



STANDARDS AND GUIDELINES

for International Accreditation
of Master's Programmes in the Field of Healthcare
(based on WFME/ AMSE/ ESG)



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of Master's Programmes in the Field of Healthcare
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*Recommended by the Expert Council for Medical Education of
Independent Agency for Accreditation and Rating*

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These standards and guidelines have been developed in accordance with the WFME Global Standards for Master's Degrees in Medical and Health Professions Education (WFME, 2016), harmonised with the WFME Global Standards of Basic Medical Education (WFME, 2015, 2020), Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015) and define the requirements for the preparation and conduct of the procedure for the international accreditation of master's programmes in the field of healthcare regardless of the status, organisational and legal form, departmental subordination and form of ownership of the educational organisation.

Foreword

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4. THIRD EDITION

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INTRODUCTION

These standards are developed in accordance with the WFME Global Standards for Master's Degrees in Medical and Health Professions Education (WFME, 2016), harmonised with the WFME Global Standards of Basic Medical Education (WFME, 2015, 2020), Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015) and define the requirements for the preparation and conduct of the procedure for accreditation of master's programmes in the field of healthcare, regardless of status, organisational and legal form, departmental subordination and form of ownership of the educational organisations.

The IAAR Standards and Guidelines for International Specialised/Programme accreditation (based on the WFME/AMSE/ESG standards) consist of two parts: "Procedure for conducting international accreditation of master's programmes in the field of healthcare" and "Standards of international accreditation of master's programmes in the field of healthcare". The document defines the procedure for accreditation and regulatory requirements for the main provisions of the standards of international accreditation of master's programmes in the field of healthcare.

The procedure for conducting international accreditation of master's programmes in the field of healthcare is carried out according to the approved stages given in the first part of this Manual.

Changes and additions are being made to the current standards of accreditation in order to further improve it. Amendments and additions to the standards and guidelines are carried out by IAAR. In case of initiating changes and additions to the current standard by educational organisations and other interested organisations, suggestions and comments are sent by them to the IAAR. IAAR studies and conducts an examination of the proposals and comments received from the initiators for their validity and expediency. Changes and additions to the current standards and guidelines for accreditation after their approval are approved by the order of the General Director of the IAAR in a new edition with changes or in the form of a leaflet to the current standards and guidelines.

I. THE PROCEDURE OF INTERNATIONAL ACCREDITATION OF MASTER'S PROGRAMMES IN THE FIELD OF HEALTHCARE

Goals and Objectives of the International Accreditation

The purpose of the international accreditation (hereinafter - accreditation) is to assess and recognise the high quality of the activities of the educational organisations (hereinafter - EO) and the educational programmes (hereinafter - EP) implemented in accordance with international accreditation standards in accordance with international standards for quality improvement in medical education (WFME/ AMSE/ ESG).

The procedure of accreditation serves the general purpose of assessing the quality of the activities of the EP EO for compliance with international accreditation standards. When conducting international accreditation, the specific legislation of the respective countries is taken into account.

The standards and procedures of international accreditation comply with the basic principles and documents of the Bologna Process: professionalism and accessibility of assessment; voluntariness; independence; objectivity and professionalism; transparency, reliability and relevance of information on accreditation procedures; collective decision-making, dissemination of information about positive and negative evaluation results.

The Procedure for Conducting International Accreditation

The procedure for conducting international accreditation includes the following steps:

1. Application for accreditation.

Submission of EO application for specialised/programme accreditation with copies of title documents and permits attached.

Consideration of the IAAR application of the EO.

2. Conclusion of an agreement between the EO and IAAR.

Acceptance of the IAAR decision on the beginning of the procedure of specialised/programme accreditation of the EO. The schedule of the visit to the EO, the conditions and financial issues of accreditation are determined by the agreement between the IAAR and the EO.

At the request of the EO, IAAR can organise training to explain the criteria and procedure for specialised/programme accreditation to the internal experts of the EO at special seminars on the theory, methodology and technology of specialised/programme accreditation. This seminar procedure is not a mandatory component of the accreditation process.

3. Preparation of a self-assessment report

The EO independently organises and conducts a self-assessment of the EP in order to establish compliance with international accreditation standards, and also prepares a self-assessment report in accordance with this Manual.

The EO is provided with guidelines and methodological materials for the preparation of a self-assessment report.

The EO sends the self-assessment report and all applications to the IAAR at least eight (8) weeks before the visit to the EEC. IAAR sends the experts a self-assessment report for review at least 6 (six) weeks before the visit after the internal examination for compliance with the requirements.

The expert studies the self-assessment report of the EP for compliance with international standards of the IAAR, prepares and sends a review to the IAAR within 10 (ten) calendar days. In case of non-compliance with the requirements of the IAAR, the review is sent to the expert for

revision. In case of repeated non-compliance, IAAR has the right to suspend this expert from participating in the work of the EEC.

Based on the analysis of the self-assessment report EP, the IAAR has the right to make one of the following decisions:

- "develop recommendations on the need to finalise the materials of the self-assessment report";
- "to conduct an external expert assessment";
- "to postpone the accreditation period due to the impossibility of carrying out the procedure of specialised/programme accreditation due to the non-compliance of the self-assessment report with the criteria of these standards".

4. EEC site visit to EO

In case of continued accreditation, IAAR forms an External Expert Commission, which is approved by the General Director of IAAR. External evaluation of the EP for compliance with international IAAR standards is carried out by an External Expert Commission during a visit to EO.

The composition of the EEC is formed depending on the volume of external evaluation. The EEC consists of independent experts, including foreign experts with experience in teaching and expert work on quality assurance, representatives of the community of employers and students.

In case of continued accreditation, the IAAR will coordinate with the EO the timing of the accreditation of the EP and the Programme of the visit of the EEC.

The programme of the EEC visit is being developed by the IAAR Coordinator and the Chairman of the EEC with the participation of the EO. The agreed programme of the visit of the EEC is approved by the General Director of the IAAR at least 2 (two) weeks before the visit to the EO. The structure and content of the programme is developed taking into account the specifics of the EO and EP according to the recommended sample of the visit programme of the EEC (Appendix 1).

The Head of the EO appoints a coordinator for interaction with the IAAR coordinator for planning and organising the visit (Appendix 2).

The duration of the commission's visit is usually 3-5 days. During the visit, the EO creates conditions for the work of the EEC in accordance with the Service Agreement:

- represents an office for the work of the EEC with the provision of a workplace for each member of the EEC;
- submits an electronic and paper version of the self-assessment report for each of the commission members;
- provides the necessary modern electronic office equipment in agreement with the representative of IAAR and the number of members of the EEC;
- organises a visual inspection of infrastructure and resources, meetings, questionnaires, interviews and other types of work of the EEC in accordance with the programme of the EEC visit;
- provides the requested information;
- organises photography of the work of the EEC.

The results of the visit to the EO are reflected in the report on the results of the external evaluation.

The draft EEC report is reviewed by the IAAR and sent for approval to the EO. In case of identification of actual inaccuracies by the EO, the Chairman coordinates with the members of the EEC and makes the necessary changes to the EEC report. In case of disagreement with the comments of the EO to the EEC report, the Chairman, together with the IAAR coordinator, prepares an official response with justification.

The report contains a description of the visit of the EEC, a brief assessment of the compliance of the activities of the EO in the context of the international standards of the IAAR, the recommendations of the EO on improving the activities of the EO and ensuring the quality of the EP, recommendations to the Accreditation Council. Proposals to the Accreditation Council contain

a recommendation on accreditation (including the recommended period of accreditation) or non-accreditation.

The EEC report, including recommendations, is developed by the members of the EEC collectively.

5. IAAR decision-making

The basis for making a decision on the organisation of education in the field of healthcare by the Accreditation Council are the reports of the EEC on the assessment of the EP and the report on the self-assessment of the EP.

The Chairman of the external expert commission speaks to the Accreditation Council following the results of the visit of the external expert commission.

The exclusive competence of the IAAR Accreditation Council includes making decisions on accreditation or refusal of specialised/programme accreditation. The composition of the Accreditation Council is determined in accordance with the Regulations on its activities. The meeting is held if there is a quorum. The Accreditation Council has the right to make a decision that does not comply with the recommendations of the EEC.

The Accreditation Council has the right to make one of the following decisions:

- to accredit for a period of **1 (one) year** – if the criteria are met in general, but if there are some shortcomings and opportunities for improvement (when evaluating criteria requiring improvement from 30% to 60%, lack of strong criteria);

- to accredit for a period of **3 (three) years** – if the criteria are met in general, but if there are some minor shortcomings and opportunities for improvement (when evaluating criteria requiring improvement from 15 to 30%, if there are strong criteria);

- to accredit for a period of **5 (five) years** – if the criteria are met in general and there are positive results (when evaluating criteria requiring improvement of up to 15%, if there are strong criteria);

- to accredit for a period of **7 (seven) years** – when the criteria are met in general and there are examples of best practice translation (when assessing those requiring improvement of up to 5%, and strong criteria of at least 15%);

- **refusal of accreditation** – in the presence of significant shortcomings (when evaluating at least one criterion as "unsatisfactory" or requiring improvement of 60% or more).

If the Accreditation Council makes a positive decision, the IAAR sends an official letter to the EO with the results of the decision and a certificate of accreditation of the EO, signed by the Chairman of the Accreditation Council and the General Director of the IAAR in the EO. Further, the decision on the accreditation of the EO EP is sent to the authorised body in the field of education of the relevant country and posted on the IAAR website. The Report of the external expert commission is also posted on the IAAR website.

After receiving the certificate of accreditation, the EP EO publishes a self-assessment report on its website.

If the Accreditation Council makes a negative decision, the IAAR sends an official letter to the EO about the decision.

In accordance with the established procedure, in accordance with the Service Agreement and the Regulations on the Appeals and Complaints Commission, the EO may appeal to the IAAR against the decision of the Accreditation Council. In case of doubt about the competence of the external expert commission and Agency representatives, or a gross violation committed by members of the external expert commission, the EO can send a complaint to the IAAR.

6. Follow-up procedures

If the IAAR Accreditation Council makes a positive decision, the EO submits to IAAR an Action Plan for Improving and Improving Quality within the framework of the recommendations of the external expert commission (hereinafter - Plan), which is signed by the first head and

stamped, and also enters into a Service Agreement with IAAR. The Contract and the Plan are the basis for post-accreditation monitoring.

In accordance with the Regulations on the post-accreditation monitoring procedure, the EO must prepare interim reports according to the Plan. Interim reports are sent to the IAAR before the expected date of post-accreditation monitoring.

Post-accreditation monitoring of the EP is carried out in accordance with the Regulations on the procedure for post-accreditation monitoring of the EO and (or) the EP.

In case of non-fulfillment of the Plan and requirements put forward by the IAAR for post-accreditation monitoring, as well as the lack of information about changes carried out in the EO, the Accreditation Council has the right to make one of the following decisions:

- "temporarily suspend the accreditation status of the EP";
- "revoke the certificate of accreditation of the EP of the EO, which may entail the cancellation of all previously achieved results of accreditation."

If the EO refuses to conclude a contract with the IAAR for post-accreditation monitoring, the AU has the right to decide on revocation of the certificate of accreditation.

The EO has the right to submit an application no earlier than 1 (one) year after the refusal to accredit her EP EO or revocation of her accreditation.

External Expert Commission (Group of Experts on External Evaluation)

External evaluation of the organisation of education by an external expert commission (a group of experts on external evaluation), consisting of independent experts with experience in teaching and expert activities on quality assurance, a representative of employers and students.

The EEC is formed on the basis of the order of the General Director of the IAAR from among the certified representatives of the academic, professional and student community included in the database of IAAR experts. Foreign experts may be attracted from partner accreditation agencies.

In order to exclude a conflict of interest, IAAR sends an official letter on the composition of the EEC to the EO 14 (fourteen) calendar days before the visit.

The EO has the right to notify the IAAR by an official letter of the existence of a conflict of interest with justification within 3 (three) working days. IAAR replaces the Expert if necessary.

All EEC members sign a Commitment Statement on the absence of a conflict of Interest and the Code of Ethics of an external IAAR expert during each visit.

The expert is obliged to notify the IAAR Coordinator of any connection with the EO or self-interest that may lead to a potential conflict related to the external evaluation process.

Each member of the EEC must perform his functions and duties efficiently. Failure to comply and refusal without a reasonable reason is considered a violation of the Code of Ethics of an external IAAR expert and may lead to exclusion from the IAAR expert database.

The information about the EO received during the external evaluation is presented as confidential and is not subject to disclosure.

The members of the EEC should not announce or comment on the recommended terms of accreditation before the decision of the Accreditation Council is made.

The External Expert Commission consists of:

- **The Chairman** of the External Expert Commission, responsible for coordinating the work of experts, preparing and orally presenting preliminary conclusions formed during the visit to the educational organisation, as well as responsible for preparing the final report on the results of the external evaluation of the EP (cluster of programmes).

- **External experts** - representatives of the academic community responsible for assessing the compliance of the accredited EP with the standards of international accreditation of the IAAR.

- **External expert** - a representative of the professional community (employer), who must assess whether the accredited EP (cluster of programmes) and the professional competencies of its graduates meet the requirements of the labor market.

- **External expert** - a representative of the student community responsible for assessing the compliance of the accredited EP with the needs and expectations of students (for each cluster, 1 representative of the student community).

IAAR appoints a coordinator from among its staff responsible for coordinating the work of the expert group. The educational organisation, for its part, appoints an authorised person responsible for the process of international accreditation of master's programmes in the field of healthcare.

II. SELF-ASSESSMENT REPORT

The Self-Assessment Report (hereinafter - SAR) is one of the main documents of the international accreditation.

Basic Principles of Self-Assessment Report Preparation

- 1. Structuring:** strict compliance of the presented material with the sections of the document.
- 2. Readability:** the text of the document should be easy to read in terms of printing, semantic and stylistic features of the text.
- 3. Analyticity:** analysis of advantages and disadvantages, analysis of the dynamics of the development of EO and (or) EP (cluster of programmes).
- 4. The objectivity of the assessment.**
- 5. Validity:** providing facts, data, information as arguments for conclusions.

