



«АККРЕДИТТЕУ ЖӘНЕ РЕЙТИНГТИҢ  
ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО  
АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR  
ACCREDITATION AND RATING

IAAR STANDARDS AND GUIDELINES FOR  
INTERNATIONAL INITIAL ACCREDITATION  
(EX-ANTE) OF MASTER'S PROGRAMMES IN  
MEDICAL AND PHARMACEUTICAL EDUCATION  
ABROAD  
(based on WFME / AMSE standards)

# INDEPENDENT AGENCY FOR ACCREDITATION AND RATING

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## **IAAR STANDARDS AND GUIDELINES FOR INTERNATIONAL INITIAL ACCREDITATION (EX-ANTE) OF MASTER'S PROGRAMMES IN MEDICAL AND PHARMACEUTICAL EDUCATION ABROAD (based on WFME / AMSE standards)**

**Astana 2018**

## Foreword

**1. DEVELOPED AND INTRODUCED** by the Non-Profit Institution “Independent Agency for Accreditation and Rating”.

**2. APPROVED AND EFFECTED** by the Order of the Director of the Non-Profit Institution “Independent Agency for Accreditation and Rating” No. 68-18 / 1-OD dated May 25, 2018.

**3. This standard was developed in accordance with the International Standards of the World Federation for Medical Education (2017).**

**4. ORIGINAL HOLDER** – Independent Agency for Accreditation and Rating: 010000, Astana, 2 B. Momysuly str., internal entrance-4G

**5. INTRODUCED FOR THE FIRST TIME**

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## **MAIN PROVISIONS**

This document consists of two parts: “Procedure for conducting initial international accreditation” and “Standards of international initial programme accreditation” and defines the procedure for conducting initial international accreditation of educational programmes in medical educational organizations and regulatory requirements for the main provisions of the standards of international initial programmes accreditation (Ex-Ante) of postgraduate medical education.

This document was compiled on the basis of an analysis of normative and regulatory documents at the international level: WFME International standards for improving the quality of education (basic medical education) (Denmark, 2003); WHO/WFME guidelines for accreditation of basic medical education (Geneva, Copenhagen, 2005); International standards of the World Federation of Medical Education for improving the quality of basic medical education (WFME, University of Copenhagen, 2012); WFME International standards for improving the quality of education (basic medical education) (reissued without changes in content, Denmark, 2017).

The procedure for conducting international initial programme accreditation, regardless of the direction, is carried out according to the approved stages specified in the first part of the document.

Changes and additions are made to the current accreditation standard in order to further improve it. Changes and additions to the standard are made by the accreditation body. If changes and additions to the current standard are initiated by educational organizations and other interested organizations, their suggestions and comments are sent to the accreditation body. The accreditation body examines and evaluates the proposals and comments received from the initiators for their validity and expediency. Changes and additions to the current accreditation standard, after their approval, are approved by order of the Director of accreditation body in a new edition with changes or in the form of an insert brochure to the current standard.

## **PART I.**

### **I. PROCEDURE OF INTERNATIONAL ACCREDITATION**

#### **Goals and objectives of international accreditation**

The purpose of international accreditation (hereinafter referred to as accreditation) is to evaluate and recognize the high quality of the medical education organization and the educational programmes offered in accordance with international accreditation standards in accordance with the international standards for quality improvement in medical education (WFME/ AMSE).

The international accreditation procedure serves for general purpose of evaluating the quality of medical education organizations and compliance with international standards. When conducting international accreditation, the specific legislation of the respective countries is taken into account.

International accreditation standards and procedures are in line with the main principles and documents of the Bologna process.

For programme accreditation, in order to ensure a qualitative assessment of the educational programme (hereinafter - EP) and the effectiveness of the activities of the External Expert Commission (hereinafter - EEC), a cluster approach is implemented, which provides for the division of accredited educational programmes into clusters. One cluster includes no more than 5 educational programmes. It is allowed to evaluate no more than 20 educational programmes during one visit of the External Expert Commission.

The main principles of international accreditation are: professional and accessible assessment; voluntary; independence; objectivity and professionalism; transparency, reliability and relevance of information about accreditation procedures; collective decision-making, dissemination of information about positive and negative results.

#### **Procedure for international accreditation**

The procedure includes the following steps:

##### **1. Submission of application for accreditation.**

Submission of a medical education organization for programme accreditation with the attachment of copies of title and permits.

Consideration by the IAAR of the application of a medical educational organization.

##### **2. Conclusion of an agreement between EO and IAAR.**

Adoption of the IAAR decision to start the procedure of initial programme accreditation of a medical educational organization. The schedule of visits to a medical educational organization, conditions and financial issues of accreditation are determined by an agreement between the Independent Agency for Accreditation and Rating (IAAR) and the educational organization.

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At the request of a medical educational organization, the IAAR can organize training to explain the criteria and procedures for initial programme accreditation to internal experts of a medical education organization at special seminars on the theory, methodology and technology of conducting initial programme accreditation. This workshop procedure is not a mandatory component of the accreditation process.

### **3. Preparation of self-assessment report**

The medical education organization independently organizes and conducts a self-assessment of the educational programme (cluster of programmes) in order to establish compliance with international accreditation standards, and also prepares a self-assessment report in accordance with Section II of this Guide.

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

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

The expert examines the self-assessment report 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, the 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 of the educational organization, the IAAR has the right to make one of the following decisions:

- "develop recommendations on the need to finalize the materials of the self-assessment report";
- "conduct an external expert assessment";
- "postpone the accreditation period due to the inability to conduct the initial programme accreditation procedure due to non-compliance of the self-assessment report with the criteria of these standards.

### **4. The visit of the EEC in the organization of education**

If accreditation is continued, the IAAR forms an External Expert Commission, which is approved by the Director General of the IAAR. An external assessment of the quality of the organization and implementation of the educational programme (cluster of programmes) for compliance with the IAAR international standards is carried out by the External Expert Commission during a visit to the educational organization.

The composition of the EEC is formed depending on the volume of the external assessment. The EEC consists of independent experts, including foreign

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experts with experience in teaching and quality assurance, representatives of the employers ' community and students.

In case of continuation of accreditation, the IAAR will agree with the educational organization the terms of the initial programme accreditation and the programme of the EEC visit.

The programme of the EEC visit is developed by the IAAR coordinator and the EEC Chairman with the participation of the MEO. The agreed programme of the EEC visit is approved by the Director General of the IAAR at least 2 (two) weeks before the visit to the MEO. The structure and content of the programme is developed taking into account the specifics of the MEO and EP in accordance with the recommended model of the EEC visit programme (Appendix 1).

The head of the MEO appoints a coordinator for interaction with the coordinator of the IAAR on planning and organizing the visit (Appendix 2)

The duration of the Commission's visit is usually 3-5 days. During the visit, medical educational organization creates conditions for the work of the EEC in accordance with the Agreement on the provision of services:

- provides an office for the work of the EEC with the provision of a workplace for each member of the EEC;
- submit an electronic and paper version of the self-assessment report for each member of the Commission;
- provides the necessary modern electronic office equipment in agreement with the representative of the IAAR and the number of members of the EEC;
- organizes 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;
- organizes photography of EEC work.

#### **Workplace of the external expert commission**

During the visit, the MEO should provide the expert commission with a separate workplace for panel sessions 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, as well as have a large table for documents, a table for collegial work, a telephone with international communication, a computer with Internet access and a printer.

All documentation related to the external evaluation process, including the list of teachers, educational programmes, work programmes, student papers, research documents, catalogs, flyers, etc. should be collected in the designated work area.

The results of the visit to the medical organization of education are reflected in the report on the results of external evaluation.

The draft of EEC report is reviewed by the IAAR and sent to the MEO for approval. If the MEO reveals factual inaccuracies, the Chairman agrees with the EEC members and makes the necessary changes to the EEC report. In case of

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disagreement with the MEO's comments to the EEC report, the Chairman, together with the IAAR coordinators, prepares an official response with justification.

The report contains a description of the EEC visit, a brief assessment of the compliance of the activities of the medical educational organization in the context of the international standards of the IAAR, recommendations of the medical educational organization to improve the activities and ensure quality, recommendations to the Accreditation Council. Proposals to the Accreditation Council contain a recommendation for accreditation (including the recommended accreditation period) or non-accreditation.

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

## **5. IAAR decision-making**

The basis for making a decision on the initial programme accreditation by the Accreditation Council is the EEC reports on the assessment of the educational programme and the self-assessment report of the educational programme.

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

The exclusive competence of the IAAR Accreditation Council includes making decisions on accreditation or refusal of initial programme accreditation of a medical educational organization. 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 makes one of the following decisions:

– «to accredit»:

1 year - if the criteria are met in general, but there are some shortcomings and opportunities for improvement (in assessing criteria that require improvement in the range of more than 20%, the absence of strong criteria);

3 years - with positive results in general, but with some minor shortcomings and opportunities for improvement (in assessing criteria that require improvement in the range from 10 to 20%, the presence of strong criteria);

5 years - with positive results in general (in assessing criteria that require improvement in the range of no more than 10%, the presence of strong criteria);

7 years - if standards criteria are met in general and best practice examples are available (in assessing the strong criteria at least 10%, and criteria requiring improvement no more than 5%).

- denial of accreditation (in assessing at least one criterion as "unsatisfactory", the absence of strong points).

If the Accreditation Council makes a positive decision, the IAAR sends an official letter to the MEO with the results of the decision and a certificate of initial programme accreditation of the educational organization, signed by the chairman of the Accreditation Council and the general director of the IAAR to the educational organization. Further, the decision on accreditation of the educational

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organization is sent to the authorized body in the field of education of the corresponding country and is posted on the IAAR website. IAAR website also contains the report of an external expert commission.

After receiving the certificate of accreditation, the medical educational organization publishes a self-assessment report on its website.

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

Medical education organization, in accordance with the established procedure, in accordance with the Service Agreement and the Regulation on the Appeals and Complaints Commission, may appeal to the IAAR against the decision of the Accreditation Council. In case of doubts about the competence of the external expert committee and representatives of the Agency, or a gross violation committed by members of the external expert committee, the medical educational organization can send a complaint to the IAAR.

## **6. Follow-up procedures**

If the IAAR Accreditation Council makes a positive decision, the medical educational organization submits to IAAR an Action Plan for improving the quality as part of the recommendations of an external expert commission (hereinafter referred to as the Plan), which is signed by the first head and sealed, and also concludes a Service Agreement with IAAR. The agreement and Plan are the basis for post-accreditation monitoring.

In accordance with the Regulations on the procedure for post-accreditation monitoring of educational organizations and (or) educational programmes that have passed the programme accreditation of EP, should prepare interim reports in accordance with the Plan. Interim reports are sent to the IAAR before the expected date of post-accreditation monitoring.

Post-accreditation monitoring of educational programmes is carried out in accordance with the regulations on the procedure for post-accreditation monitoring of educational organizations and (or) educational programmes.

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

- "temporarily suspend the accreditation status for the educational programme";
- "revoke the certificate of accreditation of the educational programme of a medical educational organization, which may lead to the cancellation of all previously achieved accreditation results".

If an educational organization refuses to enter into a contract with the IAAR for post-accreditation monitoring, the AC has the right to make a decision to revoke the validity of the accreditation certificate.

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A medical educational organization may submit an application no earlier than 1 (one) year after its programme accreditation is denied or its programme accreditation is revoked.

**External expert commission (group of experts on external evaluation)**

External evaluation of the educational programme (cluster of programmes) is carried out 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.

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

In case of programme accreditation, the composition of the EEC is formed depending on the number of EP in the accredited MEO.

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

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

All members of the EEC sign a statement of commitment on the absence of conflicts of interest and the code of ethics of the external expert of the IAAR during each visit.

The examiner should notify the IAAR coordinator of any Association with the MEO or self-interest that may lead to a potential conflict related to the external evaluation process.

Each member of the EEC should perform its functions and responsibilities efficiently. Failure to comply and refusal without a justified reason are considered as a violation of the Code of Ethics of an external expert of the IAAR and may lead to exclusion from the IAAR expert base.

Information about the MEO obtained during the external evaluation is presented as confidential and not subject to disclosure.

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

The External expert commission consists of:

- 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 organization, as well as responsible for preparing the final report on the results of the external evaluation of the educational programme (cluster of programmes).

- External experts - representatives of the academic community.

- External expert - a representative of the professional community (employer), who should assess whether the accredited educational programme (cluster of

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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 educational programme with the needs and expectations of students (for each cluster, one representative of the student community).

IAAR appoints a coordinator from among its staff responsible for coordinating the work of the group of experts. The medical education organization, for its part, appoints an authorized person responsible for the process of international accreditation of the educational programme (cluster of programmes).

## **II. SELF-ASSESSMENT REPORT**

Self-Assessment Report (SAR) is one of initial documents for international accreditation.

### **Basic principles of report preparation**

1. Structuring: presented material is strictly in line with sections of the document.

2. Readability: text of document is easy to read in terms of printing, semantic and stylistic features of text.

3. Analyticity: analysis of advantages and disadvantages, analysis of dynamics of development of EO and (or) EP (cluster of programmes).

4. Criticism: objectivity of assessment.

5. Persuasiveness: providing facts, data, information as arguments to support conclusions.

Features of training programme, which are not described in guidelines shall be included in the relevant part of documents.

### **Report format**

The report should be drawn up in the form of a coherent and logical text with tables, graphs, figures, where appropriate and attachments, in which large tables (occupying more than half of a sheet in A4 format) and other large-scale sources of information are placed.

When developing a self-assessment report, the use of a cluster approach is envisaged, which allows combining no more than 5 homogeneous educational programs into one group, regardless of the language of instruction and the level of education and the direction of training. Evaluation of no more than 20 EPs per visit to the EEC is allowed. The EO, in agreement with the IAAR, can develop a self-assessment report for each EP separately.

The self-assessment report shall include an introduction, body and conclusion. All statements, judgments, assumptions of the report must be supported by necessary documents in the main body of the text and attachments (*Annex 3. Structure of the self-assessment report*).

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Report shall be drafted in the following format: font type - Times New Roman, font size - 12, space between lines - 1.5, paragraph spacing before and after titles - no more than 6 pt, at the beginning of report, there is automatically edited inline table of contents, page numbers. The report is printed in A4 format in portrait orientation, attachments may also use landscape orientation. The first annex to report contains text confirming the reliability, exhaustive nature and accuracy of all data provided, signed by Head of the university and executors who prepared the report with the contact details of compilers of report for further consultations if necessary: "I, [name of Head of organization], confirm that in self-assessment report [university name] containing [number of pages in the main body of report, i.e. without attachments] pages, provided absolutely reliable, accurate and comprehensive data, which adequately and fully characterize activities of the university".

The volume of self-assessment report shall not exceed 50-60 pages of the main text. A package of documents in the form of attachments (as a separate file not exceeding 100 pages) is separately attached to Self-Assessment Report. Before exporting to text of attachment, graphic images shall be compressed to resolution of 96 dpi. To reduce the amount of attachments, it is recommended that the text of self-assessment report, as much as possible, include links to supporting documents located on electronic resources of EO.

The SAR shall be presented in English<sup>1</sup> - officially in electronic format, unless otherwise specified.

The report and annexes to it are submitted to IAAR in electronic form at e-mail address: iaar@iaar.kz, as well as on paper in 1 (one) copy in each of the selected languages.

#### Content of the *Self-Assessment Report*

The SAR consists of introduction, three main sections and annexes.

It is recommended that introduction part includes information on conditions and arrangement of the self-assessment, its goals and objectives.

General information (profile) is provided at the beginning of Self-Assessment Report, including name of university, legal details, full name of the Head, information on the founder, contact information, date of submission of self-assessment report, full name of contact person on preparation of report, educational levels implemented by university in accordance with NRK (for example, 6,7,8) and QF-EHEA (for example, 1,2,3 cycles), (for CA, the level of education for each EP in accordance with NRK (for example, 6,7,8) and QF- EHEA (for example, 1,2,3 cycles) indicating degree of qualification awarded in state, Russian and English languages), output of IAAR Standard under which the assessment is carried out, information on group that conducted self-assessment.

