willingness to make the evaluation process and results transparent to all stakeholders | | | | + |
| 7.2. Teacher and student feedback | | | | | | | |
| The educational organization should: | | | | | | | |
| 95 | 4 | 7.2.1. | demonstrate evidence of readiness to systematically conduct, analyze and respond to feedback from teachers and students | | | | + |
| 96 | 5 | 7.2.2. | demonstrate evidence of readiness to actively involve teachers and students in the planning of the program evaluation and use the evaluation results to improve the program | | | | + |
| 7.3 Results of training of qualified specialists | | | | | | | |
| The educational organization should: | | | | | | | |
| 97 | 6 | 7.3.1. | demonstrate evidence of readiness to continuously monitor qualified specialists; provide feedback on the clinical practice of qualified specialists from employers; establish and apply a mechanism for evaluating the program, using the collected data on the results of performing clinical practice of qualified specialists | | | + | |
| 98 | 7 | 7.3.2. | demonstrate evidence of readiness to inform students about the results of evaluating clinical practice structural units, responsible for the selection of students, development and planning of the educational program, advising students | | | + | |

| 7.4. Stakeholder engagement | | | | | | | |
|---|----|--------|---|----------|----------|----------|----------|
| The educational organization should: | | | | | | | |
| 99 | 8 | 7.4.1. | demonstrate evidence of readiness to involve key stakeholders in monitoring and evaluating the EP | | + | | |
| 100 | 9 | 7.4.2. | demonstrate evidence of readiness to provide interested parties with access to the results of the course and educational program evaluation; take into account the results of feedback from qualified specialists; take into account the results of feedback on the EP | | + | | |
| Total | | | | 0 | 5 | 4 | 0 |
| Standard 8. MANAGEMENT AND ADMINISTRATION | | | | | | | |
| 8.1. Management | | | | | | | |
| The educational organization should: | | | | | | | |
| 101 | 1 | 8.1.1. | demonstrate evidence of readiness to document completion of training by issuing degrees, diplomas, certificates or other official certificates of qualification; provide evidence of formal qualifications provided as a basis for official recognition of a specialist in the chosen field of medicine at the national level at the national and international level | | + | | |
| 102 | 2 | 8.1.2. | demonstrate evidence of readiness to be responsible for quality assurance processes | | | + | |
| 103 | 3 | 8.1.3. | demonstrate evidence of readiness to ensure that the EP meets the health needs of society and the health system, to ensure transparency in the work of management structures and their decisions | | + | | |
| 8.2. Academic leadership | | | | | | | |
| The educational organization should: | | | | | | | |
| 104 | 4 | 8.2.1. | demonstrate evidence of a willingness to take responsibility for the leadership/academic leadership and organization of postgraduate medical education. | | + | | |
| 105 | 5 | 8.2.2. | demonstrate evidence of readiness to periodically evaluate academic leadership regarding the achievement of the EP's mission and expected results. learning outcomes | | + | | |
| 8.3. Training budget and allocation of resources | | | | | | | |
| The educational organization should: | | | | | | | |
| 106 | 6 | 8.3.1. | have a clear distribution of responsibility and authority for providing resources to the educational program, including the target training budget | | + | | |
| 107 | 7 | 8.3.2. | demonstrate evidence of readiness to allocate resources necessary for the implementation of the EP and allocate educational resources in accordance with their needs | | + | | |
| 108 | 8 | 8.3.3. | demonstrate evidence of readiness to manage the budget in such a way as to meet the functional responsibilities of the academic staff and students, by introducing innovations in the program | | + | | |
| 8.4. Administrative staff and management | | | | | | | |
| The educational organization must: | | | | | | | |
| 109 | 9 | 8.4.1. | have an appropriate administrative staff, including their number and composition in accordance with their qualifications, to ensure the implementation of ensure proper management and allocation of resources | | + | | |
| 110 | 10 | 8.4.2. | develop and implement an internal management quality assurance program that includes regular reviews and submission of the EP by academic management for regular review in order to achieve high quality | | | + | |
| 8.5. Requirements and rules | | | | | | | |
| The educational organization should: | | | | | | | |
| 111 | 11 | 8.5.1. | comply with national legislation regarding the number and types of recognized medical specialties for which approved GP programs are developed | | + | | |

| | | | | | | | |
|---|----|--------|---|----------|-----------|-----------|----------|
| 112 | 12 | 8.5.2. | discuss and approve the postgraduate medical education program in cooperation with all interested parties | | + | | |
| 8.6. Informing the public | | | | | | | |
| The educational organization must: | | | | | | | |
| 113 | 13 | 8.6.1. | demonstrate evidence of readiness to publish on the official website of the educational organization and in the media complete and reliable information about the OP and its achievements | | + | | |
| Total | | | | 0 | 11 | 2 | 0 |
| TOTAL IN GENERAL | | | | 2 | 86 | 25 | 0 |