The features of the training programme that are not described in the manuals should be included in the relevant part of the documents.

During the accreditation of a cluster of programmes, aspects common to all programmes are described once in the introductory section to avoid repetition.

The final document should be well structured, numbered (including appendices).

SAR Format

The structure of the self-assessment report should meet the criteria of the IAAR standards and guidelines. All statements, judgments, assumptions of the report should be supported by the necessary documents in the main part of the text and appendices (Appendix 3. Structure of the self-assessment report).

The report should be written in the following format: the font type is Times New Roman, the font size is 12, the space between the lines is 1.5, the paragraph interval before and after the titles is no more than 6 pt, an automatically editable embedded table of contents and page numbers should be given at the beginning of the report. The report is printed in A4 format with portrait orientation, landscape orientation is also possible in applications.

The first appendix to the report should contain a text confirming the reliability, exhaustive nature and accuracy of all the data provided, signed by the head of the EO and the executors who compiled the report with the contact details of the report compilers for further consultations, if necessary: "I, [full name of the head of the EO], confirm that in this self-assessment report [name of the EO] containing [the number of pages of the main part of the report, i.e. without appendices] pages, absolutely reliable, accurate and exhaustive data are provided that adequately and fully characterise the activities of the EO."

The volume of the self-assessment report should not exceed 70-80 pages of the main text. The Self-assessment Report is separately accompanied by a package of documents in the form of appendices (in a separate file not exceeding 100 pages). Graphic images must first be compressed to a resolution of 96 dots per inch before being exported to the application text. To reduce the volume of applications, it is recommended that in the text of the self-assessment report, as much as possible, indicate links to supporting documents located on the electronic resources of the EO.

The SAR must be submitted in English¹ - officially in electronic format, unless otherwise agreed.

The report and its appendices are submitted to the IAAR in electronic form at the email address iaar@iaar.kz, and also on paper in 1 (one) copy in each of the selected languages.

¹ Large documents may be submitted in their original language, provided they are accompanied by a short summary in English.

SAR Content

The SAR should include an introduction, three main sections and appendices.

It is recommended that the introduction include information about the conditions and organisation of self-assessment, its goals and objectives.

The first section provides general information about the organisation of education:

- brief information;
- organisational and legal support of activities;
- organisational structure and management system;
- interaction with educational, research, professional organisations at the local, regional and national levels;
- international activities;
- number of students (annual);
- dynamics of the students' body of different forms of education (if available).

The second section includes an analysis of the compliance of the activities of the educational organisation and (or) the accredited EP with the standards of international accreditation.

The text of the section should be organised according to the order specified in the manual. The SAR must provide answers to all the basic questions and include all the necessary documentary evidence in the appendices.

The educational organisation should provide information about the achievements of the EP on each standard (if available). It is also assumed that the report will indicate problems and areas requiring improvement that were identified using SWOT analysis.

The third section of the report should include general conclusions and a conclusion on the self-assessment process, giving grounds for applying for an external quality assessment procedure.

The SAR should be submitted on behalf of the head of the EO and should be signed by him.

The main provisions and conclusions of the report should be brought to the attention of all participants in the self-assessment process; published on the Internet resource of the educational organisation.

The final section of the self-assessment report should consist of a completed table titled "Conclusion of the Self-Assessment Commission". It is important to ensure that the completion of the table is objective and based on the information provided in the self-assessment report. To ensure the accuracy and reliability of the material presented in the report, all individuals responsible for the self-assessment should participate in filling out the table. This will help to ensure that the table is comprehensive and reflects the collective input and assessment of the group. By completing this table, the self-assessment commission can provide a clear and concise summary of the findings and conclusions of the self-assessment process, which can be used to guide future actions and decisions.

The external expert commission also fills in this table, and the results of comparing information according to these tables are taken into account when discussing the results of accreditation during the visit of the EEC to the EO.

The evaluation table "Conclusion of the Self-Evaluation Committee" has following positions for assessment:

- **"Strong"** is characterised by a high level of indicators of one criterion of international accreditation. This position of this criterion makes it possible to serve as an example of good practice for dissemination among other EOs.

- **"Satisfactory"** is determined by the average level of indicators of one criterion of international accreditation and means compliance with the criterion.

- **"Suggests improvement"** is characterised by a low level of performance of one criterion of international accreditation.

- **"Unsatisfactory"** means that indicators of EP does not meet the criterion of international accreditation.

III. STANDARDS OF INTERNATIONAL ACCREDITATION OF MASTER'S PROGRAMMES IN THE FIELD OF HEALTHCARE

1 Scope of Application

These standards define the regulatory requirements for the main provisions of the standards of international accreditation of master's programmes in the field of healthcare during the procedure of accreditation of the EP, regardless of its status, organisational and legal form, forms of ownership and departmental subordination.

These standards can also be used:

- a) educational organisations for internal self-assessment and external evaluation of EP;
- b) to develop appropriate regulatory documentation.

2 Regulatory References

This standard uses references to the following regulatory documents:

1. Postgraduate Medical Education WFME Global Standards 2023
2. Postgraduate Medical Education WFME Global Standards 2015
3. WFME Global Standards for Master's Degrees in Medical and Health Professions Education 2016
4. Guidelines on the use of ECTS (European Credit Transfer and Accumulation System), approved at the Yerevan Conference of Ministers of Education on May 14-15, 2015.
5. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015)
6. EFN (The European Federation of Nurses Associations) Competency Framework Adopted at the EFN General Assembly, April 2015, Brussels

3 Terms and Definitions

The following terms and definitions are used in this standard:

3.1 Accreditation is a procedure of assessment by the accreditation agency of the quality level of the individual educational programmes, during which the compliance of the EO or educational programme with certain criteria and standards is recognised;

3.2 European Credit Transfer and Accumulation System – ECTS is student-centered system for the accumulation and transfer of credits, based on the principles of transparency of the processes of study, teaching and evaluation. Its purpose is to facilitate the planning, implementation and evaluation of educational programmes and student mobility by recognising academic achievements, qualifications and study periods.

3.3 The quality of the educational programme is the compliance of the level of competence of students and graduates with the requirements of educational standards and additional requirements established by the educational organisation;

3.4 Competencies – the qualifications framework defines competencies as an opportunity to use knowledge, skills and personal, social and/or methodological abilities in work or educational situations, as well as for professional and personal development. In the context of the European Qualifications Framework, competence is described in terms of responsibility and independence;

3.5 ECTS credits – express the amount of training based on the established learning outcomes and associated labor costs. 60 credits correspond to the results of training and the corresponding labor costs of a full-time academic year or its equivalent, which usually includes a number of educational elements for which credits are awarded (based on the results of training and labor costs). Credit units are usually expressed in integers.

3.6 Module is an element of a course in a system in which each course has the same number

of credits or a multiple of them.

3.7 Assessment methods are a set of written, oral and practical tests/exams, projects, speeches, presentations and portfolios that are used to assess the student's progress and confirm the achievement of learning outcomes within the educational element (part of the course/module).

3.8 An educational programme is a set of educational elements that lead to the assignment of a degree to a student after successful fulfillment of all requirements.

3.9 Qualification – a degree, diploma or other official document issued by a competent authority attesting to the successful completion of a recognised educational programme.

3.10 Learning outcomes is a statement about what the learner will know, understand and be able to do at the end of the learning process. The achievement of learning outcomes should be evaluated according to an established procedure based on clear and transparent criteria. Learning outcomes are correlated with specific educational elements and programmes in general. They are also used in the European and National Qualifications Frameworks to describe the level of individual qualifications.

3.11 Quality assurance is a process or a set of processes adopted at the national and international levels to ensure the quality of educational programmes and assigned qualifications. Quality assurance presupposes the existence of an educational environment in which the content of educational programmes, training opportunities and logistical support correspond to the stated goal. Quality assurance is often viewed in the context of a continuous cycle of change (i.e., provision and improvement).

3.12 Student-centered learning is an approach to learning characterised by innovative teaching methods that are aimed at developing learning in the interaction of teachers and students and are focused on the serious perception of students as active participants in their own learning, contributing to the transfer of skills such as problem solving, critical and analytical thinking.

4 Designations and Abbreviations

These standards use abbreviations and designations in accordance with the normative documents specified in paragraph 2. In addition, the following designations and abbreviations are used in these standards:

AC – Accreditation Council;

HEI – higher education institution;

EEC – External Expert Commission;

IAAR – Independent Agency for Accreditation and Rating

RW – research work

CME – continuing medical education

CPD – continuous professional development

NQS – national qualifications system

EO – educational organisation

EP – educational programme

SAR – self-assessment report

TS – teaching staff;

MM – mass media;

ECTS - European Credit Transfer and Accumulation System;

ESG - Standards and guidelines for quality assurance in the European Higher Education Area.

QF-EHEA – Qualifications Framework for the European Higher Education Area;

WFME- World Federation for Medical Education.

5 General Provisions

The main objectives of the implementation of the standards of the international accreditation of master's programmes in the field of healthcare:

- implementation of an accreditation model harmonised with the international practice of the quality assurance of education;
- assessment of the quality of education for improving the competitiveness of the system of higher and postgraduate education in the field of healthcare;
- encouraging the development of a quality culture in medical educational institutions
- promoting the improvement and continuous improvement of the quality of public health services in accordance with the requirements of a rapidly changing external environment;
- accounting and protection of the interests of society and consumer rights by providing reliable information about the quality of EP;
- use of innovation and scientific research;
- public announcement and dissemination of information on the results of the accreditation of the EO in the field of healthcare.

1. STANDARD "MISSION AND OUTCOMES"

1.1 Mission Definition

The organisation of education must:

1.1.1. define the mission of the EP of postgraduate medical education and bring it to the attention of stakeholders and the health sector.

1.1.2. define a postgraduate education programme in the field of healthcare that enables the preparation of a specialist who is:

- competent in any area of medicine, including all types of medical practice, management and organisation of healthcare;
- capable of working independently at a high professional level and as part of a team, when necessary;
- committed to lifelong learning, including professional responsibility for maintaining the level of knowledge and skills through performance assessment, auditing, self-assessment of practice, and recognised forms of continuing medical education/continuing professional development.

1.1.3. ensure that the mission encompasses consideration of the health and sanitary needs of the community or society, the needs of the health care delivery system and other aspects of social accountability., as needed.

1.1.4. encourage the organisation and conduct of scientific research by postgraduate students, as well as innovation in the educational process, to facilitate the development of broader competencies beyond the minimum required.

1.2 Institutional Autonomy and Academic Freedom

The organisation of education must:

1.2.1. have a preparatory process that is based on recognised basic medical and pharmaceutical education and promotes the professionalisation of the learner.

1.2.2. ensure that the preparatory process promotes professional autonomy, enabling the graduate to act in the best interests of the patient and society.

1.3 Learning Outcomes

The organisation of education must:

1.3.1. define the intended educational outcomes that students should achieve upon completion of training with respect to achievements at a postgraduate level regarding knowledge,

skills, professional behavior and thinking, appropriate foundation for the future career of trainees in the chosen field of medicine, future roles in the health sector, commitment to and skills in life-long learning, the health needs of the society, the needs of the health care system and other aspects of social accountability.

1.3.2. define generic and discipline/speciality-specific components of educational outcomes that are required to be achieved by students.

1.3.3. ensure appropriate student conduct with respect to fellow students, faculty members, other health care personnel, patients and their relatives.

1.3.4. define the intended educational outcomes based on the results obtained at the prior level of education.

1.4 Participation in Formulation of Mission and Learning Outcomes

The organisation of education must:

1.4.1. ensure the participation of principal stakeholders in the formulation of the mission and intended learning outcomes.

1.4.2. ensure that the stated mission and intended learning outcomes are based on the opinions/suggestions of other stakeholders.

Approximate subject of assessment:

✓ *Institutional mission description, educational programme mission, and learning outcomes should be presented along with relevant published documents.*

✓ *Describe how the learning outcomes are related to and aligned with the stated mission of the educational programme and institutional mission.*

✓ *Describe the values of the educational organisation, educational goals, research functions, and relationships with healthcare services and communities.*

✓ *Provide a brief overview of how the mission and learning outcomes are communicated to stakeholders.*

✓ *Describe the procedure for developing and adopting the mission. It is assumed that the academic staff, administration, employees of structural units, students, and other stakeholders should be involved in the development of the mission.*

✓ *Describe how the mission statement guides the educational programme and ensures quality.*

✓ *Provide brief information on career opportunities for graduates who have completed a master's degree programme in healthcare.*

✓ *What requirements are imposed on graduates who have completed this programme for continuing education (PhD programmes, specialised internships, etc.)?*

✓ *Describe what educational strategies, approaches, and methods of teaching foster lifelong learning skills and responsibility in students.*

✓ *Which groups, in addition to the main stakeholders of the educational organisation, are consulted? How does the educational organisation consult with these groups of stakeholders and involve them in the process of improving the formulation of the mission and goals?*

✓ *Specify to what extent consultations with stakeholders have influenced the mission.*

✓ *What institutional autonomy does the educational organisation have in terms of developing and implementing policies related to the development of its educational programme and the use of allocated resources for the implementation of the educational programme?*

✓ *Present relevant documents from the educational organisation and the state regarding the institutional freedom and determination of responsibility for the development of the educational programme and allocation of resources.*

✓ *What policies and practices does the educational organisation have to ensure that the teaching conducted by individual teachers and departments align with the requirements for the content and structure of the educational programme?*

✓ *How is this evaluated and, if necessary, how are identified deficiencies addressed?*

- ✓ *What learning outcomes (knowledge, skills, attitudes/professional values, and abilities) are required of students upon completion of the educational programme?*
- ✓ *Fill in the table showing the overall expected competencies of graduates, where each competency is correlated with the learning outcomes and their measurement.*

General Competencies	Learning Outcomes for Each Competency	Assessment of Learning Outcomes

- ✓ *Describe how the learning outcomes were developed for the entire educational programme and for individual modules and disciplines.*
- ✓ *How are the learning outcomes used as a basis for content development, delivery, and assessment of learning and course evaluation?*
- ✓ *How are these learning outcomes interconnected with the subsequent preparation of graduates and the commitment to lifelong learning?*
- ✓ *How are these learning outcomes related to the existing and emerging needs of the society in which graduates will work?*
- ✓ *What stakeholders participated in the development of the learning outcomes?*
- ✓ *Describe and provide a document that regulates the appropriate code of conduct for students.*
- ✓ *Provide a list or table of the professional qualities that students should develop throughout the educational programme.*
- ✓ *Describe and provide a copy of any formal or informal policies and procedures for addressing instances of inappropriate behavior or non-compliance with requirements by students, including opportunities for filing complaints about such incidents and mechanisms for investigating them. Describe any evidence, in the form of documents, that demonstrates the effectiveness of this policy.*
- ✓ *Clarify how the learning outcomes are interconnected with the preparation at the PhD programme level, specialised doctoral programmes, and others.*
- ✓ *How does the educational institution determine in the curriculum the learning outcomes related to students' research performance?*

2. STANDARD "EDUCATIONAL PROGRAMME"

2.1 Educational Framework

The organisation of education must:

2.1.1. determine the educational framework based upon the intended educational outcomes of the programme and official certificates of qualification provided as the basis for official recognition of a specialist in the chosen field of medicine at the national and international level.