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

The **introduction** part specifies the grounds for passing external assessment, result of previous accreditation (Accreditation body, accreditation standards under which external assessment was carried out and accreditation status) in case of re-accreditation. A brief description of methods used in development of EO Self-Assessment Report (appointment of working group, involvement of stakeholders, etc.) is specified.

The first section provides general information on Medical organizational of education:

- brief information;
- organizational and legal support of activities;
- organizational structure and management system;
- interaction with educational, research, professional organizations at the local, regional and national levels;
- International activity;
- number and dynamics of students body (if any).
- dynamics of students at different forms of education over the past 3-5 years, enrolled in accredited educational programme.

The second section includes analysis of EP compliance of medical educational organization with accreditation standards.

Section articles shall be organized according to the order indicated in the manual. The SAR shall provide answers to all basic questions and include all necessary documentary confirmation in the appendices.

The medical educational organization must provide information on achievements in high-quality implementation of educational programme over the past 3-5 years individually for each paper in the second section of the report. It is also expected that the report will identify issues and areas for improvement that have been identified through SWOT analysis of each standard.

This part of the self-assessment report should consistently reflect the university's self-assessment according to criteria of each standard. At the end of self-assessment according to the criteria of each standard, conclusion needs to be given according to model: "According to the standard" Mission and end results "7 criteria are disclosed, of which 3 have a strong position, 3 - satisfactory and 1 - suggests improvement."

*The third* section of report should include general conclusions and a conclusion on self-assessment process, giving grounds for applying for external quality assessment procedure, and should also contain completed table "Conclusion of internal self-assessment commission" (Table 3). All persons responsible for self-assessment and reliability of material presented in the report should participate in filling out the Table "Conclusion of internal self-assessment commission".

Annexes should include tables, general information about the processes in Medical educational organization and list of materials and documentary evidence submitted for consideration by external expert group during visit to the Educational organization.

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SAR should be presented on behalf of Head of Medical educational organization and shall be signed by him.

The initial provisions and conclusions of report shall be communicated to all participants of self-assessment process; published on Internet resource of Medical educational organization. All persons responsible for self-assessment and reliability of material presented in the report shall participate in filling out the Table "Conclusion of self-assessment commission".

Self-assessment report shall be aligned with structure of Agency's standards and may be drawn up in form and content based on answers given by Educational organization for all items of the Agency's standards. The following sections provide recommendations for compiling self-assessment report in the context of individual Agency standards with brief comments on each standard and criterion.

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

The final document shall be well structured, numbered (including attachments).

The SAR shall be presented on behalf of the Head of the Medical educational organization and shall be signed by him.

The initial provisions and conclusions of report shall be communicated to all participants of self-assessment process; published on Internet resource of Medical educational organization.

### **Content of the self-assessment report**

The content of the SAR should be presented in accordance with the following structure:

#### Introduction

##### 1. General information

2. Self-assessment results according to the standards of international programme accreditation

##### *The structure of each standard:*

- *activity description;*

- *achievements over the past 5 years;*

- *areas of activity requiring improvement;*

- *SWOT - analysis of the standard.*

- *области деятельности, требующие улучшения;*

- *SWOT – анализ стандарта.*

##### 3. Conclusions and conclusions of the internal self-assessment committee

##### 4. Applications

### ***Title page***

The title page of SAR should be separate for each report and should be drawn up in accordance with Appendix 3.

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The title page is followed by pages containing general information about the medical education organization and educational programmes in the form of a table (tables 1, 2).

Table 1

**GENERAL INFORMATION ABOUT MEDICAL EDUCATION ORGANIZATION**

Full name of the medical education organization	
Founders	
Year of foundation (name, renaming (if any))	
Current accreditation status	
Location	
Rector	
License (title document)	
Number of students (full-time, part time)	

Table 2

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

<b>PART I</b>	<i>Examples</i>
Educational programme/Educational programmes	<i>"Public health" (programme code) "Medicine" (code of the programme)</i>
Level / period of study	<i>Bachelor's degree / ___ years Master's degree / ___ years</i>
Structural division (head)	<i>Faculty/Department "<u>Name</u>" Head <u>Full name, position, academic degree, title</u></i>
Main departments (heads of departments)	<i>Department "<u>Public health</u>" Head <u>Full name, position, academic degree, title</u></i>
Dates of the external visit	<i>Date, month, year.</i>
Person responsible for accreditation (tel./fax / e-mail)	<i><u>Full name, position, academic degree, title</u> Contact details</i>

Table 2 continued

<b>PART II</b>	Explanation
Number of ECTS credits	
Duration of study, form of study	Number of semesters, form of study (full-time, distance, mixed)

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Start of study	winter semester / summer semester
Date of introduction of the educational programme	Date, month, year
Previous accreditation	Date, validity period, accreditation agency
Requirements for applicants	Requirements in accordance with state and documents of MEO
Further education opportunities (upon completion of the programme)	List EP levels and names
Goals and objectives of the EP	
Brief description of the EP	It is necessary to briefly describe the structure of the EP
Learning outcome	List the final learning outcomes
Specialization	Direction of study
Additional features	
Number of admitted students	Number of students currently studying at the University
Tuition fee	In local currency
Employment opportunity	Possible career paths

All those responsible for self-assessment and reliability of the material presented in the report should participate in filling out the table "Conclusion of the self-assessment internal commission". Filling in the table should be objective, as well as the information provided in the self-assessment report. The external expert commission also fills out this table, and the results of the comparison of information on these tables are taken into account when discussing the results of accreditation during the visit of the EEC to the MEO.

Table 3

**Internal self-assessment committee conclusion**

No.	No.	Criteria No.	CRITERIA FOR ASSESSMENT	Position of educational organization			
				Strong	Satisfactory	Suggests improvement	Unsatisfactory
		<b>1.</b>	<b>“MISSION AND OUTCOME”</b>				
		<b>1.1</b>	<b>Mission definition</b>				

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1	1	1.1.1	The medical educational organization <b>should</b> determine the mission of the educational programme of the postgraduate level				
2	2	1.1.2.	The medical education organization <b>should</b> bring the mission of the postgraduate educational programme to the attention of stakeholders and the health sector				
			The medical education organization <b>should</b> determine a training programme that allows to prepare a specialist at the level of postgraduate medical education:				
3	3	1.1.3	competent in any field of medicine, including all types of medical practice, management and health organization				
4	4	1.1.4	able to work for work at a high professional level.				
5	5	1.1.5	able to work unattended, independently and in a team, if necessary.				
6	6	1.1.6	with a commitment to lifelong learning, including a professional responsibility to maintain knowledge and skills through performance assessment, auditing, self-study and recognized activities in <i>CPD / CME</i> .				
7	7	1.1.7	The medical education organization <b>should</b> ensure that the mission covers consideration of the health needs of the community or society, the needs of the health care system and other aspects of social responsibility, if necessary				
			Medical education organization <b>should</b> be encouraged:				
8	8	1.1.8	innovation in the educational process, allowing the development of broader competencies than the minimum necessary.				
9	9	1.1.9	improving patient care that is necessary, effective and compassionate in addressing health problems and promoting health.				
10	10	1.1.10	organization and conduct of scientific research of students of the postgraduate level.				
		<b>1.2</b>	<b>Participation in the formulation of the mission</b>				
11	11	1.2.1	Medical education organization <b>should</b> ensure that the main stakeholders are involved in the development of the educational programme mission				
12	12	1.2.2	The medical education organization <b>should</b> ensure that the stated mission is based on the opinions / suggestions of other relevant stakeholders.				
		<b>1.3</b>	<b>Institutional autonomy and academic freedom</b>				

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13	13	1.3.1	The medical education organization <b>should</b> have a training process that is based on recognized basic and postgraduate medical education and helps to strengthen the professionalism of the student				
14	14	1.3.2	The medical education organization <b>should</b> ensure that the training process will promote professional autonomy to enable the graduate to act in the best interests of the patient and society.				
		<b>1.4</b>	<b>Final learning outcomes</b>				
			The medical education organization should determine the expected learning outcomes that students should achieve in learning outcomes in relation to:				
15	15	1.4.1	their achievements at the postgraduate level in terms of knowledge, skills and thinking;				
16	16	1.4.2	appropriate foundation for a future career in the chosen field of medicine;				
17	17	1.4.3	future roles in the health sector;				
18	18	1.4.4	commitment and skills in the implementation of continuing education;				
19	19	1.4.5	community health needs, health system needs and other aspects of social responsibility;				
20	20	1.4.6	professional behavior				
			The medical education organization <b>should</b> determine:				
21	21	1.4.7	general and specific to the specialty (discipline) components of educational results that are required to be achieved by students.				
22	22	1.4.8	appropriate behavior towards undergraduates and other students, teachers, patients and their relatives in accordance with the proper norms of behavior.				
23	23	1.4.9	The medical education organization <b>should</b> determine educational results based on the results obtained at the level of basic medical education.				
<b>Total</b>							
		<b>2.</b>	<b>STANDARD “EDUCATIONAL PROGRAMME”</b>				
		<b>2.1</b>	<b>Teaching approach</b>				
			The medical education organization <b>should:</b>				
24	1	2.1.1	define an educational programme based on the results of existing basic medical education, organize a teaching approach in a systematic and transparent manner.				
25	2	2.1.2	describe the general and discipline / specialty-specific components of training.				

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26	3	2.1.3	use teaching and learning methods that are suitable for both practice and theory				
27	4	2.1.4	identify the <i>teaching and learning</i> methods used that encourage, prepare and support students to take responsibility for their learning process.				
28	5	2.1.5	ensure that the educational programme is implemented in accordance with the principles of equality.				
			The medical education organization <b>should:</b>				
29	6	2.1.6	have a system / procedures and guide the student through mentoring and regular assessment and feedback.				
30	7	2.1.7	increase the degree of self-responsibility of the student as skills, knowledge and experience improve.				
		<b>2.2</b>	<b>Scientific method</b>				
			The medical education organization <b>should:</b>				
31	8	2.2.1	teach students the principles of scientific methodology in accordance with the level of postgraduate education and provide evidence that the student achieves knowledge and understanding of the scientific base and methods of the chosen field of medicine;				
32	9	2.2.2	provide evidence that the student is exposed to evidence-based medicine as a result of wide access to relevant clinical / practical experience in the chosen field of medicine				
			The medical education organization <b>should:</b>				
33	10	2.2.3	include formal teachings on critical appraisal of literature and scientific evidence in the EP.				
34	11	2.2.4	provide the student with access to scientific activities				
35	12	2.2.5	in the educational programme to correct and change the content of scientific developments.				
		<b>2.3</b>	<b>Learning content</b>				
			The medical education organization <b>should</b> include in the learning process the practice and theory about:				
36	13	2.3.1	biomedical, clinical, behavioral and social sciences				
37	14	2.3.2	clinical solutions				
38	15	2.3.3	communication skills.				
39	16	2.3.4	medical ethics				
40	17	2.3.5	public health				
41	18	2.3.6	medical jurisprudence				
42	19	2.3.7	management disciplines				
43	20	2.3.8	organize an educational programme with appropriate attention to patient safety				
			The medical educational organization <b>should</b>				

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			adjust and make changes in the educational programme for:				
44	21	2.3.9	ensuring the development of knowledge, skills and thinking of the different roles of the graduate;				
45	22	2.3.10	correspondence of the content of the EP to the changing conditions and needs of society and the health care system.				
		<b>2.4</b>	<b>The structure of the educational programme, composition and duration</b>				
			The medical education organization <b>should</b> :				
46	23	2.4.1	describe the content, volume and sequence of courses and other elements of the educational programme				
47	24	2.4.2	define required and optional components				
48	25	2.4.3	combine practice and theory in the learning process				
49	26	2.4.4	ensure compliance with national legislation				
			The medical education organization <b>should be included</b> in the educational programme:				
50	27	2.4.5	take into account the results of basic medical education in relation to the choice of the field of medicine				
51	28	2.4.6	requirements for the performance of various roles in the health care system for the future graduate				
		<b>2.5</b>	<b>Relationship between education and health practice</b>				
52	29	2.5.1	describe and respect the integration between theoretical training and professional development.				
53	30	2.5.2	Ensure the integration of training and professional training, including through on-the-job training.				
			The medical education organization <b>should be included</b> in the educational programme:				
54	31	2.5.3	effectively organize the use of the capabilities of the health care system for training purposes, including in terms of providing practice in the workplace.				
55	32	2.5.4	ensure that such training is optional and not subject to the requirements for the provision of medical services.				
		<b>2.6</b>	<b>Learning management</b>				
			The medical education organization <b>should</b> :				
56	33	2.6.1	define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process.				
57	34	2.6.2	include in the planning and development of the				

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			educational programme proper representation from teaching staff, students and other relevant stakeholders.				
			Medical education organization <b>should</b> be included in the educational programme:				
58	35	2.6.3	guarantee a variety of learning locations.				
59	36	2.6.4	coordinate multiple training locations to obtain appropriate access to different aspects of the chosen field of medicine				
60	37	2.6.5	have access to the resources needed to plan and implement teaching methods.				
61	38	2.6.6	have access to the resources needed to plan and implement student assessment.				
62	39	2.6.7	have access to the resources needed to plan and innovate the training programme.				
<b>Total</b>							
		<b>3.</b>	<b>STANDARD “ASSESSMENT OF STUDENTS”</b>				
		<b>3.1</b>	<b>Assessment methods</b>				
			The medical education organization <b>should:</b>				
63	1	3.1.1	present the process of evaluating students in EP				
64	2	3.1.2	define, approve, and publish the <i>principles, methods, and practices used to evaluate students, including the number of exams and other tests, maintaining a balance between written and oral exams, using criteria-based and reasoning-based assessment methods, and special exams</i> and define criteria for establishing passing scores, grades, and the number of allowed retakes;				
65	3	3.1.3	ensure that the assessment covers knowledge, skills, and attitudes to learning;				
66	4	3.1.4	use a wide range of assessment methods and formats depending on the <i>"utility assessment", which includes a combination of validity, reliability, impact on learning, acceptability and effectiveness of the assessment methods and format;</i>				
67	5	3.1.5	formulate criteria for passing exams or other types of assessment, including the number of allowed retakes;				
68	6	3.1.6	<i>use assessment methods that provide formative teaching methods and constructive feedback.</i>				
			Medical education organizations <b>should:</b>				
69	7	3.1.7	<i>document and evaluate the reliability and validity of assessment methods, which requires an appropriate quality assurance process for existing assessment practices;</i>				
70	8	3.1.8	implement new assessment methods in				

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			accordance with the need;				
71	9	3.1.9	use the system to appeal the evaluation results.				
72	10	3.1.10	<i>encourage a process of external review of assessment methods;</i>				
73	11	3.1.11	<i>use a system for appealing assessment results;</i>				
74	12	3.1.12	<i>if necessary, organize a “different opinion”, change of teaching staff or additional training</i>				
		<b>3.2</b>	<b>Relationship between assessment and learning</b>				
			The medical education organization <b>should use the principles, methods and practice of assessment, including the educational achievements of students and the assessment of knowledge, skills, professional values of relationships, which:</b>				
75	13	3.2.1	clearly comparable to teaching methods, teaching and learning outcomes;				
76	14	3.2.2	ensure that students achieve the final learning outcomes;				
77	15	3.2.3	contribute to the training of students;				
78	16	3.2.4	provide an appropriate balance between formative and summative assessment to guide learning and <i>measure a student's academic progress, which requires establishing rules for assessing progress and their relationship to the assessment process.</i>				
			<b>Medical education organizations should:</b>				
79	17	3.2.5	use principles, methods and practices that encourage integrated learning;				
80	18	3.2.6	encourage integration with practice, including clinical practice;				
81	19	3.2.7	ensure the provision of timely, specific, constructive and fair feedback to undergraduates based on the results of the assessment.				
<b>Total</b>							
		<b>4.</b>	<b>STANDARD "STUDENTS"</b>				
		<b>4.1</b>	<b>Admission and selection policy</b>				
			<b>The medical education organization should:</b>				
82	1	4.1.1	define and implement <i>an admission policy based on the mission of the organization and including a clearly defined position on the student selection process;</i>				
83	2	4.1.2	Ensure a balance between <i>learning opportunities and student acceptance</i>				
84	3	4.1.3	formulate and implement policy / rules for the selection of students according to the established criteria				
85	4	4.1.4	have a policy and implement the practice of admitting students with disabilities in				

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			accordance with applicable laws and regulations of the country;				
86	5	4.1.5	have a policy of transferring students from other programmes and medical education organizations;				
87	6	4.1.6	include medical professional organizations in the policy development and student selection process.				
			The medical education organization <b>should:</b>				
88	7	4.1.7	guarantee the transparency of the selection procedure;				
89	8	4.1.8	ensure transparent admission to all qualified graduates of basic medical education				
90	9	4.1.9	consider, as part of their selection procedure, the specific opportunities of potential students in order to improve the learning outcome in the chosen field of medicine				
91	10	4.1.10	enable an appeal mechanism on admission decisions				
92	11	4.1.11	periodically review admission policies based on relevant social and professional evidence to meet the health needs of the community and society.				
		<b>4.2</b>	<b>Number of students</b>				
93	12	4.2.1	The medical education organization should determine the number of accepted students in accordance with the material and technical capabilities and capabilities at all stages of education and training.				
			The medical education organization <b>should:</b>				
94	13	4.2.2	consider the number and size of enrolled students in consultation with <i>relevant stakeholders responsible for planning and developing human resources in the health sector.</i>				
		<b>4.3</b>	<b>Consulting and support for students</b>				
			The medical education organization <b>should:</b>				
95	14	4.3.1	have an academic advisory policy / system for undergraduates.				
96	15	4.3.2	have policies / mechanisms to support undergraduates focused on social, financial and personal needs, allocating appropriate resources for social and personal support.				
97	16	4.3.3	guarantee the confidentiality of advice and support provided.				
98	17	4.3.4	provide for the allocation of resources to support undergraduates				
99	18	4.3.5	The medical education organization <b>should</b> provide support in the event of a professional crisis and problem situations.				

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		<b>4.4</b>	<b>Student representation</b>				
			The medical education organization <b>should</b> determine and implement <i>a policy of student representation and their respective participation</i>				
100	19	4.4.1	in the development of the EP;				
101	20	4.4.2	in the management of the OP;				
102	21	4.4.3	evaluation of the educational programme;				
103	22	4.4.4	planning conditions for students				
104	23	4.4.5	The medical education organization <b>should</b> encourage students to participate in making decisions about the processes, conditions and rules of learning				
<b>Total</b>							
		<b>5.</b>	<b>STANDARD "ACADEMIC STAFF / TEACHERS"</b>				
		<b>5.1</b>	<b>Personnel selection policy</b>				
			The medical education organization <b>should</b> define and implement <i>a selection and staff admission policy</i> that:				
105	1	5.1.1	takes into account the necessary work experience;				
106	2	5.1.2	contains criteria for the scientific, pedagogical and clinical merit of applicants, including the proper balance between pedagogical, scientific and clinical qualifications;				
107	3	5.1.3	defines their responsibilities;				
108	4	5.1.4	defines the responsibilities of training, including the balance between teaching, research and other functions				
109	5	5.1.5	take into account the mission of the EP				
			The medical education organization <b>should</b> take into account such criteria in its policy on the selection and admission of employees as:				
110	6	5.1.6	determine the responsibility of the academic staff in terms of its participation in postgraduate education;				
111	7	5.1.7	determine the level of remuneration for participation in postgraduate education;				
112	8	5.1.8	ensure that instructors have practical experience in the relevant field;				
113	9	5.1.9	ensure that faculty members in specialized fields are approved for appropriate periods of study, if necessary.				
		<b>5.2</b>	<b>Employee commitment and development</b>				
			The medical education organization <b>should:</b>				
114	10	5.2.1	ensure that students and teachers have sufficient time for teaching, counseling and self-study				
			The medical education organization <b>should:</b>				

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115	11	5.2.2	take into account the ratio of "teacher-student" depending on the various components of the educational programme and taking into account the peculiarities of the educational programme;				
116	12	5.2.3	develop and implement a policy to support employees, including self-training and further professional development;				
117	13	5.2.4	evaluate and acknowledge the scientific and academic achievements of teachers.				
		<b>6.</b>	<b>STANDARD "EDUCATIONAL ENVIRONMENT AND RESOURCES"</b>				
		<b>6.1</b>	<b>Material and technical base</b>				
			The medical education organization <b>should</b> provide students with:				
118	1	6.1.1	a sufficient <i>material and technical base</i> to ensure adequate implementation of the educational programme, space and opportunities for practical and theoretical research;				
119	2	6.1.2	access to up-to-date professional literature;				
120	3	6.1.3	adequate information and communication technologies;				
121	4	6.1.4	modern equipment for teaching practical methods.				
			The medical education organization <b>should</b> :				
122	5	6.1.5	improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of education at the postgraduate level.				
		<b>6.2</b>	<b>Educational environment</b>				
			The medical education organization <b>should</b> provide the necessary resources for the acquisition of adequate practical experience by students, including the following:				
123	6	6.2.1	selection and approval of the educational environment;				
124	7	6.2.2	having access to sufficient clinical / practice tools / facilities to provide training;				
125	8	6.2.3	a sufficient number of patients, where necessary;				
126	9	6.2.4	appropriate diverse clinical cases to achieve the goals and objectives of training;				
127	10	6.2.5	organization of training in such a way as to provide the student with a wide experience in the chosen field of medicine.				
			When choosing a learning environment, a medical education organization <b>should</b> :				
128	11	6.2.6	guarantee the number of patients and the				

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			corresponding varied clinical cases, allowing for clinical experience in all aspects of the chosen specialty, including training in organization and management in the field of health care and disease prevention				
129	12	6.2.7	teaching at a university clinic, as well as teaching at other relevant cinemas / institutions and community facilities / locations, as appropriate.				
		<b>6.3</b>	<b>Information Technology</b>				
130	13	6.3.1	The medical education organization <b>should</b> determine and implement a policy that is aimed at the <i>effective use and assessment of appropriate information and communication technologies in the educational programme.</i>				
			The medical education organization <b>should</b> provide teachers and students with opportunities and encourage them to use information and communication technologies:				
131	14	6.3.2	for self-study				
132	15	6.3.3	access to health information resources and relevant patient data;				
133	16	6.3.4	patient management;				
134	17	6.3.5	work in the health care system to provide medical care.				
		<b>6.4</b>	<b>Medical and scientific research</b>				
			The medical education organization <b>should:</b>				
135	18	6.4.1	introduce the methodology of scientific medical research into the educational programme.				
			The medical education organization <b>should:</b>				
136	19	6.4.2	encourage students to participate in medical scientific research on the state and quality of health of the population and the health care system				
137	20	6.4.3	provide access to research facilities and activities in training locations				
		<b>6.5</b>	<b>Expertise in Education</b>				
			The medical education organization <b>should:</b>				
138	21	6.5.1	develop and implement a policy on the use of expertise at the stage of planning, implementation and evaluation of training for a specific educational programme.				
			The medical education organization <b>should:</b>				
139	22	6.5.2	have access to educational expertise, where necessary, and conduct expertise that examines the processes, practices and issues of medical education and may involve physicians with experience in research in medical education, psychologists and sociologists in education, or				

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			experts from other nationalities and international institutions.				
140	23	6.5.3	promote the aspirations and interests of employees in research in medical education.				
		<b>6.6</b>	<b>Exchange in education</b>				
			The medical education organization <b>should</b> define and implement a policy for:				
141	24	6.6.1	the availability of individual training opportunities in other educational institutions of the appropriate level within or outside the country;				
142	25	6.6.2	<i>transfer and offset of educational loans and learning outcomes.</i>				
			The medical education organization <b>should:</b>				
143	26	6.6.3	<i>promote regional and international exchange of staff (academic, administrative and teaching staff) and students, providing appropriate resources;</i>				
144	27	6.6.4	<i>establish links with relevant national and international bodies in order to facilitate exchange and mutual recognition of learning elements.</i>				
		<b>7.</b>	<b>STANDARD "ASSESSMENT OF THE EDUCATIONAL PROGRAMME"</b>				
		<b>7.1</b>	<b>Monitoring, control and evaluation mechanisms of the programme</b>				
			The medical education organization <b>should:</b>				
145	1	7.1.1	have mechanisms for monitoring the educational programme, taking into account the mission, the required final learning outcomes, the content of the educational programme, the assessment of knowledge and skills, educational resources.				
146	2	7.1.2	evaluate the programme in relation to student admission policy and the needs of the education and health care system for medical personnel.				
147	3	7.1.3	ensure stakeholder participation in programme evaluation.				
148	4	7.1.4	The medical education organization <b>should</b> provide mechanisms to ensure transparency of the process and results of the evaluation of the educational programme for the management and all interested parties.				
		<b>8.</b>	<b>STANDARD "MANAGEMENT AND ADMINISTRATION"</b>				
		<b>8.1</b>	<b>Management</b>				
			The medical education organization should ensure that the educational programme is implemented in accordance with the rules				

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			regarding:				
149	1	8.1.1	student admissions				
150	2	8.1.2	structure and content				
151	3	8.1.3	processes				
152	4	8.1.4	evaluation				
153	5	8.1.5	intended results.				
			The medical education organization <b>should</b> guarantee a continuous assessment of:				
154	6	8.1.6	educational programmes for various types of postgraduate medical education				
155	7	8.1.7	institutes / faculties / departments and other educational structures implementing the learning process				
156	8	8.1.8	teachers				
157	9	8.1.9	The medical education organization should be responsible for quality development programmes.				
			The medical education organization <b>should</b> guarantee:				
158	10	8.1.10	in the future, the application of procedures for checking the outcomes and competencies of graduates for use by both national and international bodies				
159	11	8.1.11	transparency of the work of management structures and their decisions				
		<b>8.2</b>	<b>Academic leadership</b>				
160	12	8.2.1	Medical education organization <b>should</b> clearly define the responsibility of the academic leadership in relation to the development and management of the educational programme.				
			The medical education organization <b>should</b> periodically assess the academic leadership regarding the achievement of:				
161	13	8.2.2	mission of the postgraduate educational programme				
162	14	8.2.3	final learning outcomes for this educational programme.				
		<b>8.3</b>	<b>Funding and resource allocation</b>				
			The medical education organization <b>should</b> :				
163	15	8.3.1	determine the responsibility and authority for managing the budget of the educational programme;				
			The medical education organization should manage the budget in such a way as to comply with:				
164	16	8.3.2	mission and results of the educational programme;				
165	17	8.3.3	ensuring the functional responsibilities of the academic staff and students.				
		<b>8.4</b>	<b>Administrative staff and management</b>				

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			The medical education organization <b>should</b> have an <i>appropriate administrative staff, including their number and composition in accordance with qualifications</i> , in order to:				
166	18	8.4.1	ensure the implementation of the educational programme and related activities;				
167	19	8.4.2	ensure proper management and allocation of resources.				
			The medical education organization <b>should</b> :				
168	20	8.4.3	develop and implement an internal management quality assurance programme that includes consideration of needs for improvement;				
169	21	8.4.4	regularly review and review management to improve quality				
		<b>8.5</b>	<b>Requirements and provisions</b>				
170	22	8.5.1	The medical education organization <b>should</b> comply with national legislation regarding the number and types of recognized medical specialties for which approved curricula are developed.				
171	23	8.5.2	The medical education organization <b>should</b> identify approved postgraduate medical education programmes in collaboration with all stakeholders.				
		<b>9.</b>	<b>STANDARD "CONSTANT UPDATE"</b>				
			The medical education organization as a dynamic and socially responsible institution <b>should ensure</b> that there will be:				
172	1	9.1	initiate procedures for regular review and revision of content, results / competence, assessment and learning environment, structure and function, document and correct deficiencies;				
	2	9.2	allocate resources for continuous improvement				
173			The medical education organization <b>should ensure that</b> :				
174	3	9.3	the renewal process will be based on forward-looking research and analysis and on the results of their own study, assessment and literature on postgraduate medical education;				
175	4	9.4	the renewal and restructuring process will lead to a revision of its policies and practices in line with past experience, current activities and perspectives.				
			The medical education organization in the process of renewal and continuous improvement <b>should ensure</b> that special attention is paid to:				
176	5	9.5	adaptation of the mission and outcomes of				

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			postgraduate medical education to the scientific, socio-economic and cultural development of society for the future;				
177	6	9.6	modification of the intended outcomes of postgraduate education in the selected health care field in accordance with the documented needs of the environment. Changes may include adjusting the structure and content of the educational programme, principles of active learning. The adjustment will ensure, along with the elimination of obsolete ones, the assimilation of new relevant knowledge, concepts, methods and concepts based on new advances in the basic biomedical, clinical, behavioral and social sciences, taking into account changes in the demographic situation and the structure of the population on public health issues, as well as changes socio-economic and cultural conditions;				
178	7	9.7	development of assessment principles, methods of administration and number of examinations in accordance with changes in learning outcomes and teaching and learning methods;				
179	8	9.8	adaptation of the recruitment and selection policy for graduate students, taking into account changing expectations and circumstances, human resource requirements, changes in the postgraduate education system and the needs of the educational programme;				
180	9	9.9	adaptation of the recruitment and formation policy of the academic staff in accordance with changing needs;				
181	10	9.10	improving the process of monitoring and evaluating the educational programme.				
182	11	9.11	The medical education organization should ensure that the improvement of the organizational structure and management principles will be aimed at ensuring effective performance in the face of changing circumstances and needs, and, in the long term, at meeting the interests of various stakeholder groups.				
<b>Total</b>							
<b>TOTAL</b>							

Table “Conclusion of the internal self-assessment committee” is assessed for each criterion as follows”:

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- **“Strong”** is characterized by a high level of indicators of the programme accreditation standard. This position of the standard serves as an example of good practice for dissemination among other MEO.
- **“Satisfactory”** is determined by the average level of indicators of the programme accreditation standard.
- **“Suggests improvement”** is characterized by a low level of indicators of the programme accreditation standard.
- **“Unsatisfactory”** means that the indicators of the MEO do not meet the standard of programme accreditation.

*Appendices* should include tables, general information about the medical educational organization, information about the accredited educational programme (cluster of programmes), achievements of educational programmes, and a list of materials and documentary evidence submitted for consideration by an external expert group during a visit to the educational organization.

*Appendices consist of several types: necessary and additional, documents on the quality assurance system, and basic statistical data.* The types of appendices to the self-assessment report are listed below.

➤ **Necessary attachments:**

1. Documents on the organization of the educational process:
  - Rules for teaching and conducting exams.
  - Admission rules.
  - National diploma and diploma supplement.
  - Appendix to the diploma indicating the subjects studied and ECTS.
  - Regulations on the organization and conduct of practices.
2. Documents regulating the content of the educational process:
  - Requirements for the development of an educational programme, work and/or curriculum.
  - Plans for the implementation of the educational programme.

➤ **Additional attachments:**

- Qualification profiles of the teaching staff.
- Work plan for the entire period of the training programme (goal / implementation).
- Description of the existing and future cooperation agreements (documents on cooperation).
- Document on the formation of the academic staff.
- Decision on previous accreditation, report of the external expert commission, certificate of accreditation, letter from the accreditation agency on the implementation of obligations and recommendations (if applicable).
- Regulatory documents (list of orders of the Ministry of education, etc.).

***Documents on the quality assurance system:***

- Results of assessment surveys on the workload of students and teachers.

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- Student questionnaires (for example, a survey of first-year students at the end of the first semester).
- Students ' assessment of the content of training and teaching.
- Information about employment of graduates.