2.1.2. determine the educational framework based upon the acquired educational outcomes of basic medical education that is systematic and transparent, which includes and supports the learner in taking responsibility for their own learning process.

2.1.3. describe the general and specific components of learning for the discipline/specialty, use teaching and learning methods that are suitable for both practice and theory, and determine the teaching and learning methods that stimulate, prepare, and support learners in taking responsibility for their own learning process.

2.1.4. guarantee that the educational programme is implemented in accordance with the principles of equality.

2.1.5. guide the learner through mentoring and regular assessment and feedback, and increase the level of learner's independent responsibility as their skills, knowledge, and experience improve.

2.2 Scientific Method

The organisation of education must:

2.2.1. instill in learners the principles of scientific methodology, corresponding to the level of postgraduate education, and provide evidence that learners acquire knowledge and understanding of the scientific basis and methods of the chosen field of medicine.

2.2.2. provide evidence that learners become familiar with evidence-based medicine through wide access to relevant clinical/practical experience in the chosen field of medicine.

2.2.3. include in the educational programme official teachings on critical evaluation of literature and scientific data, the results of contemporary scientific research; provide learners with access to research activities; and adjust and update the content of scientific developments in the educational programme.

2.3 Programme Content

The organisation of education must:

2.3.1. include in the educational process the practice and theory of medical-biological, clinical, behavioral, and social sciences, clinical decision-making, communication skills, medical ethics, public health, medical jurisprudence, and management disciplines.

2.3.2. organise the educational programme with appropriate attention to patient safety.

2.3.3. make changes to the educational programme to ensure the development of knowledge, skills, and critical thinking for different roles of the graduate, and to align the content of the educational programme with changing conditions and needs of society and the healthcare system.

2.4 Programme Structure, Composition and Duration

The organisation of education must:

2.4.1. provide a description of the content, scope, and sequence of courses and other elements of the educational programme, define mandatory and elective components, integrate practice and theory in the educational process, and ensure compliance with national legislation.

2.4.2. take into account the results of basic medical and pharmaceutical education in terms of choosing a field of medicine and requirements for fulfilling various roles in the healthcare system for future graduates.

2.5 The Relation Between Education, Medical Practice and the Healthcare System

The organisation of education must:

2.5.1. describe and ensure the integration between theoretical preparation and professional development, guarantee the integration of learning and professional internship, including workplace training.

2.5.2. effectively organise the use of healthcare system opportunities for educational purposes, including workplace practice, ensuring that such education is additional and not subject to requirements for healthcare service provision.

2.6 Learning Management

The organisation of education must:

2.6.1. define responsibility and authority for organising, coordinating, managing and evaluating the individual educational setting and learning process.

2.6.2. include in the planning and development of the educational programme appropriate representation of the teaching staff, students and other key and relevant stakeholders.

2.6.3. ensure diverse learning sites, coordinate multi-site education to provide appropriate access to different aspects of the chosen field of medicine, access to resources necessary for planning and implementing teaching and assessment methods, and implementation of innovative educational programme changes.

Approximate subject of assessment:

- ✓ *Please indicate the academic degree awarded upon completion of this educational programme.*
- ✓ *Describe the process of planning the revision of the educational programme, including who is involved in the programme revision process and which structural units, advisory bodies or committees, and other stakeholders are involved in this process.*
- ✓ *Specify the changes and additions made to the curriculum during the last revision.*
- ✓ *Describe the principles, approaches, and educational strategies used in the development of the educational programme.*
- ✓ *How is the use of modern principles and methods of teaching confirmed in this educational programme?*
- ✓ *What principles underlie the selection of educational methods and experiences used in the programme?*
- ✓ *How does the content of the curriculum change in relation to progress in knowledge?*
- ✓ *What teaching and learning methods are used in practice to implement the educational programme?*
- ✓ *Describe the types and alignment of methods used to involve students in the learning process to promote self-directed/independent learning and the development of lifelong learning skills and abilities.*
- ✓ *Describe how the principles of equality towards students are observed in the educational organisation.*
- ✓ *Please attach a copy of the anti-discrimination policy of the educational organisation, if available.*
- ✓ *How are the principles of the scientific method considered in the educational programme?*
- ✓ *Which components of the educational programme instill in students the principles of a scientific approach and develop their ability for analytical and critical thinking?*
- ✓ *Are corresponding teaching methods used in the programme, such as problem-based learning and project-based research?*
- ✓ *What special opportunities are available for students in the educational organisation to engage in research projects?*
- ✓ *How are elements/components of elective analytical and experimental research included in the curriculum?*
- ✓ *Describe existing opportunities and outcomes of student participation in research.*
- ✓ *What is the practice of the educational institution in supporting students and involving them in conducting research during their education?*
- ✓ *Provide information about the structure, duration (hours/weeks per semester/academic year), and content of the educational programme, indicating mandatory elements and elective components in the form of courses/modules and their duration.*
- ✓ *Which courses/modules (if applicable) are elective? How are elective components determined?*
- ✓ *Describe the scope of authority and composition of the structural unit responsible for the educational programme. Describe the powers of this unit in resolving conflicts related to educational principles and determining the contribution of specific courses to the curriculum.*
- ✓ *Who is responsible for determining the content of the educational programme?*
- ✓ *How is the curriculum content determined?*
- ✓ *Describe how faculty and students are involved in the educational programme management process.*
- ✓ *Provide the composition of the personnel in the unit and their authorities and responsibilities in the planning, development, implementation, and evaluation of the educational programme, as well as in the integration of innovative technologies and allocation of allocated resources.*
- ✓ *What mechanisms does the structural unit responsible for the educational programme*

have for implementing innovations in teaching, learning, assessment, and the curriculum?

✓ Provide information about such practices and mechanisms, and if available, a plan for the implementation of innovative technologies and the results of evaluating their adaptation and integration into the educational programme.

✓ How are other relevant stakeholders involved in the educational programme management process?

3. STANDARD "STUDENT ASSESSMENT"

3.1 Assessment Methods

The organisation of education must:

3.1.1. define and approve the principles, methods, and practices used for student assessment, including the number of exams, criteria for passing scores, grades, and allowed retakes.

3.1.2. ensure that assessment procedures cover knowledge, skills, attitudes and professional conduct.

3.1.3. use a complementary set of assessment methods and formats according to their "assessment utility", including a combination of validity, reliability, impact on learning, acceptability, and effectiveness of assessment methods and formats.

3.1.4. guarantee that the assessment process and methods are open (accessible) for external expert review.

3.1.5. ensure that assessment methods and results avoid conflicts of interest and utilise a system for appealing student assessment results.

3.1.6. ensure transparency of the assessment procedure and its results, informing students about the criteria and procedures used for assessment.

3.1.7. document and evaluate the reliability and validity of assessment methods, involve external examiners, implement new assessment methods as needed, encourage external expert review process, and if necessary, organise a "second opinion," a change of teaching staff or additional training.

3.2 Relation between Assessment and Learning

The organisation of education must:

3.2.1. use principles, methods, and practices of assessment that are clearly compatible with intended educational outcomes, teaching and learning methods, ensure the achievement of intended educational outcomes, facilitate student learning, and provide an appropriate balance between formative and summative assessment for guiding learning and making decisions about academic performance.

3.2.2. adjust the number and nature of exams to stimulate both knowledge acquisition and integrated learning.

3.2.3. provide timely, specific, constructive, and fair feedback to students based on the results of assessment.

Approximate subject of assessment:

✓ Describe the overall developed assessment policy of the educational organisation, outlining the assessment methods. How is the policy communicated to all stakeholders?

✓ Describe the process of developing and approving documents issued to students that contain information about the assessment policy, assessment methods, including assessment criteria, timing of intermediate and final exams, criteria for passing exams, weighting and criteria for student progress, appeals procedure, number of allowed retakes, and conditions for retaking exams.

✓ How are decisions made regarding the number of assessments and their timing?

✓ How are norms (passing scores) for summative assessment established?

- ✓ *How is the balance between summative and formative assessment, written and oral exams, and criteria-based and judgment-based assessments ensured?*
- ✓ *Who is responsible for the development and implementation of the assessment policy for students? Describe the composition of relevant committees and their scope of authority and responsibilities.*
- ✓ *Who is responsible for planning and implementing a quality assurance system for assessment?*
- ✓ *What steps for quality assurance of assessment are planned and implemented?*
- ✓ *How are individual assessments analysed to ensure their quality?*
- ✓ *How is the competence of staff and external assessors in assessing knowledge, skills, attitudes, and abilities of students ensured, and what specialised training does the educational organisation offer?*
- ✓ *Describe the practice of involving external examiners and selection criteria for including them in the composition of the examination commission.*
- ✓ *Describe the mechanisms for ensuring the reliability and validity of the assessment methods used.*
- ✓ *How are new assessment methods studied, tested, and implemented, and how is their validity and reliability ensured?*
- ✓ *What mechanisms exist for filing appeals and the procedure for reviewing appeals?*
- ✓ *How and with what frequency is the assessment system reviewed?*
- ✓ *Provide a table reflecting the comparability of learning outcomes and assessment methods, as well as the teaching and learning methods used.*
- ✓ *Describe a centralised system for ensuring the implementation of the policy through multiple coordinated assessments that correspond to the learning outcomes of the educational programme.*
- ✓ *How is assessment integrated and coordinated across a range of learning outcomes and the educational programme as a whole?*
- ✓ *Establish clear mechanisms and ensure transparency for informing students about assessment requirements and rules, as well as assessment progress.*
- ✓ *Describe the existing practice of assessing the academic progress of students and established rules.*
- ✓ *How are the assessment practices and methods compatible with the learning outcomes and teaching methods?*
- ✓ *How are assessments used to direct and determine student progress between successive stages of the programme?*
- ✓ *How are students assessed to support their learning?*
- ✓ *How are students assessed to identify those in need of additional support?*
- ✓ *What support systems are offered to students with identified needs?*
- ✓ *What information is provided to students and other stakeholders regarding the content, style, and quality of assessments?*
- ✓ *Describe the practice of providing feedback to students based on assessment results, including assessment of progress and achievement of learning outcomes.*
- ✓ *Provide evidence that the established learning outcomes (knowledge, skills, attitudes/behavior) of the educational programme have been achieved.*
- ✓ *How are comments and feedback collected from students, teachers, and other stakeholders regarding the assessment system?*
- ✓ *If possible, provide summary data on the results of final state exams for graduates who have completed this educational programme and their enrollment in postgraduate programmes over the past 5 years.*

4. STANDARD "STUDENTS"

4.1 Policy of Admission and Selection

The organisation of education must:

4.1.1. determine and implement an admission policy based on the principles of objectivity, including a clear statement about the process of student selection.

4.1.2. ensure a balance between learning opportunities and student admission, formulate and implement policies/rules for student selection according to established criteria.

4.1.3. have a policy and implement practices for admitting students with limited abilities in accordance with the existing laws and regulatory documents of the country.

4.1.4. have a policy and implement practices for transferring students from other educational organisations, including international ones.

4.1.5. establish a connection between admission and the mission of the educational organisation, educational programme, and desired quality of graduates; periodically review the admission policy.

4.1.6. use a system for appealing decisions on student admission, ensure transparency of the selection process, periodically review the admission policy based on relevant social and professional data to meet the needs of healthcare and society.

4.2 Student Intake

The organisation of education must:

4.2.1. define the size of student intake and relate it to its capacity at all stages of the programme.

4.2.2. periodically regulate the number and composition of student intake, taking into account the opinions of stakeholders responsible for planning and developing human resources in the healthcare sector, with the aim of meeting the medical needs of the population and society as a whole.

4.2.3. periodically review the number and characteristics of student intake through consultations with other stakeholders and adjust them to meet the health needs of the population and society as a whole.

4.3 Student Counseling and Support

The organisation of education must:

4.3.1. have a system of academic counseling for students.

4.3.2. offer students a support programme addressing their social, financial, and personal needs, allocating appropriate resources and ensuring confidentiality of counseling and support.

4.3.3. have a system of feedback with students for evaluating the conditions and organisation of the educational process.

4.3.4. provide students with documents confirming their obtained qualification (diploma) and accompanying documents (transcript).

4.3.5. consider the needs of different groups of students and provide opportunities for individual educational trajectories.

4.3.6. provide academic counseling based on monitoring of student performance, including career planning; offer a support programme for students addressing their social, financial, and personal needs; ensure confidentiality of counseling and support; provide support in case of professional crisis.

4.4 Representation of Students

The organisation of education must:

4.4.1. develop and implement a policy for student representation and their meaningful participation in defining the mission, development, management, and evaluation of the educational programme, as well as in planning conditions for students.

4.4.2. encourage students to participate in decision-making processes regarding the processes, conditions, and rules of their education.