***Statistical data (should be transparent, understandable, accessible, verifiable, and verified):***

- Data on the current number of students in each discipline as of the date of the self-assessment report.  
The results of the exam/s.
- The total number of applicants, the number of accepted students, the number of graduates and the percentage of deductions.
- The number (as a percentage) of international students.
- Gender ratio.

## **PART 2**

### **INTERNATIONAL PROGRAMME ACCREDITATION STANDARDS**

#### **Main provisions**

##### **1 Scope of application**

The procedure for independent initial programme accreditation is carried out in accordance with standards and criteria that are consistent with the content of standards and guidelines for quality assurance in the European higher education area (ESG), which provide for the formation of a quality culture at a higher level while preserving the best traditions.

The proposed standards take into account the principles of the Bologna process (objectivity, transparency, mobility, public awareness) and are intended to be used as a model for self-assessment of the educational programme, harmonization of the national education quality system being formed in accordance with the requirements of the European community.

These standards and criteria are harmonized with the quality assurance standards in the European higher education area (ESG, 2015), developed with the main areas of quality assurance in mind:

- responsibility of higher education organizations for the quality of educational services provided;
- compliance of education with the needs of various higher education systems (in the international educational market), other organizations and undergraduates;
- the focus of higher education organizations on the development of a culture of quality.

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The criteria of the standards are aimed at determining the level of quality of student-centered educational services.

This document defines the regulatory requirements for the main provisions of the standards for international initial programme accreditation of postgraduate medical education.

The standards are applied during the procedure of initial accreditation of an educational programme (Ex-Ante) of postgraduate medical education of a medical educational organization, regardless of its status, organizational and legal form, forms of ownership and departmental subordination.

The document can also be used:

- a) medical educational organizations for internal self-assessment and external assessment of the educational programme;
- b) to develop the appropriate regulatory documentation.

## **2 Regulatory references**

This standard uses references to the following normative documents:

- 2.1 WFME International Standards for the Improvement of the Quality of Education (Basic Medical Education) (Denmark, 2003)
- 2.2 WHO / WFME Guidelines for the Accreditation of Postgraduate Medical Education (Geneva, Copenhagen, 2005)
- 2.3 International Standards of the World Federation of Medical Education for improving the quality of postgraduate medical education (WFME, University of Copenhagen, 2012)
- 2.4 World Federation of Medical Education International Standards for Improving the Quality of Postgraduate Medical Education (WFME, University of Copenhagen, revised 2014)
- 2.5 WFME International Standards for the Improvement of the Quality of Education (Basic Medical Education) (reprinted without change in content, Denmark, 2017)

## **3 Terms and definitions**

The following terms and definitions are used in this standard:

• *Accreditation of educational organizations* – the procedure for recognition by the accreditation body of compliance of educational services with the established standards (regulations) of accreditation in order to provide objective information about their quality and confirm the existence of effective mechanisms to improve it;

• *Accreditation bodies*- are legal entities that develop standards (regulations) and conduct accreditation of educational organizations based on the standards (regulations) they have developed);

• *Site Visit of the External Expert Panel*- a generally accepted component of the holistic accreditation process, which includes checking the compliance of the reality with the previously submitted report on the self-assessment of the University, evaluating the quality and effectiveness of educational services provided, interviewing and questioning stakeholders, as well as developing

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recommendations for improving quality.

- *Framework of Qualifications for the European Higher Education Area* is a framework of qualifications covering three levels of higher and postgraduate education: bachelor's, master's and doctoral studies, universal Dublin descriptors for each level based on educational outcomes and competencies, and a range of credits for the first and second levels.

- *European Credit Transfer and Accumulation System (ECTS)*- is a master's student – centered method of planning, describing educational programmes, recording and recognizing learning outcomes, as well as monitoring the dynamics of a master's student's progress along an individual educational trajectory, by determining the complexity of disciplines in all its components.

- *Institutional accreditation*- is the process of evaluating the quality of an educational organization by an accreditation body for compliance with the declared status and established standards of the accreditation body;

- *Medical education organization* – an educational organization that provides an educational programme in the field of medicine and is synonymous with the faculty of medicine, medical college, medical academy, or medical university. A medical university can be a part or branch of a University, or an independent institution.

- *International accreditation* - the process of evaluating the quality of educational organizations (institutional accreditation) and individual educational programmes (programme accreditation) for compliance with standards for ensuring the quality of education, conducted by a foreign accreditation body;

- *Educational monitoring*- systematic monitoring, analysis, assessment and forecast of the state and dynamics of changes in the results and conditions of educational processes, the number of students, the network, as well as rating indicators of achievements of educational organizations.

- *Educational programme* - a single set of basic characteristics of education, including goals, results and content of training, organization of the educational process, methods and methods of their implementation, criteria for evaluating learning outcomes;

- *Evaluation* - a method for determining the degree of achievement of the planned results of educational services, educational goals of the programme for decision-making and determining the further direction of quality improvement. Interpretation of the data and evidence collected in the analysis process.

- *Self-assessment report* - a document developed by the University based on the results of self-assessment and submitted for review and decision-making by the accredited body.

- *Initial programme accreditation (Ex-Ante)*- is the process of evaluating the quality of the educational programme of higher and (or) postgraduate medical education in the absence of students and/or graduates for compliance with the declared status and standards of the accreditation body.

- *Programme accreditation* – assessment of the quality of individual

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educational programmes implemented by an educational organization;

- *Postgraduate medical education* – a certain level/phase of education, including various formalized training programmes, where students are trained after receiving the main (basic) qualifications. Upon completion of a formal postgraduate programme, a degree, diploma, or certificate is usually awarded.

- *Quality assurance policy* - the main directions that characterize the key priorities and value orientations of quality assurance development, determined on the basis of collective discussion and approved by the organization's management.

- *Post-accreditation monitoring of the organization's activities* - monitoring the organization's compliance with the IAAR requirements set forth in these standards, carried out after the AC makes a decision on accreditation and until the expiration of the specified decision.

- *Self-assessment* - a procedure for self-assessment of a University based on standards and criteria of institutional or programme accreditation.

- *Quality system* - a set of procedures, divisions and officials in an organization that perform certain quality management functions in accordance with established rules and accepted methods and ensure that all graduates of an educational programme meet the requirements established in accordance with professional standards.

- *Special conditions for education* - conditions that include special educational curricula and teaching methods, technical and other means.

- *Accreditation standards (regulations)* – documents of the accreditation body that establish requirements for the accreditation procedure.

- *Stakeholder* - an individual, group of individuals, or organization that is interested in and/or involved in activities or decision-making in a particular area.

- *Undergraduate-centered learning* - is a fundamental principle of the Bologna reforms in higher education, which implies a shift in emphasis in the educational process from teaching (as the main role of the teaching staff in the "translation" of knowledge) to teaching (as an active educational activity of a master's student).

- *Expert assessment* - the procedure for obtaining an assessment based on the analysis of the problem under consideration, the opinion of specialists for the purpose of subsequent decision-making.

- *Efficiency* - the ratio between the result achieved and the resources used.

#### **4. Symbols and abbreviations**

This standard uses abbreviations in accordance with the regulations specified in paragraph 2.

The following designations and abbreviations are used in this standard:

UNIVERSITY – higher education institution;

ABH – authorized body in the field of healthcare;

ABE – authorized body in the field of education;

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IAAR – independent Agency for accreditation and rating

CPD – continuous professional development

CME – continuing medical education

OSCE – objective structured clinical examination;

TS – teaching staff;

MM – mass media;

SWOT analysis – analysis of strengths and weaknesses, problems and opportunities of the organization, abbreviation of English words: S (strengths) - strengths, W (weaknesses) - weaknesses, O (opportunities) – opportunities, T (threats) – threats.

## **5 General provisions**

### **5.1 Main goals of implementing standards for international initial accreditation of educational programmes:**

- implementation of the accreditation model, taking into account international practice of ensuring the quality of education;
- assessment of the quality of professional and educational programmes to improve the competitiveness of the higher postgraduate education system;
- encouraging the development of a quality culture in medical educational institutions;
- promoting the improvement and continuous improvement of the quality of educational programmes of medical educational institutions in accordance with the requirements of a rapidly changing external environment;
- taking into account and protecting the interests of society and the rights of consumers by providing reliable information about the quality of educational programmes;
- use of innovation and research;
- public announcement and dissemination of information about the results of accreditation of the educational programme of postgraduate medical education of medical educational organizations.

### **5.2 Structure of the standards**

The document defines the following set of international standards for postgraduate medical education in accordance With the international standards of the World Federation of Medical Education for improving the quality of postgraduate medical education and the amendments of the World Federation of Medical Education to the International standards for improving the quality of basic medical education (2015, 2017), including 9 standards, 35 sub-standards and 193 criteria that are interrelated.

Standards – extensive components along the structure and process of postgraduate medical education and training

International programme accreditation is carried out on the basis of this document, which consists of standards:

1 "Mission and learning outcomes" standard;

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- 2 "Educational programme" standard;
- 3 "Student assessment" standard;
- 4 "Students" standard;
- 5 "Academic staff/teachers" standard;
- 6 "Educational resources" standard;
- 7 "Educational programme assesment" standard;
- 8 "Management and administration" standard;
- 9 "Constant update" standard;

**Sub – standards** - are specific aspects of the standard that correspond to performance indicators.

**Criteria** are developed for each sub-standard using two levels of achievement:

**Basic criterion is a criterion that is mandatory for** compliance, and its implementation should be demonstrated and proven during the evaluation of the training programme. *Basic criteria are expressed as “should”*.

**Quality improvement criteria.** The point is that it conforms to the international consensus of best practices in postgraduate medical education. The implementation of these criteria or initiatives for its adoption have been or will be made, should be presented and documented. *Quality improvement criteria are expressed as “should”*.

In total, the document includes 112 basic criteria and 70 quality improvement criteria.

**Recommendations** are used to clarify, strengthen, or explain terms and expressions in criteria.

## 6. STANDARDS

### 1. STANDARD “MISSION AND OUTCOMES”

#### Criteria for assessment

#### 1.1 Mission definition

1.1.1 The medical educational organization **should** determine the mission of the educational programme of the postgraduate level

1.1.2 The medical education organization **should** bring the mission of the postgraduate educational programme to the attention of stakeholders and the health sector

The medical education organization **should** determine a training programme that allows to prepare a specialist at the level of postgraduate medical education:

1.1.3 competent in any field of medicine, including all types of medical practice, management and health organization

1.1.4 able to work for work at a high professional level.

1.1.5 able to work unattended, independently and in a team, if necessary.

1.1.6 with a commitment to lifelong learning, including a professional

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responsibility to maintain knowledge and skills through performance assessment, auditing, self-study and recognized activities in *CPD / CME*.

1.1.7 The medical education organization **should** ensure that the mission covers consideration of the health needs of the community or society, the needs of the health care system and other aspects of social responsibility, if necessary

Medical education organization **should** be encouraged:

1.1.8 innovation in the educational process, allowing the development of broader competencies than the minimum necessary.

1.1.9 improving patient care that is necessary, effective and compassionate in addressing health problems and promoting health.

1.1.10 organization and conduct of scientific research of students of the postgraduate level.

### ***Recommendations for describing standards:***

- ✓ *A description, mission statement of the study programme and learning outcomes should be provided and relevant published documents submitted.*
- ✓ *Also describe how the learning outcomes are related and consistent with the stated mission of the study programme and the institutional mission.*
- ✓ *A summary should be provided of how the mission and outcomes are communicated to stakeholders.*
- ✓ *Describe the procedure for developing and accepting a mission. It is assumed that the academic staff, administration, employees of structural divisions, students, and other stakeholders should take part in the development of the mission.*
- ✓ *How the processes used to develop and revise the mission and objectives are periodically reviewed and reviewed, and to shape the policy and process for communicating its mission and objectives to stakeholders.*
- ✓ *It is necessary to provide a brief information about the career opportunities of graduates who have completed an educational programme in basic medical education.*
- ✓ *How and in what documents the role and functions of a doctor in the country's health care system are described, what are the requirements for their qualifications.*
- ✓ *What are the requirements for graduates who have completed this programme to continue their studies at the postgraduate level (residency programmes, as well as master's, PhD programmes, specialized doctoral studies, etc.).*
- ✓ *Lifelong learning is the professional responsibility of healthcare professionals to continually develop their knowledge and skills through performance assessment, audits, reviews of their clinical practice, or recognized continuing professional development (CPD) / continuing medical education (CME) programmes. CPD includes all activities that physicians undertake, both formal and informal, to maintain, update, develop and improve their knowledge, skills and attitudes in response to the needs of patients. CPD is a*

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*broader concept than CME and includes the continuous development of knowledge and skills in medical practice*

- ✓ *A description should be given of what educational strategies and approaches, teaching methods form responsibility and develop the ability of undergraduates to learn throughout life.*
- ✓ *Research in medicine includes research in the biomedical, clinical, behavioral and social sciences.*
- ✓ *How is scientific advances in biomedical, clinical, behavioral and social sciences reflected in the mission?*
- ✓ *Aspects of global health include awareness of serious international health problems, as well as the health implications of inequities and inequities.*
- ✓ *How does the mission address global health aspects?*

## **1.2 Participation in the formulation of the mission**

1.2.1 The medical education organization **should** ensure that the main stakeholders are involved in the development of the educational programme mission.

1.2.2 The medical education organization should ensure that the stated mission is based on the opinions / suggestions of other relevant stakeholders.

### ***Recommendations for describing standards:***

- ✓ *It is necessary to identify the main stakeholders and provide a description of how the medical education organization involves representatives of the main stakeholders in the formulation of the mission and the outcomes of the educational programme.*
- ✓ *What groups, besides the main stakeholders, does the medical education organization consult with?*
- ✓ *How does the medical education organization consult with these stakeholder groups and how does it involve them in the process of improving the formulation of the mission and goals?*

## **1.3 Institutional autonomy and academic freedom**

1.3.1 The medical education organization **should** have a training process that is based on recognized basic and postgraduate medical education and helps to strengthen the professionalism of the student

1.3.2 The medical education organization should ensure that the training process will promote professional autonomy to enable the graduate to act in the best interests of the patient and society.

### ***Recommendations for describing standards:***

- ✓ *What institutional autonomy does a medical education institution have regarding the development and implementation of policies in the development of its educational programme and the use of allocated resources for the*

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*implementation of the educational programme?*

- ✓ *Submit the relevant documents of the medical education institution and the state regarding the institutional freedom provided and the definition of responsibility for the preparation of the educational programme and the allocation of resources*
- ✓ *What is the policy and practice of an educational medical organization that ensures that training provided by individual faculty and departments properly meets the content and structure requirements of an educational programme?*
- ✓ *How is this assessed and, if necessary, how are identified deficiencies corrected?*

#### **1.4 Final learning outcomes**

The medical education organization **should** determine the expected *learning outcomes* that students should achieve in learning outcomes in relation to:

1.4.1 their achievements at the postgraduate level in terms of knowledge, skills and thinking;

1.4.2 appropriate foundation for a future career in the chosen field of medicine;

1.4.3 future roles in the health sector;

1.4.4 commitment and skills in the implementation of continuing education;

1.4.5 community health needs, health system needs and other aspects of social responsibility;

1.4.6 professional behavior

The medical education organization **should** determine:

1.4.7 general and specific to the specialty (discipline) components of educational results that are required to be achieved by students.

1.4.8 appropriate behavior towards undergraduates and other students, teachers, patients and their relatives in accordance with the proper norms of behavior.

1.4.9 The medical education organization should determine educational results based on the results obtained at the level of basic medical education.