Approximate subject of assessment:

- ✓ *Describe the policy and academic (if non-academic) criteria set for admission to the EO?*
- ✓ *Describe briefly the process of selection of students, starting with application and subsequently selection for interview, the interview process, decision-making and admission to the EO. For each stage of the selection process, describe the meaning and criteria on the basis of which decisions are made by the individuals or teams responsible for admitting the learners to the EO.*
- ✓ *Are there any additional requirements at institutional or state level?*
- ✓ *Fill in the following tables 4.1, 4.1.1, 4.1.2, 4.1.3 (if available)*

Table 4.1 Passing rate for admission to a EO (if this methodology is used)

Years	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
Passing grade					

Table 4.1.1 Number of students admitted

Years	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
Number of applicants					
Number of students admitted					

Table 4.1.2 Number of first year students enrolled and total number of students enrolled in the programme

Number of students	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
First year					
Total					

Table 4.1.3 Number of first year students enrolled and total number of students dropping out of the programme

Number of students	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
First year					
Total					

- ✓ *Which body is responsible for the selection and admission policy and what are its powers?*
- ✓ *What methods of selection and admission of learners to the EO does this body use?*
- ✓ *Describe the policies and practices for the admission of learners with disabilities in line with existing laws and regulations in the country?*
- ✓ *How are selection and admission policies communicated to stakeholders?*
- ✓ *What are the policies and practices for the transfer of learners in the EO?*
- ✓ *How is the alignment between the selection and admission policy and the mission of the school determined?*
- ✓ *How and with what regularity is the selection and admission system reviewed?*
- ✓ *Fill in table 4.1.4 (if available)*

Table 4.1.4 Information on students in the education programme

Categories of students	Academic year							Total
	1	2	3	4	5	6	7	
Expelled								
Expelled for academic reasons								
Transferred to another EO								
Transferred from another EO								
Repeated academic year								
Repeated passing of required courses								
Academic leave								

✓ Describe how the methods used to select trainees test their suitability and ability to practise in different areas of health care?

✓ To what extent do they respond to social obligations and public health needs?

✓ How does the admission committee assess the results of its policies in relation to the subsequent academic achievements of the trainees?

✓ Describe the mechanisms and procedures for appeal? How are the appeal rules and procedures communicated to applicants and other stakeholders?

✓ Specify the number of students admitted and any distribution between the different categories.

✓ How is the number of students admitted determined in relation to the material, technical and training capacity of the HEI?

✓ How is equity and diversity ensured in the admission of learners?

✓ How is the need for human resources for health assessed, and which stakeholders are consulted by the EO on changes in the number and composition of learners? Describe briefly the existing practices of the EO.

✓ Describe the practices of the EO in relation to the trainee counselling service. What other support programmes for learners are in place at the EO?

✓ What additional support programmes provided by other organisations can learners access?

✓ Describe existing mechanisms for identifying and allocating resources for learner support?

✓ How is confidentiality of counselling and support for learners ensured?

✓ Describe the opportunity for personal counselling of learners and comment on its accessibility, confidentiality and effectiveness.

✓ Is there a learner health support programme and how is it supported?

✓ Describe the practice of counselling learners regarding their career planning and what mechanisms are in place for such support.

✓ How do academic, personal support and counselling services meet the needs of learners? How are these services recommended and communicated to learners and staff?

✓ How does the EO make learners aware of the learner support services?

✓ What are the mechanisms for evaluating the student support services?

✓ Describe the policy of the EO regarding appropriate participation and input of learners on issues related to the curriculum?

5. STANDARD "ACADEMIC STAFF/FACULTY"

5.1 Recruitment and Selection Policy

The organisation of education must develop and implement a staff selection and recruitment policy that:

5.1.1. contains criteria for scientific, pedagogical and clinical/professional merit of

applicants, including a proper balance between teaching, research and professional qualifications.

5.1.2. determines the duties of the teaching staff, including the balance between educational, research and other functions, taking into account the mission of the programme, the needs of the education system and the needs of the health care system.

5.1.3. takes into account the necessary work experience.

5.1.4. determines the responsibilities of academic staff in terms of their participation in postgraduate education; determines the level of remuneration for participation in postgraduate education.

5.1.5. ensures that teachers have practical experience in the relevant field, that teachers with a sub-speciality function, if necessary, are approved for relevant specific periods of study depending on their qualifications.

5.2 Personnel Commitment and Development

The educational organisation must develop and implement a policy of activity and staff development, which is aimed at:

5.2.1. ensuring that teachers have enough time for teaching, consulting and self-development.

5.2.2. existence of a structure responsible for the development of the academic staff, ensuring periodic evaluation of the academic staff.

5.2.3. development and implementation of a policy to support the academic staff on issues of pedagogy and advanced training for further professional development; evaluate and recognise on merit the scientific and academic achievements of teachers.

5.2.4. considering the “teacher-student” ratio depending on the various components of the EP, taking into account the features that ensure close personal interaction and monitoring of students.

Approximate subject of assessment:

✓ *What are the requirements for the qualification of teachers for employment in the EO?*

✓ *Are there institutional or government policies or requirements that influence the recruitment decisions of the EO?*

✓ *Describe the policy of the EO to ensure that the profile of teaching staff is appropriate to the range and balance of faculty in the basic biomedical sciences, behavioural and social sciences and clinical sciences required to deliver the educational programme.*

✓ *What are the requirements for faculty qualifications for recruitment to a EO?*

✓ *Are there institutional or governmental policies or requirements that affect the recruitment decisions of the EO?*

✓ *How often does the EO review its list of recruitment priorities?*

✓ *Describe what mechanisms are used to identify staff and teacher needs in relation to the specific local context.*

✓ *How does the EO envisage improving its recruitment practices to achieve its mission and learning outcomes, and how are economic opportunities considered?*

✓ *How will such improved practices, as well as economic and resource support, affect the scientific, academic/teaching qualifications of staff?*

✓ *How has the EO achieved the required number and characteristics of its teaching staff?*

✓ *How do the numbers and characteristics of academic staff relate to curriculum design, delivery and quality assurance?*

✓ *Describe the policy of the EO regarding the proper recognition and decent remuneration of academic, research, clinical and managerial staff?*

✓ *Are there any additional institutional or governmental policies or regulations in this area?*

✓ *What mechanisms are in place to develop and support the capacity of teachers and to evaluate their performance?*

- ✓ *What information does the EO provide to new and current teaching staff and how is it provided?*
- ✓ *What staff development programmes exist or are planned whereby teachers can improve their skills and receive an objective assessment of their teaching performance?*
- ✓ *What induction training does the EO provide for teachers?*
- ✓ *How are teachers encouraged to participate in professional development programmes?*
- ✓ *Describe the capacity building programme for teachers on the educational programme and the capacity building plan.*
- ✓ *What information does the EO provide to new and current teachers about facilitating or providing continuing professional development?*
- ✓ *How does the EO assume administrative responsibility for the implementation of the continuing professional development policy?*
- ✓ *Describe how the teacher/trainee ratio for the different components of the educational programme is taken into account in the personnel policy?*
- ✓ *Describe briefly the existing employee promotion policy and its implementation mechanisms.*
- ✓ *Describe how the staff promotion policy is amended. How are faculty members informed about their capabilities and requirements, taking into account the specificity of the departments and how are they assigned to their positions?*

6. STANDARD "EDUCATIONAL RESOURCES"

6.1 Physical Facilities and Equipment

The organisation of education must:

- 6.1.1. guarantee the availability of sufficient, accessible and appropriate learning resources for the purpose.
- 6.1.2. improve the learning environment through regular renewal, expansion and strengthening of facilities and equipment to maintain appropriate quality of education at postgraduate level.

6.2 Resources for Practical Training

The organisation of education must:

- 6.2.1. provide the necessary resources to provide trainees with an appropriate clinical/practical experience, including
 - the quality and categories of patients/service users
 - the number and categories of clinical/production bases which include:
 - supervision of trainees' practice.
- 6.2.2. when choosing the learning environment, ensure appropriate experience in all aspects of the chosen speciality, including training in health care organisation and management and disease prevention.

6.3 Information Technology

The organisation of education must:

- 6.3.1. develop and implement policies for the effective and ethical use and evaluation of relevant information and communication technologies.
- 6.3.2. provide access to websites or other electronic media.
- 6.3.3. optimize teacher and trainee access to relevant patient data and health information systems using existing and appropriate new information and communication technologies for self-study, access to information, patient databases and working with health information systems.

6.4 Medical/Pharmaceutical Research and Scientific Achievements

The organisation of education must:

6.4.1. use research activities and scientific achievements in the field of medicine, pharmacy as a basis for education programme.

6.4.2. formulate and implement policies to strengthen the relationship between research and education; provide information on research base and research priorities of educational organisation

6.4.3. ensure that the relationship between research and education is taken into account in teaching, encourage and prepare students to participate in scientific research in the field of health care.

6.5 Educational Expertise

The organisation of education must:

6.5.1. have access to educational expertise of processes, practice and problems of medical and pharmaceutical education with involvement of specialists, educational psychologists, sociologists of university, interuniversity and international level; develop and implement policy of expertise in development, implementation and evaluation of educational programme, development of teaching methods and evaluation.

6.5.2. demonstrate evidence of use of internal or external educational expertise in personnel development, taking into account current experience in medical/pharmaceutical education and promotion of personnel interest in research in education.

6.6 Exchange in the Field of Education

The organisation of education must:

6.6.1. formulate and implement policies on national and international cooperation with other educational organisations, including staff and student mobility, as well as the transfer of educational credits.

6.6.2 facilitate the participation of teachers and learners in academic mobility programmes at home and abroad and allocate appropriate resources for this purpose.

Approximate subject of assessment:

✓ *How does the EO check the adequacy of educational resources for the educational programme?*

✓ *What mechanisms are in place to provide feedback from learners and teachers on the available facilities and analysis of educational resource needs?*

✓ *What authority does the EO have to allocate resources to address identified deficiencies?*

✓ *Describe the security system and responsible staff who ensure safe learning and a safe learning environment for learners during classes and outside school hours on campus and at the clinical sites of learning.*

✓ *Describe existing and proposed initiatives to prepare for natural and other disasters and emergencies, including planning activities, mandatory training and resource availability, for learners, faculty and staff of the EO.*

✓ *Describe the mechanisms for ensuring a safe environment in classrooms, laboratories and equipment use? How are the available safety instructions and regulations communicated to staff and learners?*

✓ *What are the mechanisms used to upgrade and strengthen the facilities and ensure their compliance with modern technologies in teaching and learning?*

✓ *How does the EO determine the adequacy of the physical infrastructure (space and equipment) provided for theoretical and practical training specified in the educational programme?*

✓ *Indicate what plans are in place to improve the physical infrastructure in line with identified needs and priorities.*

✓ *Describe the existing policy regarding the use of information and communication*

technologies in the curriculum?

✓ *Describe the composition of the committee or unit responsible for information and communication technology policy formulation and implementation?*

✓ *Is there any institutional or governmental policy regarding information and communication technology?*

✓ *What authority does it have to allocate resources for information and communication technology implementation in the curriculum?*

✓ *Describe the mechanisms for evaluating appropriate information and communication technologies used in the educational programme?*

✓ *Describe how access to modern and high quality information resources is provided to support the educational programme (access to bibliographic databases MEDLINE, EMBASE, access to electronic books and reference materials, access to electronic journals).*

✓ *Are there special training programmes for teachers and students on the use of information and communication technologies?*

✓ *What sources of information and resources do learners, teachers and researchers require? How are they made available? How is their adequacy assessed?*

✓ *How does the EO ensure that all learners and teachers have access to the necessary information?*

✓ *Describe briefly the research facilities and ongoing research programmes.*

✓ *Describe the mechanisms that ensure the relationship between scientific research and the educational programme?*

✓ *What mechanisms are in place to ensure that the achievements and results of scientific research are reflected in the educational programme of the EO and in teaching?*

✓ *Describe initiatives and existing practices aimed at involving students in medical research.*

✓ *Complete Tables 6.4, 6.4.1 (if available)*

Table 6.4 Main areas of EO research (as part of the education programme)

Name of topic of research projects/programmes	Client and source of funding	Full name of manager	Dates of implementation	Co-executing organisations, including foreign	Number of local (country) publications	Number of publications in near and far abroad	Number of copyrights, pre-patents, patents, other documents of protection	Number of implemented scientific and technical developments
Total								

Table 6.4.1 Information on the participation of current students in scientific research

Name of scientific projects/research	Participation of students (number)	Articles published (number)	Participation in local, international conferences/presentations (number)

✓ *Describe the current practice of health education expertise. How are research priorities identified and are they focused on the needs of the educational programme?*

✓ *What practices does the EO have in terms of involving psychologists, sociologists and/or external experts in the development of the educational programme, examination of teaching methods and evaluation methods?*

- ✓ *Does the EO have access to internal expertise on health education? Describe the use of such expertise for staff capacity development.*
- ✓ *What practices does the EO have in place to develop expertise in the study and evaluation of health education as a discipline?*
- ✓ *What mechanisms are in place to support staff in their interest in health education research?*
- ✓ *What policy does the EO have regarding collaboration with other EOs?*
- ✓ *Give a brief description of the existing types of collaboration with other EOs and describe their nature.*
- ✓ *What is the policy and practice of the EO regarding transfer and netting of educational credits?*
- ✓ *Describe existing activities aimed at promoting regional and international cooperation with other educational organisations.*
- ✓ *Describe practices and provide information on student and teacher exchanges and joint research.*
- ✓ *What powers does the EO have to allocate resources for international cooperation?*

7. STANDARD "PROGRAMME EVALUATION"

7.1 Mechanisms for Programme Monitoring and Evaluation

The organisation of education must:

7.1.1. have regulated procedures for monitoring, periodic evaluation of educational programme and learning outcomes, progress and achievements of students.

7.1.2. develop and apply evaluation mechanism of education programme, which reviews programme, its main components, learning achievements of students, identifies and solves problems, ensures that relevant evaluation results have impact on EP.

7.1.3. conduct periodic assessment of programme, considering educational process, components of educational programme, expected learning outcomes and social responsibility in a comprehensive way.

7.2 Teacher and Student Feedback

The organisation of education must:

7.2.1. systematically conduct, analyse, and respond to feedback from teachers and students.

7.2.2. use the results of feedback to improve the educational programme.

7.3 Learning Achievements of Students

The organisation of education must:

7.3.1. analyse the progress of students and graduates in accordance with the mission and expected learning outcomes, curriculum and resources.