#### ***Recommendations for describing standards:***

- ✓ *What **outcomes** (knowledge, skills, attitudes / professional values and abilities) are required from undergraduates at the time of completion of the educational programme?*
- ✓ *Complete the following table showing the general expected competencies of graduates, where each competency has a relationship with learning outcomes and their measurement*

General competences	Learning outcomes for each competency	Assessment of learning outcomes

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|  |  |  |
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- ✓ How do these **outcomes** relate to **subsequent graduate training** and commitment to lifelong learning?
  - ✓ How do these outcomes relate to the existing and emerging **needs of the society** in which the graduates will work?
  - ✓ Describe and submit a **document** governing the relevant appropriate standards of conduct for the undergraduate.
  - ✓ Provide, in the form of a list or table, the **professional qualities** that should be developed in undergraduates during their studies in this educational programme.
  - ✓ Describe the **process** by which the list of desired qualities and attitudes of the undergraduate was developed, as well as the groups responsible for the review and approval (for example, faculty teachers, commission or structural unit for developing an educational programme, student self-government).
  - ✓ Describe the way in which the list of desired qualities and attitudes of a master student will be communicated to master students, teachers, doctors at clinical sites.
  - ✓ Briefly describe the **methods** used to **assess the achievement** of graduate students in relevant professional qualities and attitudes. Describe the way in which the identified deficiencies are corrected.
  - ✓ How is the **formation of ethical relations** between undergraduates and doctors in the clinic, teachers, patients and their relatives ensured?
  - ✓ Describe any **formal activity** through which a medical education institution identifies a positive and negative impact on the professional behavior of undergraduates, especially in a clinical setting. Summarize any mechanisms by which medical undergraduates, educators can report observed incidents of unprofessional behavior and identify the person (s) to whom unprofessional behavior is reported.
  - ✓ Describe whose **functional responsibilities** include the responsibility to ensure that professional conduct is in accordance with the appropriate norms and canons of professional conduct established by the MoE and maintained at all clinical sites for clinical training of undergraduates. Describe any **policy or procedure** (agreements) for establishing overall responsibility for an appropriate learning environment in a clinical setting. Describe any mechanisms (for example, joint clinical site and MEO commissions) that exist to strengthen the appropriate learning environment.
  - ✓ Describe and provide a copy of any formal or informal **policy and procedure** for addressing manifestations of mistreatment to an undergraduate, including opportunities for reporting such incidents and identifying mechanisms to investigate them. Describe any evidence you have, in the form of documents, that the policy is effective.
  - ✓ Clarify how learning outcomes relate to **further training**.
  - ✓ How does a medical education organization **determine** in the training programme the outcomes of research performed by undergraduates?

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***Definitions and explanations:***

- *The mission provides* a comprehensive framework with which all other aspects of the postgraduate medical education programme should be linked. The mission statement includes general and specific issues related to institutional, national, regional and, as appropriate, global health needs. This document assumes that the mission includes visions for postgraduate medical education.
- *Medical Education Organization (MEO)* – Local and national bodies or bodies involved in the regulation and management of postgraduate medical education, national government agency, national or regional council, university, college, medical society, hospital or hospital system, competent professional organization, or a combination thereof representatives with shared responsibility.
- *Postgraduate medical education* (master's level) is the phase / level of education in which master's students are trained after obtaining a basic medical qualification, and may include various formalized training programmes. Upon completion of a formal postgraduate programme, a degree, diploma or master's certificate is usually awarded.
- *The health sector* includes various health care delivery systems, both public and private, as well as medical research institutions.
- *Continuing medical education (CME)* implies continuous education throughout life, acquiring knowledge and skills in medical practice.
- *Continuing professional development (CPD)* refers to professional activities throughout the life of a specialist, formally and informally, to maintain, renew, develop and enhance their knowledge, skills and thinking in response to the needs of their patients. CPD is a broader concept than CME. However, internationally, there is a tendency to use CPD and CME as synonyms.
- *Reaching and Addressing Community Health Needs* – Engaging with the local community on health and health issues, including to improve the educational programme to meet the community health needs.
- *The chosen field of medicine* implies recognized specialties. The language in the standards recognizes that the number, designation and content of specialties, narrow specializations and areas of expertise vary considerably from country to country.
- *Key stakeholders* are students, programme directors, medical research organizations, clinic administrations, government and professional associations or organizations, and educators.
- *Other relevant stakeholders*, which are representatives of other medical professions, patients, community, organizations and health authorities.
- *Professionalism* describes the knowledge, skills, thinking and behavior

expected by patients and society from individuals during the practice of their profession and includes concepts such as the skill of continuous learning and maintaining competence, ethical behavior, honesty, decency, altruism, service to others, adherence to professional codes, fairness and respect for others.

- *Other bodies* are regional and local authorities outside the educational system, religious communities, private companies, unions and other interest groups that can influence the decision of the MOE in such key areas as planning and development of the educational programme, its evaluation, recruitment of students, selection / selection of teachers, and conditions of employment and resource allocation.
- *Educational outcomes* – Learning Outcomes or Competencies, which are regarded as knowledge, understanding, skills, abilities and thinking that should be demonstrated at the end of the learning period by the students.
- The deliverables as applied to the theory and practice of medicine include knowledge and understanding of the basic, clinical, behavioral and social sciences, including knowledge of public health and population medicine and medical ethics required for clinical practice; relationships and professionalism; clinical skills as applied to diagnosis, practical skills, communication skills, disease treatment and prevention, health promotion, rehabilitation, clinical thinking, problem solving; and the ability for lifelong learning and professional development.
- *Common components* include general aspects of medicine related to the functions of the graduate in the chosen field of medicine.
- *Discipline / specialty-specific components* – knowledge, skills, thinking of the chosen field of medicine as a specialty, narrow specialty or expert function.
- *Appropriate behavior* implies a written code of ethics adopted by the MEO.
- *Autonomy* in the patient-physician relationship will ensure that, under all circumstances, physicians will make informed decisions in the best interest of their patients and society, based on the best available evidence. The autonomy surrounding the training of doctors implies that they have some influence over decisions about what to learn and how to plan and conduct their training. It also implies access to the knowledge and skills that doctors need to meet the needs of their patients and the community, and that their knowledge and actions are independent and impartial. Acting on its own, available guidelines should be taken into account.
- *Competent Authorities* – Local and national authorities responsible for basic medical training can be national government agencies, national council, university, competent professional organization.
- *Competence* can be defined in a broad professional sense, or as specialized knowledge, skills, attitudes or behavior.
- *Social responsibility* includes the willingness and ability to respond to the

needs of society, patients and the health care system and related health sectors and contribute to the development of medicine at the national and international levels through the introduction of a competency-based approach in the health care system, medical education and research and should be based on its own principles with taking into account the autonomy of the university.

- Competencies corresponding to basic medical training, at a level depending on the chosen field of medicine, will include the following categories:
  - Providing patient care that should be appropriate, effective and compassionate with regard to health problems and health promotion.
  - Medical knowledge in the basic biomedical, clinical, behavioral and social sciences, medical ethics and medical jurisprudence and the application of such knowledge in patient care.
  - Interpersonal and other communication skills that enable effective communication with individual patients and their families, and teamwork with other healthcare professionals, academia and the public
  - Evaluating performance and applying new scientific knowledge to continually review and improve clinical practice
  - Acting as a leader, trainer and educator in relation to colleagues, medical graduate students and other medical professionals.
  - Scientific potential of a scientist capable of contributing to the development and research in the chosen field of medicine.
  - Professionalism
  - Ability to act on behalf of the patient
  - Knowledge of public health and health policy issues, and awareness and responsiveness to the broader health system context, including, for example, health care delivery, partnerships with health workers and managers, cost-effective health practices, health economics and resource allocation
  - Ability to understand the health care delivery system, and to identify and deliver systemic improvement in care delivery.

## **2. STANDARD "EDUCATIONAL PROGRAMME"**

### **Criteria for assessment**

#### **2.1 Teaching approach**

The medical education organization **should:**

2.1.1 define an educational programme based on the results of existing basic medical education, organize a teaching approach in a systematic and transparent manner.

2.1.2 describe the general and discipline / specialty-specific components of training.

2.1.3 use teaching and learning methods that are suitable for both practice and theory

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2.1.4 identify the *teaching and learning methods* used that encourage, prepare and support students to take responsibility for their learning process.

2.1.5 ensure that the educational programme is implemented in accordance with the *principles* of equality.

The medical education organization **should:**

2.1.6 have a system / procedures and guide the student through mentoring and regular assessment and feedback.

2.1.7 increase the degree of self-responsibility of the student as skills, knowledge and experience improve.

### ***Recommendations for describing standards:***

- ✓ *Indicate the academic degree awarded upon completion of this study programme.*
- ✓ *Provide a brief description of the content of the educational programme.*
- ✓ *Describe the process of planning the revision of the educational programme, indicate who is involved in the process of revising the programme and which structural units, advisory bodies or commissions, other stakeholders are involved in this process.*
- ✓ *Describe what principles and approaches, educational strategies that promote integrated learning, were used in the development of the educational programme?*
- ✓ *Is the curriculum model integrated?*
- ✓ *How is the use of modern principles and teaching methods confirmed in this training programme?*
- ✓ *Describe the practice and teaching methods used and contributing factors.*
- ✓ *What teaching and learning methods, including clinical learning, are used in practice to implement the educational programme?*
- ✓ *How will the curriculum and the teaching and learning methods used and the learning environment develop in master's students to actively take responsibility for their learning?*
- ✓ *Describe the types and appropriateness of methods for involving undergraduates in the learning process to promote self-directed / self-directed learning and the development of lifelong learning abilities and skills.*
- ✓ *Describe how the principles of equality are observed by the medical education organization in relation to their students?*
- ✓ *A copy of the anti-discrimination policy of the medical education organization should be attached, if such a document is available.*

## **2.2 Scientific method**

The medical education organization **should:**

2.2.1 teach students the principles of scientific methodology in accordance with the level of postgraduate education and provide evidence that the student

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achieves knowledge and understanding of the scientific base and methods of the chosen field of medicine;

2.2.2 provide evidence that the student is exposed to evidence-based medicine as a result of wide access to relevant clinical / practical experience in the chosen field of medicine

The medical education organization **should**:

2.2.3 include formal teachings on critical appraisal of literature and scientific evidence in the EP.

2.2.4 provide the student with access to scientific activities

2.2.5 in the educational programme to correct and change the content of scientific developments.

***Recommendations for describing standards:***

- ✓ *What components of the educational programme instill in undergraduates the principles of a scientific approach and evidence-based medicine and form their ability for analytical and critical thinking?*
- ✓ *Please describe briefly what are the possibilities of library resources and access to the Internet, access to reliable and reliable sources.*
- ✓ *How are elements / components of elective analytical and experimental research included in the curriculum?*

**2.3 Learning content**

The medical education organization **should** include in the learning process the practice and theory about:

2.3.1 biomedical, clinical, behavioral and social sciences

2.3.2 clinical solutions

2.3.3 communication skills.

2.3.4 medical ethics

2.3.5 public health

2.3.6 medical jurisprudence

2.3.7 management disciplines

2.3.8 organize an educational programme with appropriate attention to patient safety

The medical educational organization **should** adjust and make changes in the educational programme for:

2.3.9 ensuring the development of knowledge, skills and thinking of the different roles of the graduate;

2.3.10 correspondence of the content of the EP to the changing conditions and needs of society and the health care system.

***Recommendations for describing standards:***

- ✓ *Describe the required components and elective*
- ✓ *Describe the procedure for determining the elective components of the programme, how they are developed and included in the educational programme*

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- ✓ *How is the revision of the educational programme carried out? Describe the policy of the educational organization and the revision process, if any, carried out in the organization*

#### **2.4 The structure of the educational programme, composition and duration**

The medical education organization **should**:

2.4.1 describe the content, volume and sequence of courses and other elements of the educational programme

2.4.2 define required and optional components

2.4.3 combine practice and theory in the learning process

2.4.4 ensure compliance with national legislation

The medical education organization **should** be included in the educational programme:

2.4.5 take into account the results of basic medical education in relation to the choice of the field of medicine

2.4.6 requirements for the performance of various roles in the health care system for the future graduate

#### ***Recommendations for describing standards:***

- ✓ *Present an education programme, curriculum*
- ✓ *Describe the required components and elective*
- ✓ *On the basis of which national regulatory documents was the educational programme developed?*
- ✓ *What are the internal regulations governing the creation and implementation of the educational programme?*
- ✓ *Are there criteria, requirements and rules for the development of disciplines?*
- ✓ *Information should be provided on the structure, duration (hours / weeks of the semester / academic year), the content of the educational programme, indicating the mandatory elements and optional components, the relationship between the basic biomedical, behavioral and social and clinical disciplines, and a summary in the form of academic disciplines / modules and their duration.*
- ✓ *Indicate the relationship between lectures, small group teaching, seminars, labs, clinical rotations.*
- ✓ *What are the basic principles, approaches and educational strategies, teaching methods and knowledge assessment that facilitate and ensure the integration of elements of the educational programme (horizontally / vertically)? Please provide a short description of this integration.*
- ✓ *Provide a summary in the form of academic topics / subjects and the duration (hours / weeks) of the semester / academic year for the elements of the educational programme. Indicate if issues such as health promotion, preventive medicine, alternative / alternative medical practice are reflected in the curriculum.*

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## **2.5 Relationship between education and health practice**

The medical education organization **should**:

2.5.1 describe and respect the integration between theoretical training and professional development.

2.5.2 ensure the integration of training and professional training, including through on-the-job training.

The medical education organization **should** be included in the educational programme:

2.5.3 effectively organize the use of the capabilities of the health care system for training purposes, including in terms of providing practice in the workplace.

2.5.4 ensure that such training is optional and not subject to the requirements for the provision of medical services.

### ***Recommendations for describing standards:***

- |  |
|--|
| <ul style="list-style-type: none"><li>✓ <i>How is the ratio of theoretical education and vocational training maintained?</i></li><li>✓ <i>Are there internships or on-the-job training for undergraduates?</i></li></ul> |
|--|

## **2.6 Learning management**

The medical education organization **should**:

2.6.1 define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process.

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

Medical education organization should be included in the educational programme:

2.6.3 guarantee a variety of learning locations.

2.6.4 coordinate multiple training locations to obtain appropriate access to different aspects of the chosen field of medicine

2.6.5 have access to the resources needed to plan and implement teaching methods.

2.6.6 have access to the resources needed to plan and implement student assessment.

2.6.7 have access to the resources needed to plan and innovate the training programme.

### ***Recommendations for describing standards:***

- |  |
|--|
| <ul style="list-style-type: none"><li>✓ <i>Describe the functions of the unit that manages the educational programme</i></li><li>✓ <i>Describe the programme development process, which stakeholder representatives were involved in its development?</i></li><li>✓ <i>How was the programme discussed and communicated to a wide range of stakeholders?</i></li></ul> |
|--|

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- ✓ *Describe the process of determining the relevance of the programme to the available resources of the medical education organization.*
- ✓ *Describe the scope of authority and composition of the structural unit of the medical organization of education responsible for curricula? Describe what powers this unit has to resolve conflicts related to the principles of education and to determine the contribution of specific disciplines to the curriculum of general medicine?*
- ✓ *Describe the methods used by teachers and relevant units to study and evaluate the curriculum to improve the curriculum.*
- ✓ *Describe how teacher students (if any) are involved in the curriculum management process.*
- ✓ *Introduce the staff of the unit and their authority and responsibility in the process of planning, developing, implementing and evaluating the training programme, the introduction of innovative technologies and also in the allocation of allocated resources.*
- ✓ *What are the mechanisms of the structural unit of the medical organization of education, responsible for the curriculum, to innovate in teaching, learning, assessment and the educational programme?*
- ✓ *Provide information on such practices and mechanisms, and if there is a plan for the introduction of innovative technologies and the results of the evaluation of their adaptation and integration into the educational programme. Information on the implementation of simulation technologies and evaluation of their effective use for training and evaluation of clinical skills should be provided separately.*
- ✓ *Describe other types of innovative technologies that can improve the learning of undergraduates, including e-Learning.*
- ✓ *How are other relevant stakeholders involved in the curriculum management process?*
- ✓ *Is there a practice of receiving feedback from clinical teachers / specialists involved in training at clinics.*
- ✓ *Provide a list of representatives of other relevant stakeholders and how they contribute to the management and improvement of the educational programme.*

### ***Definitions and explanations:***

- *The teaching approach refers to the curriculum and includes a statement of intended learning outcomes, content / curriculum, programme experiences and processes, a description of the structure of planned teaching and learning methods and assessment methods. Training, if necessary, can branch from general to more specialized content, and therefore it is necessary to describe what knowledge, skills and thinking the student will receive by choosing a certain educational path.*
- *Basic medical education refers to a basic (university) programme in the field of medicine, delivered by medical schools / faculties / colleges or*

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academies, resulting in a basic level.

- *Teaching and learning methods* includes any didactic, partial, demonstration, mentoring teaching; and teaching methods - lectures, small group sessions, problem or case learning, mentored learning, hands-on exercises, laboratory work, bedside training, clinical demonstrations, laboratory skills training, community field exercises, training online and last but not least practical clinical work as a junior staff member.
- *Equitable training* means equal treatment of staff and students, regardless of gender, ethnicity, religion, sexual orientation or socioeconomic status, and taking into account physical capabilities.
- *Science and method teaching* involves the use of elective research projects to be conducted by the students.
- *Evidence-based medicine* means medicine based on documentation, testing and accepted scientific results.
- *Access to research activities* includes mandatory or optional analytical and experimental research.
- *Basic biomedical science* – depending on local needs, interests, and traditions – usually includes anatomy, biochemistry, biophysics, cell biology, genetics, immunology, microbiology (including bacteriology, parasitology, and virology), molecular biology, pathology, pharmacology, and physiology.
- *Clinical science* includes clinical or laboratory disciplines (medical specialty, narrow specialty or expert function) and in addition other relevant clinical / laboratory disciplines in accordance with local needs, interests and traditions.
- *The behavioral and social sciences* typically include biostatistics, epidemiology, global health, hygiene, medical anthropology, medical psychology, medical sociology, public health and social medicine, and provide the knowledge, concepts, methods, skills necessary to understand socio-economic, demographic and cultural determinants of the causes, distribution and consequences of health problems.
- *The general structure* includes a sequence of courses, disciplines and other EP elements.
- *Combining practice and theory* includes didactic training sessions and hands-on experience under the guidance of a mentor / faculty member.
- *Other relevant stakeholders* are other participants in the learning process, representatives of other professions in health care and in health system management.
- *Training in multiple locations* implies the use of different bases by patient category, degree of specialization (for example, initial care, specialized care, highly specialized care), hospitals and outpatient clinics, etc.

### 3. STANDARD “ASSESSMENT OF STUDENTS

#### Criteria for assessment

#### 3.1 Assessment methods

The medical educational organization **should:**

3.1.1 present the process of evaluating students in EP

3.1.2 define, approve, and publish *the principles, methods, and practices used to assess students, including the number of exams and other tests, maintaining a balance between written and oral exams, using criteria-based and reasoning-based assessment methods and special exams*, and define criteria for establishing passing scores, grades, and the number of allowed retakes;

3.1.3 ensure that the assessment covers knowledge, skills, and attitudes to learning;

3.1.4 use a wide range of assessment methods and formats depending on the *"utility assessment"*, which includes a combination of validity, reliability, impact on learning, acceptability and effectiveness of the assessment methods and format;

3.1.5 formulate criteria for passing exams or other types of assessment, including the number of allowed retakes;

3.1.6 use assessment methods that provide formative teaching methods and constructive feedback.

The medical educational organization **should:**

3.1.7 document and evaluate the reliability and validity of assessment methods, which requires an appropriate quality assurance process for existing assessment practices;

3.1.8 implement new assessment methods in accordance with the need;

3.1.9 use the system to appeal the evaluation results.

3.1.10 encourage a process of external review of assessment methods;

3.1.11 use the system to appeal the evaluation results.

3.1.12 if necessary, organize a "different opinion", change of teaching staff or additional training

#### ***Recommendations for describing standards:***

- ✓ *Describe the general policy for evaluating undergraduates developed by the medical education organization, describe the process of developing and approving documents issued to undergraduates, which provide information on the evaluation policy, evaluation methods, including evaluation criteria, timing of midterm and final exams, criteria for passing examinations, weight and progress criteria undergraduates, the appeal procedure, the number of retakes allowed and the conditions for retaking the exam.*
- ✓ *How is a balance struck between summative and formative assessment, written and oral examinations, criteria-based and reasoned assessment methods, and special examinations?*
- ✓ *Who is responsible for shaping and implementing the assessment policy for undergraduates? Describe the composition of the respective committees and*

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*their terms of reference and responsibilities.*

- ✓ *How is the competence of staff and involved teachers ensured in assessing the knowledge and skills, attitudes and abilities of undergraduates, what special training does the MEO offer?*
- ✓ *Describe the policy for recruiting external examiners and the selection criteria for including them on the examination board.*
- ✓ *Describe mechanisms to ensure the reliability and validity of the assessment methods used.*
- ✓ *What are the policies, mechanisms for filing an appeal and the procedure for handling an application?*

### **3.2 Relationship between assessment and learning**

The medical education organization **should** use the principles, methods and practice of assessment, including the educational achievements of students and the assessment of knowledge, skills, professional values of relationships, which:

3.2.1 clearly comparable to teaching methods, teaching and learning outcomes;

3.2.2 ensure that students achieve their final learning outcomes;

3.2.3 promote student learning;

3.2.4 provide an appropriate balance between formative and summative assessment to manage learning and *evaluate the student's academic progress*, which *requires establishing rules for evaluating progress and their relationship to the assessment process.*

Medical education organizations **should:**

3.2.5 use principles, methods and practices that encourage integrated learning;

3.2.6 encourage integration with practice, including clinical practice;

3.2.7 ensure the provision of timely, specific, constructive and fair feedback to undergraduates based on the results of the assessment.

#### ***Recommendations for describing standards:***

- ✓ *A table should be provided showing the comparability of learning outcomes and assessment methods and the teaching and learning methods used.*
- ✓ *Clear mechanisms and transparency should be established to inform undergraduates about the requirements and rules for assessing and evaluating progress.*
- ✓ *Describe the existing policy and, if applicable, the practice for assessing the academic progress of the undergraduate and the established rules.*
- ✓ *How are assessment practices and methods compatible with learning outcomes and learning methods?*
- ✓ *Provide a table that includes the various elements of the educational programme, indicating the number and nature of exams.*
- ✓ *Describe to what extent an integrated assessment of the various elements of the educational programme is provided?*

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✓ *Describe the policy and, if any, practice for providing feedback to graduate students based on the results of the assessment.*

***Definitions and explanations:***

- *Determining the methods* used for assessment may include considering the balance between formative, summative and final grades, the number of exams and other tests, the balance between different types of examinations, the use of standards and criteria, and the use of portfolio and specific types of exams.
- *Learning assessment methods* involves assessing how assessments contribute to preparation and learning.
- *Evaluating and documenting the reliability and validity of assessment methods* will require an appropriate quality assurance process for assessment practices.
- The use of *external examiners* can increase the fairness, quality and transparency of the assessment.
- “*Evaluation utility*” is a combination of validity, reliability, learning impact, acceptability and effectiveness of evaluation methods and formats in relation to intended results.
- *Assessment principles, methods and practices* refer to the process of creating student assessment and include assessment in all areas: knowledge, skills and attitudes.
- *Encouraging Integrated Learning* is the consideration of assessment as a combination of knowledge, skills, and thinking / attitudes across different disciplines, while ensuring adequate testing of specific disciplines or subject areas.

**4. STANDARD “STUDENTS”**

**Important!**

*If the educational organization has not yet accepted master's students, then it is necessary to describe the policies and processes aimed at accepting and supporting future students. Therefore, the standards contain the concepts of "policy" and "practice". The medical education organization provides a description of the process that exists at the time of submitting the self-assessment report.*

**Criteria for assessment**

**4.1 Admission and selection policy**

The medical education organization **should:**

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4.1.1 define and implement an *admission policy* based on the mission of the organization and including a clearly defined position on the *student selection process*;

4.1.2 Ensure a balance *between learning opportunities and student acceptance*

4.1.3 formulate and implement policy / rules for the selection of students according to the established criteria

4.1.4 have a policy and implement the practice of admitting students with disabilities in accordance with applicable laws and regulations of the country;

4.1.5 have a policy of transferring students from other programmes and medical education organizations;

4.1.6 include medical professional organizations in the policy development and student selection process.

The medical education organization **should:**

4.1.7 guarantee the transparency of the selection procedure;

4.1.8 ensure transparent admission to all qualified graduates of basic medical education

4.1.9 consider, as part of their selection procedure, the specific opportunities of potential students in order to improve the learning outcome in the chosen field of medicine

4.1.10 enable an appeal mechanism on admission decisions

4.1.11 periodically review admission policies based on relevant social and professional evidence to meet the health needs of the community and society.

***Recommendations for describing standards:***

- ✓ *Describe the policy and academic (if any non-academic) criteria that are set for admission of undergraduates to a medical education institution?*
- ✓ *Briefly describe the selection process for undergraduates, starting with the acceptance of the application and the subsequent selection (for example, for an interview, an interview process), making a decision and enrolling in a medical education organization. For each stage of selection, describe the meaning and criteria on the basis of which decisions are made by individual responsible persons or groups for the admission of undergraduates to MEO.*
- ✓ *Are there any additional requirements at the institutional or state level?*
- ✓ *Which body is responsible for the selection and admission policy for undergraduates and what are its powers?*
- ✓ *What methods of selection and admission of undergraduates to medical educational institutions does this body use?*
- ✓ *Describe the policy and, if any, practice of admitting master's degree students with disabilities in accordance with applicable laws and regulations of the country?*
- ✓ *What policy and practice for the transfer of undergraduates exists in the*

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*medical education organization?*

- ✓ *If a medical education institution has not admitted undergraduates, it is necessary to write only policies / mechanisms and provide supporting internal regulatory documents.*

## **4.2 Number of students**

4.2.1 The medical education organization **should** determine the number of accepted students in accordance with the material and technical capabilities and capabilities at all stages of education and training.

The medical education organization **should:**

4.2.2 consider the number and size of enrolled students in consultation with *relevant stakeholders responsible for planning and developing human resources in the health sector.*

### ***Recommendations for describing standards:***

- ✓ *Indicate, if any, the number of admitted undergraduates and any distribution in different categories.*
- ✓ *How is the number of accepted undergraduates determined in relation to the material, technical and educational potential of the medical education organization?*
- ✓ *Describe what mechanisms exist to regulate the number of admitted undergraduates and the corresponding quotas?*
- ✓ *How is the need for human resources for health assessed, and with whom of the stakeholders does the medical education organization consult regarding changes in the number and composition of admitted undergraduates? Briefly describe the current policy and practice of the MOE.*

## **4.3 Consulting and support for students**

The medical education organization **should:**

4.3.1 have an academic advisory policy / system for undergraduates.

4.3.2 have policies / mechanisms to support undergraduates focused on social, financial and personal needs, allocating appropriate resources for social and personal support.

4.3.3 guarantee the confidentiality of advice and support provided.

4.3.4 provide for the allocation of resources to support undergraduates

4.3.5 The medical education organization **should** provide support in the event of a professional crisis and problem situations.

### ***Recommendations for describing standards:***

- ✓ *Describe the policy / practice of the medical education organization regarding the master's counseling service. What other support programmes for undergraduates exist in the medical education organization?*
- ✓ *What additional support programmes from other organizations may*

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*undergraduates have access to?*

- ✓ *Describe existing policies and mechanisms for identifying and allocating resources to support undergraduates?*
- ✓ *How is the confidentiality of counseling and support for undergraduates ensured?*
- ✓ *Describe what policies and / or mechanisms exist in the medical education organization to identify undergraduates in need of psychological, social, material, academic support?*
- ✓ *Is there a programme to support the health of a master's student, how is such a programme supported?*
- ✓ *Describe the mechanisms for advising graduate students on planning their professional career, and what mechanisms exist for such support.*
- ✓ *How does a medical education organization plan to bring or bring to the attention of undergraduates information about support services for undergraduates?*

#### **4.4 Student representation**

The medical education organization **should** determine and implement *a policy of student representation and their respective participation*

4.4.1 in the development of the EP;

4.4.2 in the management of the OP;

4.4.3 evaluation of the educational programme;

4.4.4 planning conditions for students

4.4.5 The medical education organization **should** encourage students to participate in making decisions about the processes, conditions and rules of learning

#### ***Recommendations for describing standards:***

- ✓ *Describe the policy of the medical education organization regarding the appropriate participation and contribution of undergraduates in resolving issues related to the educational programme?*
- ✓ *What is the policy of the medical education organization in relation to the contribution of undergraduates to the solution of other issues related to students?*
- ✓ *What practical mechanisms does a medical educational organization have to promote the principles of self-government and participation in the activities of the management bodies of a medical educational organization?*

#### ***Definitions and explanations:***

- The *admission policy* implies certain rules based on national legislation, adapted to local conditions.
- *Selection criteria* may include consideration of balanced admission based on gender, ethnicity and other social requirements (socio-cultural and linguistic

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characteristics of the population), including the potential need for a policy of special recruitment, admission and registration for rural groups of doctors and minorities.

- *The student selection process* will include both rationale and selection methods such as medical school results, other academic or educational experience, entrance exams and interviews, including assessing the motivation for studying in the chosen field of medicine.
- *Admission policies for students with disabilities* should be developed in accordance with national laws and regulations, and take into account the safety of doctors and patients.
- *The transfer of students* implies students from other educational programmes.
- *The revision of the admission policy* implies an assessment of the selection criteria to determine the ability of students to be competent in the chosen field of medicine, as well as the relevant social and professional characteristics of potential students in order to meet the needs of healthcare and society.
- *The decision on the number of students* means the need to meet the national requirements for the number of medical personnel within the chosen field of medicine.
- *Relevant stakeholders* will include those responsible for planning and human resource development in the local and national health sector, as well as experts and organizations on global aspects of human resources for health (such as inadequacy and unequal distribution of the health workforce, migration of doctors, opening of new medical schools ) and regulate to meet the health needs of the population and society as a whole.
- *Community health needs* will include consideration of gender, ethnicity and other social requirements (socio-cultural and linguistic characteristics of the population), including the potential need for special recruitment, admission and motivation policies for rural doctors and minorities
- *Forecasting health workforce needs* – assessing different market and demographic forces, and research and distribution of physicians.
- *Academic counseling* is a process associated with the choice of a postgraduate educational programme. The organization of counseling usually includes the appointment of academic mentors and should be done in collaboration with professional medical organizations.
- *Addressing social, financial and personal needs* will mean professional support for social, personal, housing, health and financial issues; and includes access to clinics, immunization programmes and health / life / disability insurance, as well as financial assistance in the form of scholarships, grants and loans.
- *Student representation* refers to the participation of students in groups or committees responsible for planning and implementing a programme at the

local or national level.

- *Rewarded positions / scholarships* – these can be various types of remuneration, and can include paid internships, training in other organizations, etc.
- *Participation in all types of medical activities related to education* means the dedication of professional activities to practical training and theoretical teaching.

## **5. STANDARD "ACADEMIC STAFF / TEACHERS"**

### **Criteria for assessment**

#### **5.1 Personnel selection policy**

The medical education organization **should** define and implement a *selection and staff admission policy* that:

5.1.1 takes into account the necessary work experience;

5.1.2 contains criteria for the scientific, pedagogical and clinical merit of applicants, including the proper balance between pedagogical, scientific and clinical qualifications;

5.1.3 defines their responsibilities;

5.1.4 defines the responsibilities of training, including the balance between teaching, research and other functions

5.1.5 take into account the mission of the EP

The medical education organization **should** take into account such criteria in its policy on the selection and admission of employees as:

5.1.6 determine the responsibility of the academic staff in terms of its participation in postgraduate education;

5.1.7 determine the level of remuneration for participation in postgraduate education;

5.1.8 ensure that instructors have practical experience in the relevant field;

5.1.9 ensure that faculty members in specialized fields are approved for appropriate periods of study, if necessary.