7.3.2. analyse progress of students and graduates taking into account their previous education conditions, level of preparation at admission; use results of analysis for interaction with structural subdivision responsible for selection of students, development of educational programme, counseling of students.

7.4 Approving and Monitoring the Educational Environment

The organisation of education must:

7.4.1. provide evidence that the EP has been approved by the competent authority on the basis of: clearly defined criteria; programme evaluation; eligibility requirements.

7.4.2. develop and implement a system for monitoring the educational environment and other educational facilities, including site visits and other relevant resources.

Approximate subject of assessment:

- ✓ *How does the EO evaluate its programme?*
- ✓ *Is there a group that independently monitors data on programme implementation and expected learning outcomes, and ensures that any problems identified are reported to the relevant authority?*
- ✓ *What kind of data is collected to study and evaluate the educational programme?*
- ✓ *What mechanisms are in place to investigate and evaluate the educational programme and the progress of learners?*
- ✓ *What mechanisms are used to identify problems and determine achievement of learning outcomes?*
- ✓ *How are the objectives, methods of quality assurance and follow-up of the EO defined?*
- How are the goals, methods of quality assurance made publicly available?*
- ✓ *How are responsibilities for the implementation of the quality assurance system divided between administration, academic staff and educational support staff?*
- ✓ *How are resources for quality assurance allocated?*
- ✓ *How is the quality assurance system used to update the educational design and activities of the EO and therefore to ensure continuous renewal?*
- ✓ *How does the EO encourage individual teachers and learners to participate in programme evaluation activities and subsequent programme improvement?*
- ✓ *What statistics on learning achievements of learners and graduates are collected and analysed, and how are they used in relation to the mission and expected learning outcomes, the curriculum, the availability of resources?*
- ✓ *Which individual dimensions of learners' learning achievements are monitored during the course?*
- ✓ *How are the results of this monitoring used in learner selection, programme planning and learner counselling?*
- ✓ *How are the teaching staff and learners, as well as the administration and management staff of the EO involved in the monitoring and evaluation activities of the educational programme?*
- ✓ *How does the EO communicate the results of the programme evaluation to stakeholders?*
- ✓ *To what extent are other stakeholders involved in the process of monitoring and evaluating and improving the curriculum?*
- ✓ *What mechanisms (formal and informal) are in place to ensure that feedback on learners' practice is properly collected and reviewed, and that the views of other stakeholders are taken into account?*

8. STANDARD "GOVERNANCE AND ADMINISTRATION"

8.1 Governance

The organisation of education must:

8.1.1. ensure that the EP is implemented in accordance with the regulations regarding the admission of trainees; structure and content, assessment process.

8.1.2. document the completion of studies by issuing degrees, diplomas, certificates or other official certificates of qualification provided as the basis for official recognition of a specialist in the chosen field of health care.

8.1.3. be responsible for quality assurance processes, ensure continuous assessment of EP.

8.1.4. ensure the compliance of educational programme with the needs of society in terms of health levels and healthcare systems, ensure transparency of governance structures and their decisions.

8.2 Academic Leadership

The organisation of education must:

8.2.1. determine the responsibility of academic leadership with respect to the development and management of the educational programme.

8.2.2. periodically assess academic leadership in relation to achieving its mission and expected learning outcomes.

8.3 Educational Budget and Resource Allocation

The organisation of education must:

8.3.1. have a clear distribution of responsibility and authority to provide resources for the educational programme, including the management of the EP budget.

8.3.2. manage the budget in a way that is consistent with the mission and results of the EP, ensuring the functional responsibilities of the academic staff and students.

8.4 Administrative Staff and Management

The organisation of education must:

8.4.1. have administrative and professional staff to implement the educational programme and related activities, ensure proper management and resource allocation.

8.4.2. ensure participation of all units of the educational organisation in the processes and procedures of the internal quality assurance system.

8.5 Requirements and Regulations

The organisation of education must:

8.5.1. comply with national legislation regarding the number and types of recognised health professions for which approved study programmes are developed.

8.5.2. approve postgraduate medical education programmes in cooperation with all stakeholders.

8.6 Informing the Public

The organisation of education must:

8.6.1. publish full and accurate information about the educational programme and its achievements on the official website of the educational organisation and in the media.

8.6.2. publish objective information about graduates' employment and demand on the official website.

Approximate subject of assessment:

- ✓ *Describe the management structure, its components and their functions.*
- ✓ *Describe the relationship between the EO and the university in case the EO is part of or affiliated to the university.*
- ✓ *Describe the representation and functions of academic staff, learners and other stakeholders in the various governance structures and committees.*
- ✓ *What processes and committee structures govern teaching, learning and research at the institution?*
- ✓ *What governance mechanisms are in place to check the effectiveness of the EO?*
- ✓ *How are risks identified and mitigated?*
- ✓ *To what extent and how do learners and teachers participate in the decisions and activities of the EO?*
- ✓ *What social or cultural constraints exist on the participation of learners in the management of the EO?*
- ✓ *Describe the academic management structure of the EO, indicating responsibility for individual parts of the educational programme.*
- ✓ *How is the performance of the academic management of the EO examined and evaluated in relation to achieving the mission and objectives and learning outcomes?*

- ✓ *What mechanisms are in place for examining needs, allocating and distributing learning resources?*
- ✓ *What autonomy does the EO have in allocating resources? Describe existing policies and practices of the EO.*
- ✓ *How are resources appropriately allocated to achieve the mission and learning outcomes?*
- ✓ *Describe the funding system of the EO.*
- ✓ *How is budget allocation related to the mission of the EO?*
- ✓ *What administrative functions are provided by the staff of the EO?*
- ✓ *Describe the structure of the administrative staff to support these functions.*
- ✓ *How the number of administrative staff is set in relation to the programme and other activities.*
- ✓ *Does the administrative staff of the EO have a quality management assurance programme?*
- ✓ *How is the quality assurance programme reviewed and management reviewed?*
- ✓ *How does the organisational structure support the effective operation of the EO?*
- ✓ *How does the decision-making process support the effective operation of the EO?*
- ✓ *What is the reporting structure for the administration with regard to teaching, learning and research?*
- ✓ *Describe the relationship of the EO with health services.*
- ✓ *What formal mechanisms are in place to ensure that the EO engages constructively with the health sector?*
- ✓ *Describe any shared responsibilities between EOs and health organisations.*
- ✓ *What information does the educational institution provide about its activities, including offered programmes and admission criteria, expected learning outcomes for these programmes, awarded qualifications, teaching, learning, assessment procedures including passing scores, and opportunities for student learning?*
- ✓ *What information does the educational organisation provide about graduates' employment?*

9. STANDARD "CONTINUOUS RENEWAL"

The education organisation must as a dynamic and socially responsible institution:

9.1.1. initiate procedures for regularly reviewing and updating the process, structure, content, outcomes/competencies, assessment of knowledge and learning environment of the programme; rectify documented deficiencies; allocate resources for continuous renewal.

The education organisation must provide for the following issues to be addressed in the renewal process:

9.1.2. base the renewal process on prospective health research and on the results of own research, evaluation and medical/pharmacy education literature;

9.1.3. ensure that the process of renewal and restructuring leads to a review of policy and practice in line with previous experience, current activities and future perspectives;

9.1.4. direct the renewal process towards adapting the mission statement and expected outcomes to the scientific, socioeconomic and cultural development of the society;

9.1.5. direct the process of renewal towards modifying the intended learning outcomes of graduates in accordance with documented needs of the environment and labour market, including clinical skills, preparation in public health issues, and participation in the process of providing medical care to patients, in line with the responsibilities that are placed on graduates upon completion of their education;

9.1.6. direct the renewal process towards adapting the learning approaches and education methods to ensure that these are appropriate and relevant;

9.1.7. direct the renewal process towards adjusting the structure, content and duration of postgraduate medical education programmes in keeping with developments in the basic biomedical sciences, the behavioural and social sciences, the clinical sciences, changes in the demographic profile and health/disease pattern of the population, and socio-economic and cultural conditions. The adjustment would ensure that new relevant knowledge, concepts and methods are included and outdated ones discarded;

9.1.8. direct the process of renewal towards developing the assessment principles and methods, and examination methods and numbers in line with changes in learning outcomes and teaching and learning methods;

9.1.9. direct the renewal process towards adapting the student recruitment policy, selection methods, and student intake to changing expectations and circumstances, human resource needs, changes in the postgraduate medical education and the requirements of the educational programme;

9.1.10. direct the renewal process towards adapting the academic staff recruitment and development policy according to changing needs;

9.1.11. direct the renewal process towards updating of educational resources to changing needs, i.e. the number of students, number and profile of academic staff, the education programme and accepted contemporary education methods;

9.1.12. direct the renewal process towards improving the process of monitoring, control, and evaluation of the educational programme;

9.1.13. direct the process of renewal towards developing the organisational structure and of governance and management principles to cope with changing circumstances and needs in postgraduate medical education and, over time, accommodating the interests of the different groups of stakeholders.

Approximate subject of assessment:

✓ *Are there procedures in place at the educational institution for regular review and revision of the content, outcomes/competencies of the educational programme?*

✓ *How often is the evaluation of the educational programme and learning environment conducted?*

✓ *Describe recent and planned activities aimed at ensuring timely response of the educational programme to changing conditions.*

✓ *Does the educational institution allocate resources for continuous improvement of the educational programme?*

✓ *What is the basis for the process of updating the educational programme?*

✓ *Does the content of the educational programme reflect the latest scientific advances in a specific discipline?*

VI. APPENDICES

Appendix 1. Recommended Form of the Site Visit Programme

AGREED

Rector _____
(name of the EO)

_____ **Full name**

«__» _____ **202_**

APPROVED

General Director of NPI

"Independent

**Agency for Accreditation and
Rating"**

_____ **Zhumagulova A.B.**

«__» _____ **202_**

VISIT PROGRAMME OF IAAR EXTERNAL EXPERT COMMISSION

To _____
name of the EO

Date of visit: _____ **202_**

Arrival day: _____ **202_**

Departure day: _____ **202_**

Accredited EP (in case of programme accreditation)

<i>Cluster 1</i>	EP
	EP
	EP
<i>Cluster 2</i>	EP
	EP
	EP
<i>Cluster 3</i>	EP
	EP
	EP

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
«__» _____ 202_			
During the day	Arrival of EEC members		Hotel
16.00-18.00	Preliminary meeting of the EEC (distribution of responsibility,	<i>External experts of IAAR</i>	Hotel

*Standards and Guidelines for International Accreditation of Master's Programmes in the Field of Healthcare
(based on WFME/ AMSE/ ESG)*

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
	discussion of key issues and the programme of the visit)		
18.00-19.00	Dinner (EEC members only)	<i>External experts of IAAR</i>	
Day 1: " " 202			
9.00-9.30	Discussion of organisational issues with experts	<i>External experts of IAAR</i>	Main building, office for EEC
9.30-10.00	Meeting with the head of the EO	Director (<i>Full management</i>)	Director's office at EO
10.00-10.30	Meeting with deputy heads of EO (vice-rector, deputy director, vice-presidents)	<i>Position, full name</i>	Main building, Conference office
10.30-11.15	Meeting with heads of organisational units of EO	<i>Position, full name (or Appendix №)</i>	Main building, Conference office
11.15-11.30	Coffee break with internal discussion	<i>EEC members only</i>	EEC office
11.30-12.45	Visual inspection of the EO (in the case of programme accreditation, only objects under the accredited EP)	<i>Position, full name</i>	Along the route
13.00-14.00	Lunch (EEC members only)	Lunch break	
14.00-14.15	EEC work		EEC office
14.15-15.00	Meeting with the heads of the accredited EP	<i>Position, full name (or Appendix №)</i>	Main building, Conference office
15.00-15.45	Meeting with heads of departments of accredited EP	<i>Position, full name (or Appendix №)</i>	Main building, Conference office
15.45-16.00	Coffee break with internal discussion	<i>EEC members only</i>	
16.00-17.00	Meeting with teachers of accredited EP	<i>Lists of teachers (Appendix №)</i>	1-cluster: course lecture room 1 2-cluster: course lecture room 2 3-cluster: course lecture room 3
17.00-18.00	Survey by teachers (in parallel)	<i>Teaching staff of accredited EP</i>	Computer room №513-519
17.00-18.00	EEC work (discussion of the results and summing up the results of 1 day)		EEC office
18.00-19.00	Dinner (EEC members only)		
Day 2: " " 202			

*Standards and Guidelines for International Accreditation of Master's Programmes in the Field of Healthcare
(based on WFME/ AMSE/ ESG)*

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
09.00-09.30	EEC work (discussion of organisational issues)		EEC office
09.30-12.30	Visiting the graduating departments of EP (in the case of programme accreditation)	<i>Position, full name</i>	Academic building №5 Academic building №2
09.30-12.30	Attendance at classes	<i>According to the schedules of accredited EP</i>	Academic buildings №2, 5
12.30-13.00	Work of EEC (exchange of views)		EEC office
13.00-14.00	Lunch (EEC members only)	<i>Lunch break</i>	
14.00-15.00	Meeting with students	<i>Students of accredited EP (Appendix No._)</i>	1-cluster: course lecture room №1 2-cluster: course lecture room №2 3-cluster: course lecture room №3
15.00-16.00	Student survey (in parallel)	<i>Students of accredited EP</i>	Comp.cl. №513-519
15.00-16.00	Meeting with employers	<i>Representatives of state and financial institutions, heads of industrial enterprises and organisations (Appendix No._)</i>	Course lecture room №1
16.00-16.30	Coffee break with internal discussion	<i>only EEC members</i>	EEC office
16.30-17.00	Meeting with EP alumni	<i>Graduates - representatives for each EP (Appendix No._)</i>	Course lecture room №1
17.00-18.00	EEC work (discussion of the estimated parameters of profile, discussion of the results and summarising conclusions 2 days)	<i>only EEC members</i>	EEC office
18.00-19.00	Dinner (EEC members only)		
Day 3: " " _____ 202_			
09.00-09.30	EEC work (discussion of organisational issues)		EEC office
09.30-12.30	Visiting practice bases, branches of departments (clinical bases, educational and clinical centers)	<i>Full name, practice base</i>	Visiting practice bases, branches of departments (clinical bases, educational and clinical centers)
12.30-13.00	EEC work (collegial agreement and preparation of oral preliminary review on results of visit by EEC)		EEC office

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
13.00-14.00	Lunch (EEC members only)	<i>Lunch break</i>	
14.00-16.30	EEC work		EEC office
16.30-17.00	Final meeting of EEC with management of the EO	<i>Heads of the university and structural divisions</i>	Main building, conference office
18.00-19.00	Dinner (EEC members only)		
According to the schedule	<i>Departure of the EEC members</i>		
« <u> </u> » <u> </u> 202 <u> </u>			
According to the schedule	<i>Departure of the EEC members</i>		

Appendix 2. Direction of Interaction with the EO Coordinator

The coordinator is appointed by the head of the EO. The coordinator does not have to be the head of the working group on the preparation of the self-assessment of the EP.