#### ***Recommendations for describing standards:***

- ✓ *Describe the recruitment policy for your organization*
- ✓ *What are the criteria for hiring employees, appointments, promotions, dismissals developed in the organization?*
- ✓ *Are there institutional or state policies or requirements that influence the decisions of a medical educational institution regarding recruitment?*
- ✓ *Describe the policy pursued by the medical education organization to ensure that the profile of the teaching staff corresponds to the range and balance of teachers of basic biomedical sciences, behavioral and social sciences, and clinical sciences required to complete the educational programme*
- ✓ *Demonstrate the results of compliance of the teaching staff with qualification*

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*requirements and the specifics of educational programmes. Availability of a sufficient level of qualification of teachers (availability of a scientific degree, academic title, qualification category, industry awards, state awards, published textbooks and teaching aids).*

- ✓ *What is the ratio between medical and non-medical educators and between full-time and part-time teachers? What career opportunities and professional development for faculty are there in the organization?*
- ✓ *How are faculty research activities encouraged to strengthen the link between education and research?*
- ✓ *How is the use of innovative teaching methods and the use of advanced technologies in educational activities encouraged?*
- ✓ *Describe how the admission procedure for teaching staff is organized, how applicants learn about vacancies.*
- ✓ *How are employees familiarized with the rules and requirements approved within the organization?*

## **5.2 Employee commitment and development**

The medical education organization **should**:

5.2.1 ensure that students and teachers have sufficient time for teaching, counseling and self-study

The medical education organization **should**:

5.2.2 take into account the ratio of "teacher-student" depending on the various components of the educational programme and taking into account the peculiarities of the educational programme;

5.2.3 develop and implement a policy to support employees, including self-training and further professional development;

5.2.4 evaluate and acknowledge the scientific and academic achievements of teachers.

### ***Recommendations for describing standards:***

- ✓ *What document guarantees a balance between different types of teacher's activities?*
- ✓ *Is there an individual teacher's plan, by whom is it filled out, reviewed, approved and monitored?*
- ✓ *How does the EP management receive information about the activities of EP teachers (applied teaching methods, assessment methods within the discipline)?*
- ✓ *Is there a process for periodically assessing teacher performance?*
- ✓ *How is the comprehensive assessment of teaching quality carried out? What standards are used for this?*
- ✓ *Describe what policy is pursued by the medical education organization regarding the provision of due recognition and worthy remuneration of teachers in the academic, research, clinical and management fields? Attach a*

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- programme / plan to improve the capacity of teachers in the curriculum.*
- ✓ *Are there any additional institutional or government policies or regulations in this area?*
  - ✓ *Is there a practice to stimulate and motivate the academic staff? What documents is it regulated by? Give examples.*
  - ✓ *What mechanisms exist to develop and maintain the capacity of teachers and evaluate their performance? What structure of the university is responsible and monitors for these processes?*
  - ✓ *Describe the policy of the programme management in the field of formation and development of the talent pool.*
  - ✓ *Is there a concept for improving and maintaining the knowledge, qualifications and competence of personnel? How are the priorities for teacher development set?*

***Definitions and explanations:***

- Human resources policy means ensuring a sufficient number of highly qualified teachers and scientists to carry out the training programme.
- Practical experience implies recognition as a specialist in the relevant field of medicine.
- Other responsibilities include administrative functions as well as educational and research responsibilities.
- Teachers of narrow specialties will teach only in a narrow field without obligations to the general programme.
- Time for training, counseling and self-study involves a balance between different types of workloads and will require coordination of work schedules.
- Recognition of scientific, academic activity will be possible through awards, incentives and / or rewards.

**6. STANDARD "EDUCATIONAL ENVIRONMENT AND RESOURCES"**

**Criteria for assessment**

**6.1 Material and technical base**

The medical education organization should provide students with:

6.1.1 a sufficient material and technical base to ensure adequate implementation of the educational programme, space and opportunities for practical and theoretical research;

6.1.2 access to up-to-date professional literature;

6.1.3 adequate information and communication technologies;

The medical education organization should:

6.1.4 modern equipment for teaching practical methods.

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6.1.5 improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of education at the postgraduate level.

***Recommendations for describing standards:***

- ✓ *Provide a brief description of each element of the material and technical base available to support the non-clinical components of the educational programme.*
- ✓ *What mechanisms exist for the implementation of feedback from undergraduates and teachers on the available material and technical base and analysis of the needs for educational resources?*
- ✓ *What powers does a medical education institution have in order to allocate resources to eliminate identified deficiencies?*
- ✓ *Describe the security system and responsible personnel who provide a safe learning and safe learning environment for undergraduates during class and outside school hours on campus and at clinical training sites.*
- ✓ *Describe the mechanisms for ensuring a safe environment in classrooms, laboratories and using equipment?*
- ✓ *How are existing instructions and safety rules communicated to employees, undergraduates?*

**6.2 Educational environment**

The medical education organization **should** provide the necessary resources for the acquisition of adequate practical experience by students, including the following:

- 6.2.1 selection and approval of the educational environment;
- 6.2.2 having access to sufficient clinical / practice tools / facilities to provide training;
- 6.2.3 a sufficient number of patients, where necessary;
- 6.2.4 appropriate diverse clinical cases to achieve the goals and objectives of training;
- 6.2.5 organization of training in such a way as to provide the student with a wide experience in the chosen field of medicine.

When choosing a learning environment, a medical education organization **should:**

6.2.6 guarantee the number of patients and the corresponding varied clinical cases, allowing for clinical experience in all aspects of the chosen specialty, including training in organization and management in the field of health care and disease prevention

6.2.7 teaching at a university clinic, as well as teaching at other relevant cinemas / institutions and community facilities / locations, as appropriate.

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### ***Recommendations for describing standards:***

- ✓ *How does a medical education organization check the adequacy of educational resources for an educational programme?*
- ✓ *Give a brief description of the material and technical base that the medical education organization has for the practical training of students in hospitals, outpatient clinics, municipal clinics, initial health care organizations, and educational laboratories.*
- ✓ *Give a description of the university clinic, if any, or clinical sites*
- ✓ *Are there formal agreements with the relevant authorities and health organizations defining the responsibilities of each party regarding the training programme? It is necessary to provide a brief description of all clinical sites used for the implementation of the educational programme.*
- ✓ *Describe how clinical practice of students is monitored?*
- ✓ *Briefly describe the research base and ongoing research programmes.*
- ✓ *Describe the mechanisms that ensure the relationship between research and educational programme?*
- ✓ *What mechanisms exist to confirm that the achievements and results of scientific research are reflected in the educational programme of the medical education organization and in teaching?*

### **6.3 Information Technology**

6.3.1 The medical education organization **should** determine and implement a policy that is aimed at the effective use and assessment of appropriate information and communication technologies in the educational programme.

The medical education organization **should** provide teachers and students with opportunities and encourage them to use information and communication technologies:

6.3.2 for self-study

6.3.3 access to health information resources and relevant patient data;

6.3.4 patient management;

6.3.5 work in the health care system to provide medical care.

### ***Recommendations for describing standards:***

- ✓ *Is there any institutional or government policy regarding information and communication technologies?*
- ✓ *Describe the current policy regarding the use of information and communication technologies in the curriculum?*
- ✓ *Describe the composition of the committee or unit responsible for formulating and implementing information and communication technology policy?*
- ✓ *What authority does the unit have to allocate resources to integrate information and communication technologies into the training programme?*
- ✓ *Describe the mechanisms for assessing the relevant information and communication technologies used in the educational programme?*

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## **6.4 Medical and scientific research**

The medical education organization **should:**

6.4.1 introduce the methodology of scientific medical research into the educational programme.

The medical education organization **should:**

6.4.2 encourage students to participate in medical scientific research on the state and quality of health of the population and the health care system

6.4.3 provide access to research facilities and activities in training locations

### ***Recommendations for describing standards:***

- ✓ *What disciplines in the educational programme are aimed at studying the methodology of scientific research? How much credits do these disciplines contain?*
- ✓ *How are the research topics determined or will be determined for the performance of master's theses and how is their relevance for the country's health system determined?*
- ✓ *Describe your current policy regarding the use of research findings in the curriculum?*
- ✓ *Describe the policy of encouraging undergraduates for the achievement of the outcomes of scientific activities, if any in the organization.*

## **6.5 Expertise in Education**

The medical education organization **should:**

6.5.1 develop and implement a policy on the use of expertise at the stage of planning, implementation and evaluation of training for a specific educational programme.

The medical education organization **should:**

6.5.2 have access to educational expertise, where necessary, and conduct expertise that examines the processes, practices and issues of medical education and may involve physicians with experience in research in medical education, psychologists and sociologists in education, or experts from other nationalities and international institutions.

6.5.3 promote the aspirations and interests of employees in research in medical education.

### ***Recommendations for describing standards:***

- ✓ *Describe the existing national policy regarding the examination of the educational programme and its components, if applicable in the country.*
- ✓ *How is the examination of the educational programme carried out?*
- ✓ *Who takes part in the examination? What are the criteria for determining educational experts?*
- ✓ *How does the medical education organization contribute to the development of the potential of expert activity in the organization?*

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## 6.6 Exchange in education

The medical education organization **should** define and implement a policy for:

6.6.1 the availability of individual training opportunities in other educational institutions of the appropriate level within or outside the country;

6.6.2 *transfer and offset of educational loans and learning outcomes*

The medical education organization **should**:

6.6.3 promote regional and international exchange of staff (academic, administrative and teaching staff) and students, providing appropriate resources;

6.6.4 establish links with relevant national and international bodies in order to facilitate exchange and mutual recognition of learning elements.

### ***Recommendations for describing standards:***

- ✓ *Describe the student and teaching staff exchange policy of the organization. If available, please provide examples.*
- ✓ *Describe existing activities aimed at developing regional and international cooperation with other medical education organizations.*
- ✓ *Describe the practice and provide information on the exchange of students and teachers, and on conducting joint scientific research.*
- ✓ *What powers does a medical education institution have to allocate resources for international cooperation?*

### ***Definitions and explanations:***

- The material and technical support in places of training may include lecture halls, classrooms, laboratories, libraries, information technology equipment, and recreational facilities, where appropriate.
- Educational environments can be clinics with an adequate combination of primary, secondary and tertiary services, sufficient patient rooms and laboratories, outpatient services (including initial care), initial health care facilities, medical centers and other health care settings, and professional laboratories.
- Community facilities include initial care centers or stations, nursing homes, special clinics, specialist practices, and other facilities where health care is provided for a specific geographic area.
- The policy for the effective use of information and communication technologies includes all the necessary resources (computers, internal and external networks and other means of communication) and implies the use of the library's services.
- The use of information and communication technologies can be part of education for evidence-based medicine and to prepare students for continuing medical education and professional development.
- Medical and scientific research refers to scientific research at the basic level of the life sciences, clinical, behavioral and social sciences. Medical science

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refers to the academic achievement of cutting-edge medical knowledge and research. The foundation of the medical research postgraduate educational programme will be provided by research activities within the learning environment or affiliated institutions and / or scholarship and scientific competencies of the teaching staff.

- The education expertise addresses issues related to postgraduate medical education processes and practices and assessments, and includes experts with experience in medical education, educational psychologists and sociologists, etc. the examination can be carried out by the educational department of a medical education organization or be obtained from another national or international organization.
- Educational research explores teaching effectiveness and teaching methods, and the broader institutional context.
- Transfer of learning outcomes can be done through active programme coordination between institutes / universities and the use of credits.

## **7. STANDARD "ASSESSMENT OF THE EDUCATIONAL PROGRAMME"**

### **7.1 Monitoring, control and evaluation mechanisms of the programme**

The medical education organization **should**:

7.1.1 have mechanisms for monitoring the educational programme, taking into account the mission, the required final learning outcomes, the content of the educational programme, the assessment of knowledge and skills, educational resources.

7.1.2 evaluate the programme in relation to student admission policy and the needs of the education and health care system for medical personnel.

7.1.3 ensure stakeholder participation in programme evaluation.

7.1.4 The medical education organization **should** provide mechanisms to ensure transparency of the process and results of the evaluation of the educational programme for the management and all interested parties.

### ***Recommendations for describing standards:***

- ✓ *How does a medical education institution evaluate its programme?*
- ✓ *What are the mechanisms for studying and evaluating the educational programme, the progress of undergraduates?*
- ✓ *Is there an internal and external examination of curricula, work programmes of disciplines?*
- ✓ *How is the need to change the content of curricula and educational programmes determined?*
- ✓ *How is the analysis of changes in the labor market carried out? Who formulates proposals for changes in the content of educational programmes? Who makes the decision?*

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- ✓ *Indicate possible objects for changes (curricula, work curricula, etc.) and describe the procedure for making changes. What internal documents is it regulated by? How are representatives of employers, students, educators and stakeholders involved in decision making?*
- ✓ *If available, provide evidence that the results of the EP's annual assessment are being used to improve programme content and delivery.*
- ✓ *If available, show documented results and data from evaluating the programme and actions taken to improve its quality and effectiveness.*
- ✓ *Is there a team that independently monitors data on programme performance and overall outcomes and ensures that issues identified are reported to the appropriate authority?*
- ✓ *What data is collected for the study and evaluation of the educational programme?*
- ✓ *How does a medical education institution collect, analyze and use the data received from teachers and undergraduates on the educational programme of a medical education institution, if any?*

#### ***Definitions and explanations:***

- *Programme evaluation* is the process of systematically collecting information to analyze and determine the effectiveness and adequacy of the EP. Evaluation of the EP should be carried out using reliable and reliable methods of collecting and analyzing data to determine the quality of training in relation to the mission, training programme, achievement of the final learning outcomes. The involvement of medical education experts and their assessment will further expand the evidence base for the quality of postgraduate education.
- *Programme monitoring* involves regularly collecting data on key aspects of the study programme to ensure that learning is progressing as planned and to identify any areas of intervention. Data collection is part of the administrative procedures for enrollment, assessment, and programme completion.
- *Feedback on the programme* includes information about the processes and products of the educational programme. It also includes information on the negligence or inappropriate behavior of teachers or students, with or without legal consequences. The report includes information from students about the situation in the courses.
- *Objects of training* – bases, clinics, departments, laboratories, etc., where training takes place.
- *Issues identified* include insufficient achievement of intended learning outcomes. Measures and information on learning outcomes, including identified gaps and problems, should be used as feedback for activities and corrective action plans, programme development and further improvement.
- *The main stakeholders* are educators, students and health authorities.

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- *The components of the learning process* include organization, as well as resources and educational environment.
- *The learning process* includes the structure and specific components of the programme.
- *Overall results* are measured, for example, in national specialized examinations, benchmarking procedures, international examinations, or employment. Their analysis based on the results of various exams creates the basis for programme improvement.
- *Other stakeholders* – In addition to the main stakeholders - include medical professional organizations, other professionals, health authorities and bodies involved in the training of physicians and allied medical personnel, clinic leaders, patients and patient organizations.
- *The assessment of student performance* includes information on the average actual duration of training, points, the frequency of passing and failing on the exam, the frequency of success and termination of training, as well as the time spent by students on preparation.
- *Counseling* includes academic, personal and social support, and career guidance.
- The criteria are the minimum values for the number and diversity of patients, clinical and laboratory equipment, libraries, IT capabilities and faculty.

## **8. STANDARD “MANAGEMENT AND ADMINISTRATION”**

### **Criteria for assessment**

#### **8.1 Management**

The medical education organization **should** ensure that the educational programme is implemented in accordance with the rules regarding:

8.1.1 student admissions

8.1.2 structure and content

8.1.3 processes

8.1.4 evaluation

8.1.5 intended results.

The medical education organization **should** guarantee a continuous assessment of:

8.1.6 educational programmes for various types of postgraduate medical education

8.1.7 institutes / faculties / departments and other educational structures implementing the learning process

8.1.8 teachers

8.1.9 The medical education organization should be responsible for quality development programmes.

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8.1.10 in the future, the application of procedures for checking the outcomes and competencies of graduates for use by both national and international bodies

8.1.11 transparency of the work of management structures and their decisions

## **8.2 Academic leadership**

8.2.1 Medical education organization **should** clearly define the responsibility of the *academic leadership* in relation to the development and management of the educational programme.