The Coordinator interacts with the IAAR Coordinator on planning and organising a visit to the EO.

To ensure maximum efficiency of the accreditation procedure, the coordinator of the EO contributes to:

- coordination of the process of preparing the self-assessment report of the EP;
- ensuring timely submission of the self-assessment report to IAAR;
- assistance in the timely coordination of the programme of the visit of the EEC;
- ensuring the organisation of visits to facilities according to the visit programme, including the provision of transport;
- ensuring meetings of EEC members with the target groups of the EO during the visit of the EEC;
- organisation of the approval of the EEC report for the presence of actual inaccuracies.

The EO Coordinator facilitates the provision of the necessary additional information about the EP at the request of the members of the external expert commission.

Appendix 3. Recommended Structure of the Self-Assessment Report

The report should be submitted according to the following structure:

Title page with the name of the EO and the Accreditation Body (1 page) *See Appendix 4 below.*

Statement confirming the reliability and accuracy of the submitted data, signed by the first head of the EO (usually given in Appendix 1 of the self-assessment report) (1 page)

Contents (with an automatically editable table of contents) (1 page)

Designations and Abbreviations (1-2 pages)

A list of designations and abbreviations used in the text of the Self-Assessment Report is provided.

I. Introduction (1 page)

1.1 Education Organisation Profile (1-2 pages)

The basis for the external assessment, the result of the previous accreditation (the Accreditation body, the accreditation standards according to which the external assessment was carried out and the status of accreditation) in the case of reaccreditation are indicated.

A brief description of the methods used in the development of the Self-assessment Report of the EO is reflected (appointment of a working group, involvement of stakeholders, etc.).

The following tables are also included in this section.

Table 1

GENERAL INFORMATION ABOUT THE ORGANISATION OF EDUCATION (example)

Full name of the EO	
Contact Information	
Founders	
Year of foundation (name, renaming (when implemented)	
Current accreditation status:	
Location / registration	
Rector / Head of EO	
License (title document)	
Number of students (total, in terms of forms of study: full-time, part-time)	
Date of submission of the self-assessment report	
Name of contact person for preparation of the report	

Levels of education implemented by the university in accordance with the NQF (for example, 6,7,8) and QF-EHEA (for example, 1,2,3 cycles)	
The output of the IAAR Standard according to which the assessment is carried out	
Information about the group that conducted the self-assessment	

Tasble 2

**INFORMATION ABOUT THE EDUCATIONAL PROGRAMME(S)
UNDERGOING INTERNATIONAL ACCREDITATION (example)**

Educational programme / Educational programmes	<i>"Public health" (programme code) "Medicine" (programme code)</i>
Level / Period of study	<i>Master's degree / ___ years</i>
Structural unit (head)	<i>Faculty / Department "Name" Head name, position, academic degree, title</i>
Main departments (heads of departments)	<i>Department of "Public Healthcare" Head name, position, academic degree, title</i>
Dates of the external site visit	<i>Day month Year.</i>
Person in charge of accreditation (tel./fax / e-mail)	<i>Name, position, academic degree, title Contact details</i>
Number of ECTS credits	
Duration of study, form of study	Number of semesters, form of study (full-time, distance, mixed)
Training start date	winter semester / summer semester
Date of introduction of the educational programme	Day month Year
Previous accreditation	Date, duration, accreditation agency
Requirements for applicants	Requirements according to state and EO documents
Further education opportunities (upon completion of the programme)	List the levels and titles of the EP
Goals and objectives of the EP	
Brief description of the EP	Briefly describe structure of EP
Learning outcomes	List final learning outcomes
Specialisation	Direction of training
Additional characteristics	
Number of admitted students	The number of students currently studying at the university
Cost of education	In local currency
Employability	Possible career directions

1.2 Presentation of EO, EP EO (1-2 pages)

A brief history, information about the types of activities of the EO, the directions of educational services, indicating quantitative data on the levels of education, information about the position and status of the EO in the national and international educational space is provided. The uniqueness of the internal quality assurance system functioning in the EO is noted. The information about the accredited EP of the EO is provided.

1.3 Previous Accreditation (1-2 pages)

A brief description of the results of the previous accreditation is provided with an analysis and the degree of implementation of each recommendation of the EEC.

II. Main part. Compliance with the Standards of Accreditation for the Master of Public Health Education Programme (50-60 pages)

The evidentiary and analytical material developed based on the results of the self-assessment of the EP of the EO for compliance with the criteria of each standard of specialised/programme accreditation is presented. The result of the analysis of the current state of the EP is reflected, material is presented on the effectiveness of the functioning of the internal quality assurance system and the effectiveness of its mechanisms, achievements (if available) in accordance with the criteria of standards.

Each Standard is drawn up as follows:

It contains evidentiary and analytical materials on the compliance of the EP EO with the criteria of this standard, thus consistently reflects the results of self-assessment.

Justifications of the positions of the EO EP (strong, satisfactory, suggests improvement, unsatisfactory) are given in accordance with the evaluation of the criteria by the EP self-assessment working group. In the case of the assessment "suggests improvement" and "unsatisfactory", the proposed measures to strengthen the position are indicated.

At the end of each section, the conclusions of the EO working group on the standard are given, for example, "According to the standard "....." (name of the Standard), the EP (name) has ___ "strong" positions, ___ "satisfactory" and ___ "suggesting improvement" positions.

III. SWOT ANALYSIS (1-3 pages)

The analysis of strengths and weaknesses, opportunities and threats identified during the self-assessment of the EP EO for compliance with the standards of specialised/programme accreditation is given.

IV. Conclusion of the Self-Assessment Commission (7-8 pages)

The evaluation table "Parameters of the EP profile" (section "Conclusion of the Self-Assessment Commission") is provided with a note on the compliance of the EP with the criteria (strong/ satisfactory/ suggest improvements/ unsatisfactory) of the evaluation table, considered as the conclusions of the self-assessment working group.

Table 3

Conclusion of the Self-Assessment Commission

№	№	ASSESSMENT CRITERIA	Assessment Indicators			
			Strong	Satisfactory	Suggests improvement	Unsatisfactory
1. STANDARD "MISSION AND OUTCOMES"						
1.1 Mission Definition						
The organisation of education must:						
1	1.1.1.	define the mission of the EP of postgraduate medical education and bring it to the attention of stakeholders and the health sector				

2	1.1.2.	define a postgraduate education programme in the field of healthcare that enables the preparation of a specialist who is: <ul style="list-style-type: none"> • competent in any area of medicine, including all types of medical practice, management and organisation of healthcare; • capable of working independently at a high professional level and as part of a team, when necessary; • committed to lifelong learning, including professional responsibility for maintaining the level of knowledge and skills through performance assessment, auditing, self-assessment of practice, and recognised forms of continuing medical education/continuing professional development 				
3	1.1.3	ensure that the mission encompasses consideration of the health and sanitary needs of the community or society, the needs of the health care delivery system and other aspects of social accountability., as needed				
4	1.1.4.	encourage the organisation and conduct of scientific research by postgraduate students, as well as innovation in the educational process, to facilitate the development of broader competencies beyond the minimum required				
1.2 Institutional Autonomy and Academic Freedom						
The organisation of education must:						
5	1.2.1.	have a preparatory process that is based on recognised basic medical and pharmaceutical education and promotes the professionalisation of the learner				
6	1.2.2.	ensure that the preparatory process promotes professional autonomy, enabling the graduate to act in the best interests of the patient and society				
1.3. Learning Outcomes						
The organisation of education must:						
7	1.3.1.	define the intended educational outcomes that students should achieve upon completion of training with respect to achievements at a postgraduate level regarding knowledge, skills, professional behavior and thinking, appropriate foundation for the future career of trainees in the chosen field of medicine, future roles in the health sector, commitment to and skills in life-long learning, the health needs of the society, the needs of the health care system and other aspects of social accountability				
8	1.3.2.	define generic and discipline/speciality-specific components of educational outcomes that are required to be achieved by students				
9	1.3.3.	ensure appropriate student conduct with respect to fellow students, faculty members, other health care personnel, patients and their relatives				
10	1.3.4.	define the intended educational outcomes based on the results obtained at the prior level of education				
1.4. Participation in Formulation of Mission and Learning Outcomes						
The organisation of education must:						
11	1.4.1.	ensure the participation of principal stakeholders in the formulation of the mission and intended learning outcomes				
12	1.4.2.	ensure that the stated mission and intended learning outcomes are based on the opinions/suggestions of other stakeholders				
<i>Total by Standard</i>						
2. STANDARD "EDUCATIONAL PROGRAMME"						
2.1 Educational Framework						
The organisation of education must:						
13	2.1.1.	determine the educational framework based upon the intended educational outcomes of the programme and official certificates of qualification provided as the basis for official recognition of a specialist in the chosen field of medicine at the national and international level				
14	2.1.2.	determine the educational framework based upon the acquired educational outcomes of basic medical education that is systematic				

		and transparent, which includes and supports the learner in taking responsibility for their own learning process				
15	2.1.3.	describe the general and specific components of learning for the discipline/specialty, use teaching and learning methods that are suitable for both practice and theory, and determine the teaching and learning methods that stimulate, prepare, and support learners in taking responsibility for their own learning process				
16	2.1.4.	guarantee that the educational programme is implemented in accordance with the principles of equality				
17	2.1.5.	guide the learner through mentoring and regular assessment and feedback, and increase the level of learner's independent responsibility as their skills, knowledge, and experience improve				
2.2 Scientific Method						
The organisation of education must:						
18	2.2.1.	instill in learners the principles of scientific methodology, corresponding to the level of postgraduate education, and provide evidence that learners acquire knowledge and understanding of the scientific basis and methods of the chosen field of medicine				
19	2.2.2.	provide evidence that learners become familiar with evidence-based medicine through wide access to relevant clinical/practical experience in the chosen field of medicine				
20	2.2.3.	include in the educational programme official teachings on critical evaluation of literature and scientific data, the results of contemporary scientific research; provide learners with access to research activities; and adjust and update the content of scientific developments in the educational programme				
2.3 Programme Content						
The organisation of education must:						
21	2.3.1.	include in the educational process the practice and theory of medical-biological, clinical, behavioral, and social sciences, clinical decision-making, communication skills, medical ethics, public health, medical jurisprudence, and management disciplines				
22	2.3.2.	organise the educational programme with appropriate attention to patient safety				
23	2.3.3.	make changes to the educational programme to ensure the development of knowledge, skills, and critical thinking for different roles of the graduate, and to align the content of the educational programme with changing conditions and needs of society and the healthcare system				
2.4 Programme Structure, Composition and Duration						
The organisation of education must:						
24	2.4.1.	provide a description of the content, scope, and sequence of courses and other elements of the educational programme, define mandatory and elective components, integrate practice and theory in the educational process, and ensure compliance with national legislation				
25	2.4.2.	take into account the results of basic medical and pharmaceutical education in terms of choosing a field of medicine and requirements for fulfilling various roles in the healthcare system for future graduates				
2.5 The Relation Between Education, Medical Practice and the Healthcare System						
The organisation of education must:						
26	2.5.1.	describe and ensure the integration between theoretical preparation and professional development, guarantee the integration of learning and professional internship, including workplace training				
27	2.5.2.	effectively organise the use of healthcare system opportunities for educational purposes, including workplace practice, ensuring that such education is additional and not subject to requirements for healthcare service provision				
2.6 Learning Management						
The organisation of education must:						

28	2.6.1.	define responsibility and authority for organising, coordinating, managing and evaluating the individual educational setting and learning process				
29	2.6.2.	include in the planning and development of the educational programme appropriate representation of the teaching staff, students and other key and relevant stakeholders				
30	2.6.3.	ensure diverse learning sites, coordinate multi-site education to provide appropriate access to different aspects of the chosen field of medicine, access to resources necessary for planning and implementing teaching and assessment methods, and implementation of innovative educational programme changes				
<i>Total by Standard</i>						
3. STANDARD "STUDENT ASSESSMENT"						
3.1 Assessment Methods						
The organisation of education must:						
31	3.1.1.	define and approve the principles, methods, and practices used for student assessment, including the number of exams, criteria for passing scores, grades, and allowed retakes				
32	3.1.2.	ensure that assessment procedures cover knowledge, skills, attitudes and professional conduct				
33	3.1.3.	use a complementary set of assessment methods and formats according to their "assessment utility", including a combination of validity, reliability, impact on learning, acceptability, and effectiveness of assessment methods and formats				
34	3.1.4.	guarantee that the assessment process and methods are open (accessible) for external expert review				
35	3.1.5.	ensure that assessment methods and results avoid conflicts of interest and utilise a system for appealing student assessment results				
36	3.1.6.	ensure transparency of the assessment procedure and its results, informing students about the criteria and procedures used for assessment				
37	3.1.7.	document and evaluate the reliability and validity of assessment methods, involve external examiners, implement new assessment methods as needed, encourage external expert review process, and if necessary, organise a "second opinion," a change of teaching staff or additional training				
3.2 Relation between Assessment and Learning						
The organisation of education must:						
38	3.2.1.	use principles, methods, and practices of assessment that are clearly compatible with intended educational outcomes, teaching and learning methods, ensure the achievement of intended educational outcomes, facilitate student learning, and provide an appropriate balance between formative and summative assessment for guiding learning and making decisions about academic performance				
39	3.2.2.	adjust the number and nature of exams to stimulate both knowledge acquisition and integrated learning				
40	3.2.3.	provide timely, specific, constructive, and fair feedback to students based on the results of assessment				
<i>Total by Standard</i>						
4. STANDARD "STUDENTS"						
4.1 Policy of Admission and Selection						
The organisation of education must:						
41	4.1.1.	determine and implement an admission policy based on the principles of objectivity, including a clear statement about the process of student selection				
42	4.1.2.	ensure a balance between learning opportunities and student admission, formulate and implement policies/rules for student selection according to established criteria				
43	4.1.3.	have a policy and implement practices for admitting students with limited abilities in accordance with the existing laws and regulatory documents of the country				