The medical education organization **should** periodically assess the academic leadership regarding the achievement of:

8.2.2 mission of the postgraduate educational programme

8.2.3 final learning outcomes for this educational programme.

## **8.3 Funding and resource allocation**

The medical education organization **should**:

8.3.1 determine the responsibility and authority for managing the budget of the educational programme;

The medical education organization **should** manage the budget in such a way as to comply with:

8.3.2 mission and results of the educational programme;

8.3.3 ensuring the functional responsibilities of the academic staff and students.

## **8.4 Administrative staff and management**

The medical education organization **should** have an appropriate administrative staff, including their number and composition in accordance with qualifications, in order to:

8.4.1 ensure the implementation of the educational programme and related activities;

8.4.2 ensure proper management and allocation of resources.

The medical education organization **should**:

8.4.3 develop and implement an internal management quality assurance programme that includes consideration of needs for improvement;

8.4.4 regularly review and review management to improve quality

## **8.5 Requirements and provisions**

8.5.1 The medical education organization **should** comply with national legislation regarding the number and types of recognized medical specialties for which approved curricula are developed.

8.5.2 The medical education organization **should** identify approved postgraduate medical education programmes in collaboration with all stakeholders.

### ***Recommendations for describing standards:***

- ✓ *Describe the management structure of a medical education organization, as well as the position in it of the unit responsible for the implementation of the educational programme.*
- ✓ *What mechanisms exist to analyze the quality of education and correct the identified deficiencies.*
- ✓ *Describe the relationship between the structural unit responsible for the implementation of the educational programme and the medical education organization.*
- ✓ *Describe the country 's national level verification process. How will the educational organization implement these procedures in its organization?*
- ✓ *How is information about the procedures for checking the outcomes for students, teaching staff, administration communicated or will be communicated?*

### ***Definitions and explanations:***

- *Governance* means the act and / or structure governing the postgraduate programme and the institutions / faculties / divisions involved. Governance is primarily concerned with policy development, institutional and academic policy creation processes, and policy enforcement. Institutional and academic policies typically cover aspects such as the EP's mission, student recruitment policies, recruitment and selection policies, and decisions on interaction and linkages with practical health care, and other external relations.
- *Recognition as a competent specialist* – the level of preparedness of a graduate who has the right to independent practice as specialists, narrow specialists or experts.
- *Transparency* can be ensured through the dissemination of information through the website, information systems, print media, etc. at the same time, all participants in the process are aware of the management decision and can discuss it.
- *Academic leadership* is positions and persons in management and in management structures who are responsible for decisions on professional issues in the implementation of the programme.
- *The management of the study programme budget* depends on the budgetary practice in each organization and each country and will be linked to a transparent budget plan for the study programme.
- *Administrative staff* are positions and persons related to management and management structures who are responsible for administrative support in the adoption and implementation of policies and plans and, depending on the organizational structure of the administration, consist of the head and staff of the office or secretariat of programme representatives and professional leadership, financial managers, personnel from budget and accounting departments, officials and employees from planning departments, personnel

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management and IT specialists.

- *An internal quality control programme* involves consideration of the need for management review and further improvement.
- *A national authority* is established in accordance with national legal rules and regulations and is a government unit, organization, or other regulatory or professional body.
- *Relevant stakeholders* are national and local health authorities, universities, medical professional organizations and the public.

## **9. STANDARD "CONSTANT UPDATE"**

### **Criteria for assessment**

The Criteria of the Standard "Constant update" contain requirements for the process of renewal and continuous improvement in relation to: mission and outcomes, educational programme, student assessment, student support, academic staff / faculty, educational resources, administration and management.

The medical education organization as a dynamic and socially responsible institution should ensure that there will be:

9.1 initiate procedures for regular review and revision of content, results / competence, assessment and learning environment, structure and function, document and correct deficiencies;

9.2 allocate resources for continuous improvement

The medical education organization should ensure that: The medical education organization **should ensure that**:

9.3 the renewal process will be based on forward-looking research and analysis and on the results of their own study, assessment and literature on postgraduate medical education;

9.4 the renewal and restructuring process will lead to a revision of its policies and practices in line with past experience, current activities and perspectives.

The medical education organization in the process of renewal and continuous improvement **should ensure** that special attention is paid to:

9.5 adaptation of the mission and outcomes of postgraduate medical education to the scientific, socio-economic and cultural development of society for the future;

9.6 modification of the intended outcomes of postgraduate education in the selected health care field in accordance with the documented needs of the environment. Changes may include adjusting the structure and content of the educational programme, principles of active learning. The adjustment will ensure, along with the elimination of obsolete ones, the assimilation of new relevant knowledge, concepts, methods and concepts based on new advances in the basic biomedical, clinical, behavioral and social sciences, taking into account changes in the demographic situation and the structure of the population on public health issues, as well as changes socio-economic and cultural conditions;

9.7 development of assessment principles, methods of administration and

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number of examinations in accordance with changes in learning outcomes and teaching and learning methods;

9.8 adaptation of the recruitment and selection policy for graduate students, taking into account changing expectations and circumstances, human resource requirements, changes in the postgraduate education system and the needs of the educational programme;

9.9 adaptation of the recruitment and formation policy of the academic staff in accordance with changing needs;

9.10 improving the process of monitoring and evaluating the educational programme.

9.11 The medical education organization should ensure that the improvement of the organizational structure and management principles will be aimed at ensuring effective performance in the face of changing circumstances and needs, and, in the long term, at meeting the interests of various stakeholder groups.

***Recommendations for describing standards:***

- |  |
|--|
| <ul style="list-style-type: none"><li>▪ Describe recent and planned activities aimed at ensuring a timely response of the medical education organization to changing conditions.</li></ul> |
|--|



## BIBLIOGRAPHY

1. Standards and guidelines for quality assurance systems in the European Higher Education Area. European Association for Quality Assurance in Higher Education. Helsinki, Finland 2005, 36 p.

2. MacCarrick G. (2011) A practical guide to using the World Federation for Medical Education standards. WFME 2: educational programme. *Ir. J Med Sci.* (2010) 179 (4):489–491. E-Pub 2010 Sep 17 (Received 10.10.2011 from Springer).

3. World Federation for Medical Education (2012) Basic Medical Education WFME Global Standards for Quality Improvement. WFME Office, University of Copenhagen, Denmark. (The 2012 Revision)

4. WHO/WFME (2005) Guidelines for Accreditation of Basic Medical Education. Geneva/Copenhagen, 2005.

5. World Federation for Medical Education (2007) Global Standards for Quality Improvement in Medical Education. European Specifications For Basic and Postgraduate Medical Education and Continuing Professional Development. MEDINE Quality Assurance Task Force, WFME Office, University of Copenhagen, Denmark.

6. World Federation for Medical Education (2005) Promotion of Accreditation of Basic Medical Education A Programme within the Framework of the WHO/WFME Strategic Partnership to Improve Medical Education. WFME Office, the Panum Institute Faculty of Health Sciences, University of Copenhagen, 2005.

7. World Federation for Medical Education (1998) International standards in medical education: assessment and accreditation of medical schools' - educational programmes. A WFME position paper. The Executive Council, the World Federation for Medical Education. *Med Educ.* 1998 Sep.; 32(5):549-58.

8. H. Hallila et al. Международные стандарты ВФМО по улучшению качества в медицинском образовании: европейская спецификация, Дания, 2007, 80 с.

9. World Federation for Medical Education (2015) Basic Medical Education WFME Global Standards for Quality Improvement. WFME Office, University of Copenhagen, Denmark. (The 2017 Revision).

# ANNEXES

ANNEX 1

## Recommended Visit Programme Form

**AGREED**

**Rector** \_\_\_\_\_  
(name of medical education organization)

\_\_\_\_\_ name

\_\_\_\_\_ 201\_

**APPROVED**

\_\_\_\_\_  
**A.B. Zhumagulov**

**Director**

**Independent Agency for  
Accreditation and Rating**

\_\_\_\_\_ 201\_

### PROGRAMME OF IAAR EXTERNAL EXPERT COMMISSION VISIT

**TO** \_\_\_\_\_  
*name of medical education organization*

**Date of visit:** \_\_\_\_\_ 201\_

**Arrival day:** \_\_\_\_\_ 201\_

**Departure day:** \_\_\_\_\_ 201\_

Date and time	EEC work with target groups	Name and position of target group members	Location
_____ 201_			
Day time	Arrival of EEC members		Hotel
16.00 - 18.00	EEC preliminary meeting (distribution of responsibilities, discussion of	<i>IAAR external experts</i>	Hotel

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	key issues and visit programme)		
18.00 - 19.00	Dinner (EEC members only)	<i>IAAR external experts</i>	
<b>Day 1: _____ 201__</b>			
9.00-9.30	Discussion of organizational issues with experts	<i>IAAR external experts</i>	Main building, EEC office
9.30-10.00	Meeting with MEO head	Manager (full name)	Office of EO head
10.00 - 10.30	Meeting with MEO deputy heads (vice-rector, deputy director, vice-presidents)	<i>Position, name</i>	Main building, Conference hall
10.30 - 11.15	Meeting with structural division heads of the Ministry of Education	<i>Position, name (or Appendix No._)</i>	Main building, Conference hall
11.15 - 11.30	Coffee break with internal discussion	<i>only EEC members</i>	EEC office
11.30 - 12.45	Visual inspection of MEO	<i>Position, name</i>	Along the route
13.00 - 14.00	Lunch (EEC members only)	<b>Lunch break</b>	
14.00 - 14.15	EEC work		EEC office
14.15 - 15.00	Meeting with the EP heads	<i>Position, name (or Appendix No._)</i>	Main building, Conference hall
15.00 - 15.45	Meeting with department heads	<i>Position, name (or Appendix No._)</i>	Main building, Conference

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			hall
15.45 - 16.00	Coffee break with internal discussion	<i>only EEC members</i>	
16.00 - 17.00	Meeting with teachers	<i>Lists of teachers (Appendix No._)</i>	1-cluster: lecture hall 1 2-cluster: lecture hall 2 3-cluster: lecture hall 3
17.00 - 18.00	Questioning by teachers (in parallel)	<i>Teaching staff of accredited EP</i>	Computer class 513- 519
17.00 - 18.00	EEC work (discussion of results and summing up of Day 1)		EEC office
18.00 - 19.00	Dinner (EEC members only)		
<b>Day 2: _____ 201 _____</b>			
09.00 - 09.30	EEC work (discussion of organizational issues)		EEC office
09.30 - 12.30	Visiting departments	<i>Position, name</i>	Academic building 5  Academic building 2
09.30 - 12.30	Visiting classes	<i>According to schedules of accredited EP</i>	Academic buildings 2, 5
12.30 - 13.00	EEC work (exchange of views)		EEC office
13.00	Lunch (EEC	<b>Lunch break</b>	

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- 14.00	members only)		
14.00 - 15.00	Meeting with students	<i>Students of accredited EP (Appendix No._)</i>	1-cluster: lecture hall 1 2-cluster: lecture hall 2 3-cluster: lecture hall 3
15.00 - 16.00	Student survey (in parallel)	<i>Students of accredited EP</i>	Computer class 513-519
15.00 - 16.00	Meeting with employers	<i>Representatives of government and financial institutions, heads of manufacturing enterprises and organizations (Appendix No._)</i>	Lecture hall 1
16.00 - 16.30	Coffee break with internal discussion	<i>only EEC members</i>	EEC office
16.30 - 17.00	Meeting with graduates	<i>Graduates - representatives for each EP (Appendix #_)</i>	Lecture hall 1
17.00 - 18.00	EEC work (discussion of estimated parameters of profile, discussion of results and summing up Day 2)	<i>EEC members only</i>	EEC office
18.00 - 19.00	Dinner (EEC members only)		
<b>Day 3: _____ 201 _____</b>			
09.00 - 09.30	EEC work (discussion of organizational issues)		EEC office
09.30 - 12.30	Visiting practice bases, branches of departments	<i>Name, practice base</i>	<i>Appendix No._</i>

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	(clinical bases, educational and clinical centers)		
12.30 - 13.00	EEC work (collegial agreement and preparation of oral preliminary review on results of the EEC visit)		EEC office
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 EO leadership	<i>Heads of the university and structural divisions</i>	Main building, conference hall
18.00 - 19.00	Dinner (EEC members only)		
As scheduled	<i>Departure of the EEC members</i>		
<b>201</b>			

INDEPENDENT ACCREDITATION AND RATING AGENCY

**Example of a cover page**

Name of medical education organization

APPROVED by  
Rector  
\_\_\_\_\_ Name

signature  
\_\_\_\_\_ 20\_\_  
stamp

**SELF-ASSESSMENT REPORT**

**for programme accreditation of  
"name and code of the EP"**

city, year

## **Memo for drawing up a Self-Assessment Report of educational organization**

*The report shall be submitted according to the following structure*

### **Title page indicating name of educational organization and Accreditation Body (1 page)**

**A statement confirming reliability and accuracy of the data submitted signed by the first head of educational organization (Annex 1) (1 page)**

**Content (with automatically edited table of contents) (1 page)**

**Educational organization profile (formed in accordance with requirements of Section 6 of this Manual) (1-2 pages)**

#### **I Symbols and abbreviations (1-2 pages)**

*Provides a list of symbols and abbreviations used in text of the Self-Assessment Report.*

#### **II Introduction (1 page)**

*Basis for passing the external assessment, result of the previous accreditation (accreditation body, accreditation standards according to which external assessment was carried out and accreditation status) in case of re-accreditation shall be indicated.*

*A brief description of methods used in development of the Self-Assessment Report of the educational organization (appointment of a working group, involvement of stakeholders, etc.) shall be reflected.*

#### **III Presentation of education organization (1-2 pages)**

*A brief history, information about types of activities of the educational organization, directions of educational services indicating quantitative data of the EP by levels of education, information about position and status of the educational organization in national and international educational space.*

*Uniqueness of internal quality assurance system functioning in organization of education shall be noted.*

#### **IV Previous accreditation (1-5 pages)**

*A brief description of results of previous accreditation shall be given with analysis and degree of implementation of each EEC recommendation (for EP, a brief description of results of the previous accreditation with analysis and degree*

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of implementation of each EEC recommendation in the context of EP shall be given).

## **V Compliance with Standards of programme accreditation (40-50 pages)**

*Evidence and analytical material developed based on the results of the educational organization self-assessment for compliance with the criteria of each standard of programme accreditation shall be submitted. Result of the analysis of EO activity current state shall be reflected. Material shall be presented on effectiveness of functioning of the internal quality assurance system and effectiveness of its mechanisms in accordance with the standard criteria.*

### **5.1 Each standard:**

*Shall contain evidence and analytical materials on compliance of the educational organization with the criteria of this standard, thus consistently shall reflect the results of self-assessment.*

*Substantiation of the education organization positions (strong, satisfactory, presupposes improvement, unsatisfactory) shall be given in accordance with assessment of the criteria by working group on self-assessment of the education organization. In case of "suggests improvement" and "unsatisfactory", the proposed measures to strengthen the position shall be indicated.*

*At the end of each section, conclusions of the EO working group on the criteria shall be given, for example, "According to the Standard " ..... " 7 criteria are disclosed, of which 3 have a strong position, 3 - satisfactory and 1 - suggests improvement".*

## **VI SWOT- ANALYSIS (1-5 pages) (does not apply to PA)**

*Analysis of strengths and weaknesses, opportunities and threats identified during the EO self-assessment for compliance with institutional accreditation standards shall be presented.*

## **VII Self-assessment commission report (7-8 pages)**

*The assessment table "Parameters of programmes profile" (Section "Conclusion of Self-Assessment Commission") shall be provided with a note on the EO compliance criteria (strong/satisfactory /suggesting improvements/unsatisfactory) of the assessment table, considered as conclusions of the self-assessment working group.*

**Self-Assessment Report attachments** (shall be drawn up in a separate file in accordance with the requirements of Section 2 of this Guidelines).

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