44	4.1.4.	have a policy and implement practices for transferring students from other educational organisations, including international ones				
45	4.1.5.	establish a connection between admission and the mission of the educational organisation, educational programme, and desired quality of graduates; periodically review the admission policy				
46	4.1.6.	use a system for appealing decisions on student admission, ensure transparency of the selection process, periodically review the admission policy based on relevant social and professional data to meet the needs of healthcare and society				
4.2 Student Intake						
The organisation of education must:						
47	4.2.1.	define the size of student intake and relate it to its capacity at all stages of the programme				
48	4.2.2.	periodically regulate the number and composition of student intake, taking into account the opinions of stakeholders responsible for planning and developing human resources in the healthcare sector, with the aim of meeting the medical needs of the population and society as a whole				
49	4.2.3.	periodically review the number and characteristics of student intake through consultations with other stakeholders and adjust them to meet the health needs of the population and society as a whole				
4.3 Student Counseling and Support						
The organisation of education must:						
50	4.3.1.	have a system of academic counseling for students				
51	4.3.2.	offer students a support programme addressing their social, financial, and personal needs, allocating appropriate resources and ensuring confidentiality of counseling and support				
52	4.3.3.	have a system of feedback with students for evaluating the conditions and organisation of the educational process				
53	4.3.4.	provide students with documents confirming their obtained qualification (diploma) and accompanying documents (transcript)				
54	4.3.5.	consider the needs of different groups of students and provide opportunities for individual educational trajectories				
55	4.3.6.	provide academic counseling based on monitoring of student performance, including career planning; offer a support programme for students addressing their social, financial, and personal needs; ensure confidentiality of counseling and support; provide support in case of professional crisis				
4.4 Representation of Students						
The organisation of education must:						
56	4.4.1.	develop and implement a policy for student representation and their meaningful participation in defining the mission, development, management, and evaluation of the educational programme, as well as in planning conditions for students				
57	4.4.2.	encourage students to participate in decision-making processes regarding the processes, conditions, and rules of their education				
<i>Total by Standard</i>						
5. STANDARD "ACADEMIC STAFF/FACULTY"						
5.1 Recruitment and Selection Policy						
The organisation of education must develop and implement a staff selection and recruitment policy that:						
58	5.1.1.	contains criteria for scientific, pedagogical and clinical/professional merit of applicants, including a proper balance between teaching, research and professional qualifications				
59	5.1.2.	determines the duties of the teaching staff, including the balance between educational, research and other functions, taking into account the mission of the programme, the needs of the education system and the needs of the health care system				
60	5.1.3.	takes into account the necessary work experience				
61	5.1.4.	determines the responsibilities of academic staff in terms of their participation in postgraduate education; determines the level of remuneration for participation in postgraduate education				
62	5.1.5.	ensures that teachers have practical experience in the relevant field,				

		that teachers with a sub-speciality function, if necessary, are approved for relevant specific periods of study depending on their qualifications				
5.2 Personnel Commitment and Development						
The educational organisation must develop and implement a policy of activity and staff development, which is aimed at:						
63	5.2.1.	ensuring that teachers have enough time for teaching, consulting and self-development				
64	5.2.2.	existence of a structure responsible for the development of the academic staff, ensuring periodic evaluation of the academic staff				
65	5.2.3.	development and implementation of a policy to support the academic staff on issues of pedagogy and advanced training for further professional development; evaluate and recognise on merit the scientific and academic achievements of teachers				
66	5.2.4.	considering the “teacher-student” ratio depending on the various components of the EP, taking into account the features that ensure close personal interaction and monitoring of students				
<i>Total by Standard</i>						
6. STANDARD "EDUCATIONAL RESOURCES"						
6.1 Physical Facilities and Equipment						
The organisation of education must:						
67	6.1.1.	guarantee the availability of sufficient, accessible and appropriate learning resources for the purpose				
68	6.1.2.	improve the learning environment through regular renewal, expansion and strengthening of facilities and equipment to maintain appropriate quality of education at postgraduate level				
6.2 Resources for Practical Training						
The organisation of education must:						
69	6.2.1.	provide the necessary resources to provide trainees with an appropriate clinical/practical experience, including <ul style="list-style-type: none"> ○ the quality and categories of patients/service users ○ the number and categories of clinical/production bases which include: <ul style="list-style-type: none"> • supervision of trainees' practice 				
70	6.2.2.	when choosing the learning environment, ensure appropriate experience in all aspects of the chosen specialty, including training in health care organisation and management and disease prevention				
6.3 Information Technology						
The organisation of education must:						
71	6.3.1.	develop and implement policies for the effective and ethical use and evaluation of relevant information and communication technologies				
72	6.3.2.	provide access to websites or other electronic media				
73	6.3.3.	optimize teacher and trainee access to relevant patient data and health information systems using existing and appropriate new information and communication technologies for self-study, access to information, patient databases and working with health information systems				
6.4. Medical/Pharmaceutical Research and Scientific Achievements						
The organisation of education must:						
74	6.4.1.	use research activities and scientific achievements in the field of medicine, pharmacy as a basis for education programme				
75	6.4.2.	formulate and implement policies to strengthen the relationship between research and education; provide information on research base and research priorities of educational organisation				
76	6.4.3.	ensure that the relationship between research and education is taken into account in teaching, encourage and prepare students to participate in scientific research in the field of health care				
6.5 Educational Expertise						
The organisation of education must:						
77	6.5.1.	have access to educational expertise of processes, practice and problems of medical and pharmaceutical education with involvement				

		of specialists, educational psychologists, sociologists of university, interuniversity and international level; develop and implement policy of expertise in development, implementation and evaluation of educational programme, development of teaching methods and evaluation				
78	6.5.2.	demonstrate evidence of use of internal or external educational expertise in personnel development, taking into account current experience in medical/pharmaceutical education and promotion of personnel interest in research in education				
6.6 Exchange in the Field of Education						
The organisation of education must:						
79	6.6.1.	formulate and implement policies on national and international cooperation with other educational organisations, including staff and student mobility, as well as the transfer of educational credits				
80	6.6.2.	facilitate the participation of teachers and learners in academic mobility programmes at home and abroad and allocate appropriate resources for this purpose				
<i>Total by Standard</i>						
7. STANDARD "PROGRAMME EVALUATION"						
7.1. Mechanisms for Programme Monitoring and Evaluation						
The organisation of education must:						
81	7.1.1.	have regulated procedures for monitoring, periodic evaluation of educational programme and learning outcomes, progress and achievements of students				
82	7.1.2.	develop and apply evaluation mechanism of education programme, which reviews programme, its main components, learning achievements of students, identifies and solves problems, ensures that relevant evaluation results have impact on EP				
83	7.1.3.	conduct periodic assessment of programme, considering educational process, components of educational programme, expected learning outcomes and social responsibility in a comprehensive way				
7.2. Teacher and Student Feedback						
The organisation of education must:						
84	7.2.1.	systematically conduct, analyse, and respond to feedback from teachers and students				
85	7.2.2.	use the results of feedback to improve the educational programme				
7.3. Learning Achievements of Students						
The organisation of education must:						
86	7.3.1.	analyse the progress of students and graduates in accordance with the mission and expected learning outcomes, curriculum and resources				
87	7.3.2.	analyse progress of students and graduates taking into account their previous education conditions, level of preparation at admission; use results of analysis for interaction with structural subdivision responsible for selection of students, development of educational programme, counseling of students				
7.4. Approving and Monitoring the Educational Environment						
The organisation of education must:						
88	7.4.1.	provide evidence that the EP has been approved by the competent authority on the basis of: clearly defined criteria; programme evaluation; eligibility requirements				
89	7.4.2.	develop and implement a system for monitoring the educational environment and other educational facilities, including site visits and other relevant resources				
<i>Total by Standard</i>						
8. STANDARD "GOVERNANCE AND ADMINISTRATION"						
8.1. Governance						
The organisation of education must:						
90	8.1.1.	ensure that the EP is implemented in accordance with the regulations regarding the admission of trainees; structure and content, assessment process				
91	8.1.2.	document the completion of studies by issuing degrees, diplomas,				

		certificates or other official certificates of qualification provided as the basis for official recognition of a specialist in the chosen field of health care				
92	8.1.3.	be responsible for quality assurance processes, ensure continuous assessment of EP				
93	8.1.4.	ensure the compliance of educational programme with the needs of society in terms of health levels and healthcare systems, ensure transparency of governance structures and their decisions				
8.2. Academic Leadership						
The organisation of education must:						
94	8.2.1.	determine the responsibility of academic leadership with respect to the development and management of the educational programme				
95	8.2.2.	periodically assess academic leadership in relation to achieving its mission and expected learning outcomes				
8.3. Educational Budget and Resource Allocation						
The organisation of education must:						
96	8.3.1.	have a clear distribution of responsibility and authority to provide resources for the educational programme, including the management of the EP budget				
97	8.3.2.	manage the budget in a way that is consistent with the mission and results of the EP, ensuring the functional responsibilities of the academic staff and students				
8.4. Administrative Staff and Management						
The organisation of education must:						
98	8.4.1.	have administrative and professional staff to implement the educational programme and related activities, ensure proper management and resource allocation				
99	8.4.2.	ensure participation of all units of the educational organisation in the processes and procedures of the internal quality assurance system				
8.5. Requirements and Regulations						
The organisation of education must:						
100	8.5.1.	comply with national legislation regarding the number and types of recognised health professions for which approved study programmes are developed				
101	8.5.2.	approve postgraduate medical education programmes in cooperation with all stakeholders				
8.6. Informing the Public						
The organisation of education must:						
102	8.6.1.	publish full and accurate information about the educational programme and its achievements on the official website of the educational organisation and in the media				
103	8.6.2.	publish objective information about graduates' employment and demand on the official website				
<i>Total by Standard</i>						
9. STANDARD "CONTINUOUS RENEWAL"						
The education organisation must as a dynamic and socially responsible institution:						
104	9.1.1.	initiate procedures for regularly reviewing and updating the process, structure, content, outcomes/competencies, assessment of knowledge and learning environment of the programme; rectify documented deficiencies; allocate resources for continuous renewal				
The education organisation must provide for the following issues to be addressed in the renewal process:						
105	9.1.2.	base the renewal process on prospective health research and on the results of own research, evaluation and medical/pharmacy education literature				
106	9.1.3.	ensure that the process of renewal and restructuring leads to a review of policy and practice in line with previous experience, current activities and future perspectives				
107	9.1.4.	direct the renewal process towards adapting the mission statement and expected outcomes to the scientific, socioeconomic and cultural development of the society				

*Standards and Guidelines for International Accreditation of Master's Programmes in the Field of Healthcare
(based on WFME/ AMSE/ ESG)*

108	9.1.5.	direct the process of renewal towards modifying the intended learning outcomes of graduates in accordance with documented needs of the environment and labour market, including clinical skills, preparation in public health issues, and participation in the process of providing medical care to patients, in line with the responsibilities that are placed on graduates upon completion of their education				
109	9.1.6.	direct the renewal process towards adapting the learning approaches and education methods to ensure that these are appropriate and relevant				
110	9.1.7.	direct the renewal process towards adjusting the structure, content and duration of postgraduate medical education programmes in keeping with developments in the basic biomedical sciences, the behavioural and social sciences, the clinical sciences, changes in the demographic profile and health/disease pattern of the population, and socio-economic and cultural conditions. The adjustment would ensure that new relevant knowledge, concepts and methods are included and outdated ones discarded				
111	9.1.8.	direct the process of renewal towards developing the assessment principles and methods, and examination methods and numbers in line with changes in learning outcomes and teaching and learning methods				
112	9.1.9.	direct the renewal process towards adapting the student recruitment policy, selection methods, and student intake to changing expectations and circumstances, human resource needs, changes in the postgraduate medical education and the requirements of the educational programme				
113	9.1.10.	direct the renewal process towards adapting the academic staff recruitment and development policy according to changing needs				
114	9.1.11.	direct the renewal process towards updating of educational resources to changing needs, i.e. the number of students, number and profile of academic staff, the education programme and accepted contemporary education methods				
115	9.1.12.	direct the renewal process towards improving the process of monitoring, control, and evaluation of the educational programme				
116	9.1.13.	direct the process of renewal towards developing the organisational structure and of governance and management principles to cope with changing circumstances and needs in postgraduate medical education and, over time, accommodating the interests of the different groups of stakeholders				
<i>Total by Standard</i>						
GRAND TOTAL ACCORDING TO ALL STANDARDS						

Appendices to the self-assessment report (be filed as a separate file in accordance with the standards and guidelines for international accreditation of Master's in Public Health programmes, or the annexes can be hyperlinked in the body of the self-assessment report).

Appendix 4. Example of the Title Page

Name of the EO

APPROVED
Rector
_____ Full name
sign
« _____ » _____ 20____
seals

SELF-ASSESSMENT REPORT

**on the educational programme
"Name of the programme" of
"Name of the educational institution"
or
for the cluster of educational programmes
"Name of the programmes" of
"Name of the educational institution"
prepared for
the Independent Agency for Accreditation and Rating (IAAR)**

City, year

Appendix 5. Functions and Responsibilities of the Members of the EEC

Functions of the Chairman:

- participation in the development of the programme of the visit to the EO and responsibility for its implementation, leadership and coordination of the work of the members of the EEC, preparation of the final report of the EEC with recommendations for improving the quality of the EP and recommendations for the Accreditation Council;
- interaction with the IAAR coordinator prior to conducting an external evaluation on the organisation and visit and programme approval;
- setting the agenda and holding meetings;
- ensuring the participation of members of the expert commission at meetings with various target groups, as well as monitoring compliance by experts with the main purpose of the external assessment and visit to the EO;
- ensuring collegial discussion of the evaluation table of parameters by the entire composition of the EEC in accordance with international standards IAAR;
- holding a final meeting with the members of the EEC to coordinate recommendations on the accreditation of the EP;
- Presentation of the results of the visit to the EO and the main provisions of the EEC report at the meeting of the Accreditation Council. In case of his absence for a valid reason, the presentation of the results of the visit to the EO is carried out by one of the members of the EEC.

Duties of the Chairman

Before the visit:

- get acquainted with the data of the EO and EP;
- study the EP self-assessment report and write a review according to the requirements of the IAAR;
- take part in the development of the programme of the visit of the EEC;
- officially present all the members of the EEC at a preliminary meeting, inform the purpose of the visit, discuss the programme of the visit and the self-assessment report of the EP.

During the visit:

- to hear the opinions of the members of the EEC on the self-assessment of the EP and identify areas that require clarification;
- distribute responsibilities among the members of the EEC;
- speak at meetings with target groups;
- hold a final meeting with the members of the EEC to agree on recommendations;
- to provide oral feedback on the results of the visit of the EEC, to familiarise with the draft recommendations of a general nature in time for the final meeting with the management of the EO.

After the visit:

- to prepare a draft report on the results of the visit of the EEC and coordinate it with the members of the EEC;
- send a draft report on the results of the EEC visit for consideration by the IAAR;
- if there are actual inaccuracies identified after the approval of the EEC report with the EO, make the necessary changes to the EEC report and coordinate them with the EEC members;
- in case of disagreement with the comments of the EO to the EEC report, prepare together with the IAAR coordinator an official response with justification in the EO;
- To prepare a report of the EEC for submission to the Accreditation Council for consideration.

Functions of an external expert

- assessment of the completeness and reliability of the results of the self-assessment of the EP in accordance with international standards IAAR;
- preparation for each meeting with the target groups of the EO with the definition of key issues in accordance with international standards IAAR;
- preparation of a report on the results of an external evaluation of the EP for compliance with international IAAR standards;
- development of recommendations for improving the quality of EP;
- development of recommendations for the Accreditation Council for Accreditation in accordance with the level of preparedness of the EO for accreditation of master's programmes in the field of healthcare.

Responsibilities of an external expert

Before the visit:

- study all documentation, including the self-assessment report and any other available information (Standards, legal acts in the field of education, the relevant country where accreditation is carried out, IAAR websites, EO, etc.);
- keep in touch with IAAR and the Chairman of the EEC;
- prepare a review (except for employers and students) for compliance with international accreditation standards according to IAAR requirements;
- discuss with the IAAR Coordinator and Chairman a visit to the EO;
- coordinate with the IAAR coordinator the details of the trip;
- participate in the preliminary meeting of the EEC.

During the visit:

- actively participate in all meetings and discussions, contribute to the work of the EEC;
- perform duties within the EEC related to the direction of the assessment;
- inform the IAAR Coordinator and the Chairman of any doubts and questions that arise during the work of the EEC;
- to continue working as part of the EEC during the entire period of the visit;
- to speak at meetings in agreement with the Chairman of the EEC;
- document the received data;
- provide the Chairman of the EEC with the necessary documentation on the data obtained during the external evaluation;
- conduct interviews with target groups;
- attend various types of classes, training facilities, practice base, etc. according to the programme of the visit of the EEC;
- participate in conducting online surveys of teachers and students aimed at identifying the degree of satisfaction with the educational process;
- receive through the IAAR Coordinator and the Chairman additional information necessary to analyse the prospects of the EP.

After the visit:

- participate in the preparation of the EEC report;
 - destroy confidential materials received during the visit;
- not to disclose the results of the external evaluation of the EP until the official decision of the AC is made.

Appendix 6. Preparation of an External Expert Commission for Site Visit

The purpose of the visit to the educational organisation of the external expert commission of the Independent Accreditation and Rating Agency is to assess the quality of the EP according to the international standards of accreditation IAAR and develop recommendations on accreditation for consideration by the Accreditation Council. To achieve the goal, the following tasks are defined:

- control of completeness and reliability of the results of self-assessment of the EP;
- conducting an assessment in accordance with international IAAR standards developed on the basis of ESG;
- development of the EEC report on the results of the EP assessment;
- preparation of recommendations for improving the quality of the EP;
- preparation of recommendations for the Accreditation Council for Accreditation in accordance with the level of preparedness of the EO and EP for accreditation.

Materials considered by the EEC before the visit to the EO

The following methodological and regulatory documentation is sent to the members of the external expert commission:

- Regulatory documents concerning the external audit of the EO, EP;
- Standards and Guidelines for International Accreditation of Master's Programmes in the Field of Healthcare (based on WFME/ AMSE/ ESG);
- Self-assessment report submitted within the framework of the accredited EP;
- Information about the composition of the expert commission;
- Schedule of the visit to the EO;
- Additional information about the EO, EP (at the request of members of the external expert commission).

Review of the self-assessment report of the accredited EP

After receiving the self-assessment report (SAR) of the EP accredited by IAAR, copies of the SAR are sent to the expert commission no later than 6 weeks before the date of the visit.

Each member of the expert commission must carefully study the SAR and write a review (except for the employer and the student) in accordance with the requirements of the IAAR.

Preliminary meeting of the EEC

The preliminary meeting is held in order to coordinate and distribute the responsibilities of the members of the EEC by the Chairman, discuss the programme of the visit, the self-assessment report of the EP to identify key points and issues requiring additional information. The preliminary meeting of the EEC is held according to the programme the day before the visit to the EO. Only EEC members are present at the meeting. The preliminary meeting provides for consideration of the following issues:

- Does the SAR provide sufficient information on all aspects specified in this Manual at the EO level?
- What additional information about EO and EP should be provided?
- Is the specifics of EO and EP sufficiently reflected?
- Have the strategic goals been achieved?
- Are the mechanisms of strategic management of the EO and the management of the EP clearly defined?
- What are the main areas of issues that should be taken into account during the visit in particular?

The Chairman of the external expert commission and its members should discuss their impressions on the results of the information received prior to the visit, in order to identify any

additional documentation they would like to access, and the main structure and strategy of the visit should also be determined.

Recommendations for planning the work of the EEC

The EO submits a preliminary schedule of events planned during the visit to the IAAR and the Chairman of the expert commission for consideration.

The plan of activities during the visit should be well drawn up to improve the efficiency of the work schedule. The planned meeting should provide an opportunity to cross-check the facts presented in the self-assessment report.

The work schedule should include meetings with the management of the EO and its departments, employees, students, graduates and representatives of professional associations.

When planning a visit, it should be provided that the expert commission needs sufficient time to hold group meetings at which the members of the expert commission can review the evidence presented, formulate and discuss preliminary conclusions, as well as resolve issues on the main structure and agenda of the next meetings and interviews with key employees and stakeholders of the EO and EP. The expert group should also have sufficient time for individual meetings with employees and students of the EO.

The schedule of the visit of the EO by the expert group for external evaluation should also include information about the participants of the EO EP.

In order to make the most effective use of the time allocated for the visit, the expert group can be divided into small subgroups for meetings and interviews in the EO.

Meetings and interviews during the visit

During meetings and interviews with EO representatives, the expert group verifies the information provided by the EO in the self-assessment report. It is expected that the scheduled meetings should provide an opportunity for cross-checking the facts.

The results of the meetings and interviews serve as the basis for evaluating the EP. For this purpose, each member of the expert commission receives reference tables with verification criteria.

Meeting with management

The meeting with the management staff is aimed at obtaining general information about the activities of the EO, quality assurance policies and mechanisms, compliance with regional and national quality assurance requirements.

During the interaction, the parties discuss the participation of all stakeholders (administrative bodies, teachers, students and employers) in determining the goals and development strategy of the EO in the field of education.

Meetings with the management of departments

Interviews with the heads of departments are aimed at discussing issues related to the development and implementation of EP and the processes that ensure their implementation, as well as research activities and general management.

The optimal number of participants in group discussions is from ten to twenty people.

Meetings with students

Students are a valuable source of information, and the opinions of students should be compared with the information provided by the teaching staff.

From interviews with students, the expert group receives information about the workload, the level of professional competence of teachers, the systematicity and consistency of the EP, the clarity of goals and objectives, the development of curricula, as well as the material resources available for the implementation of the educational process.

Interviews with students should be conducted in a favorable environment, at meetings organised for interviews only with students. The optimal number of students for the meeting is no

more than twenty people. Students invited to the interview should be familiar with the programme accreditation considered.

It is recommended that the selection of candidates for interviews from among the students be carried out by members of the expert commission.

Meetings with the teaching staff

During meetings and interviews with the teaching staff, issues related to the implementation of the educational process, quality assurance, as well as research, mobility, resources and funding are discussed.

Topics/questions that were previously discussed at meetings with students are also raised. The preferred number of participants is 15-25 people.

Meeting with graduates

Graduates are a very important source of information. The opinions of graduates provide information about satisfaction with the level of education, the realisation of expectations for promotion and salary increases, employment opportunities and opportunities for further education.

Interviews should be conducted in the absence of teaching staff so that respondents can express their opinions. The optimal number of group members is up to 25 people. The group should include graduates of this EP EO.

Meeting with employers

The key issues that should be discussed during meetings with employers are the level of competence of graduates of the EO, the demand for graduates in the regional labor market. The meetings also discuss the problems of cooperation and interaction with an educational institution in the field of management, coordination of the content of the EP and quality assessment.

Teachers should not participate in this meeting. The group of employers should include representatives of organisations that regularly hire graduates of the EO. If possible, the employer organisations should not be represented by former students of the EO. The optimal number of group members is 15-25 people.

Summing up and preparing recommendations

Summing up the results in accordance with the evaluation table "Parameters of the EP profile" is carried out on the basis of an individual external assessment collectively.

The evaluation table "Parameters of the EP profile" is the final document for summarising the work of the EEC.

The evaluation table "EP Profile Parameters" allows the EEC to determine the position of the EO, which is evaluated according to each criterion as follows:

- **"Strong"** is characterised by a high level of indicators of the international accreditation standard for Master's Programmes in the Field of Healthcare. This position of the standard allows us to serve as an example of good practice for dissemination among other educational organisations.

- **"Satisfactory"** is determined by the average level of indicators of the international accreditation standard for Master's Programmes in the Field of Healthcare.

- **"Suggests improvement"** is characterised by a low level of indicators of the international accreditation standard for Master's Programmes in the Field of Healthcare.

- **"Unsatisfactory"** means that the indicators of the EP EO do not meet the standard of accreditation of the EP.

Based on the collegial decision of the EEC, based on the results of the assessment, it prepares a report with recommendations on accreditation for the AC and on improving the quality of the EO EP.

The EEC recommends one of the following decisions to the Accreditation Council:

- to accredit the EP EO and (or) for a period of 1/3/5/7 years;

- not to accredit EP EO.

In case of compliance with the IAAR Standards, the EEC makes a recommendation to improve the quality.

In case of non-compliance of the EP EO with the IAAR Standards, the EEC recommends determining the measures necessary to bring the EP EO into compliance with the IAAR Standards.

Final meeting of the members of the external expert commission with representatives of the EO

The chairman of the external expert commission should clearly and concisely present the key issues that are important for the effective implementation of the EP, indicate the advantages and disadvantages of the EP EO under consideration, suggest alternative ways to solve the identified problems and recommendations on the action plan aimed at improving the quality of educational activities.

The conclusions of the review should not be mentioned. The results of the audit are also not discussed.

Workplace of the external expert commission

During the visit to the EO, it should provide a separate workplace for the expert commission for panel meetings and review sessions. During the entire visit, only members of the expert commission should have access to the premises.

The room for the expert commission should be spacious and separate from other rooms, also have a large desk for documents, a desk for collegial work, an international telephone, a computer with Internet access and a printer.

All documentation related to the external evaluation process, including the list of teachers, EP, work programmes, student papers, research documents, catalogs, leaflets, etc. should be collected in the specified working room.

Appendix 7. Responsibilities of the IAAR Coordinator within the Framework of the International Accreditation Procedure for Master's Programmes in the Field of Healthcare

Before the visit:

- provide normative and methodological materials on the organisation and conduct of the self-assessment of the EO developed by IAAR;
- keep in touch with the EO and participate in meetings on the accreditation procedure;
- advise the EO on the accreditation procedure, including on self-assessment and the preparation of a self-assessment report;
- carry out technical proofreading of the self-assessment report for completeness and applicability (if important omissions are found, request missing materials from the EO coordinator);
- Instruct external experts on the requirements of international accreditation.
- Provide external experts with regulatory and methodological materials (developed by IAAR) defining the activities of the external expert commission.
- provide the necessary information in a timely manner, including a self-assessment report to the members of the EEC for study and review;
- send, if necessary, recommendations to the EO on finalising the self-assessment report based on expert reviews;
- coordinate the time frame of the EEC visit to the EO;
- organise a visit to the EEC (accommodation, meals, transfer, etc.);
- provide the EEC with an approved visit program;
- send the composition of the EEC to the EO to exclude a conflict of interest 14 calendar days before the visit;
- act as the main contact person and maintain communication between the EEC, EO and IAAR;
- to organise information support for the preliminary meeting of the members of the external expert commission before the visit to the EO.

During the visit:

- regulate the activities of the EEC, provide the necessary methodological materials;
- to create a favorable psychological climate for the work of the EEC;
- monitor the integrity of the accreditation process and ensure compliance with IAAR requirements.

After the visit:

- send the draft of the EEC report to the EO in order to prevent factual inaccuracies in the content of the report;
- Ensure timely transfer of materials to the AC Secretary;
- send the report of the EEC to the EO after the decision of the AC on the accreditation of the EP of the EO (in case of a positive decision of the AC on accreditation, provide a request for an Action Plan to implement the recommendations of the EEC);
- inform the members of the EEC about the decision of the AC;
- to provide feedback on the accreditation procedure of the EP of the EO (online survey of the members of the EEC and the EO after the decision on accreditation).