

# **REPORT**

on the results of the work of the External Expert Commission of "IAAR" at the Semey State Medical University of specialized accreditation of educational programs of specialties of the residency "6R113600 - Urology and andrology, including children's" and "6R110900 - Pediatric Surgery" from "15" to "17" May 2018

# INDEPENDENT AGENCY OF ACCREDITATION AND RATING External expert commission

Addressed to Accreditation council of IAAR



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# (I) LIST OF SYMBOLS AND ABBREVIATIONS

SSMU – RSE on REM Semey State Medical University

BEME -Best Edvance Medical Education

JSC RSTL - Joint Stock Company Republican Scientific and Technical Library

AEPMS "SIRIUS" - automated educational process management system "SIRIUS"

AMS – administrative and managerial staff

BD – basic disciplines

BME - basic medical education

RS- rating system

IDC – intradepartment control;

EKR- East Kazakhstan region

SAC - state attestation commission;

SSFE - State standard of further education

SSE RK- State standard of education of the Republic of Kazakhstan;

JD - job description;

EFQM - European Foundation for Quality Management

ILS – information library system

IMCD- integrated management of childhood diseases;

FSC- final state certification

LI - letter of instruction;

IRBIS - information library system

IWC - individual working curriculum

IMS - integrated management system

IET – innovative educational technologies

CB - clinical base

CMS – control and measuring system

CEP - committee of educational programs

CED – catalog of elective disciplines

LCN – local computing network

TPI - therapeutic and preventive institution

MH RK - Ministry of Healthcare of the Republic of Kazakhstan

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

IS ISO - International Standard ISO

MTE – material and technical equipment

RA - research activity

SCC - Scientific and Clinical Council

STP – scientific and technical program

SRW-scientific research work

NLA – normative legal act

OP – educational program;

ODP – educational program of the residence

OR - office-registrar

AAR - assessment of the access rating

CMSD – quality management system department

OSCE – objective structured clinical examination

ES – educational services

ITD – Information Technology Department

PD – personnel department

PD - profiling disciplines

PFPE – postgraduate and further professional education

PBL – problem-based training

Faculty-faculties

PD - profiling disciplines

PC - admission committee

WC - working curriculum

SWOT - strengths, weaknesses, opportunities, threats

RSW - Resident's self-work

CBL - Case-based-learning

Media - the media

QMS - quality management system

SU - structural unit

TMT - technical means of training

SC – standard curriculum

TBL - Team-based-learning

EMW- educational and methodological work

EMCD – Educational-methodical complex of discipline

EMCS - educational-methodical complex of specialty

UMC - educational and methodological center

EMC - educational-methodical council

UESL - united educational and scientific laboratory

SC - Scientific Council

HD - health department

TCC - Training and Clinical Center

PBL - Problem-Based learning

TBL - Team-Based Training

**CBL** - Case-Based Training

PrBT - Project-based training

OSPF - Objectively structured practical exam

OSCE-Objectively structured clinical exam

#### (II) INTRODUCTION

In accordance with the order of the IAAR No. 37-18-OD of 09.04.2018, an external expert commission (EEC) visited SSMU from "15" to "17" May 2018. The evaluation of the correspondence of the educational programs of the residency to the standards of specialized accreditation of the IAAR was carried out in the following specialties: "6R113600 - Urology and andrology, including children's" and "6R110900 - Children's surgery".

### The composition of the EEC:

- 1. **Chairman of the commission** Kurmangaliev Oleg Maratovich, d.m.s., professor of the Department of Surgical Diseases No. 2 with urology at West-Kazakhstan State Medical University named after Marat Ospanov, chief urologist of Aktobe region (Aktobe);
- **2. Foreign expert** Kanyshai Nurmamatovna Stambekova, PhD, associate professor of the Department of Urology and Andrology of pre- and postgraduate education, Head of the teaching and methodical department at Kyrgyz State Medical Academy named after IK Akhunbaev (Bishkek);
- **3. Expert** Khabibulla Bukeevich Bismildin, PhD, associate professor of the Department of Pediatric Surgery at Karaganda State Medical University (Karaganda);
- **4. Employer** Ardak Mubarakovich Kuzekov, Director of RSE on REM "Pavlodar Regional Hospital" (Pavlodar);
- **5. Employer** -Daryn Tokhtarkhanovich Bakhtybaev, deputy director for quality, expert of RSE on REM "Emergency hospitals" (Semey);
- **6. Student** Azamat Maratkhanovich Nurmakhanov, 2-year-resident of training in the specialty "Urology and andrology, including children's"; JSC "Medical University Astana" (Astana);
- **8. Observer from the Agency** Alissa Satbekovna Zakenova, Ph.D., the head of medical projects (Astana).

The EEC report contains an assessment of the correspondence of the educational programs of the educational organization to the criteria of the IAAR, the recommendations for further improvement of educational programs, and the profile of the educational programs.

# (III) PRESENTATION OF THE ORGANIZATION OF EDUCATION

Semey State Medical University of (formerly the Semipalatinsk Medical Institute) is one of the oldest educational institutions in the Republic of Kazakhstan with a 60-year history. It was formed by Decree No. 226 of the Council of Ministers of the USSR of September 2, 1952 and Order No. 913 of the Ministry of Health of the USSR of October 13, 1952.

The University implements educational programs of higher professional education - 5, master's programs - 4, residencies - 18, doctorates - 2. Preparations are conducted in the state, Russian and English languages. The form of education is full-time. Teaching staff consists of more than 360 full-time teachers, rate of scientific grades amounts to 50%.

The total number of students enrolled in the university is about 5.5 thousand people. There are 5 dormitories, University Hospital, branches in the cities of Pavlodar and Ust-Kamenogorsk. Among the university students there are more than 700 foreigners from India, Pakistan, Czech Republic, Mongolia, Russia, China, Uzbekistan and Tajikistan.

Training of students in clinical skills is carried out on the basis of the Clinical Training Center, on its own clinical base - the University Hospital of the SSMU, as well as over 30 clinical bases assigned to the university.

The implementation of the scientific discoveries and research are carried out within the framework of the University Hospital, a multi-disciplinary clinic that includes 15 stationary departments for 500 beds, including 5 children's, 9 adults, 8 paraclinical departments, a multi-service department, a day hospital for 35 beds, consulting and diagnostic out-patient clinic, pediatric traumatology and orthopedic station.

The medical staff of the University Hospital has a high staff potential - 82.9% of doctors have the highest and first qualification categories, in the team there are 2 doctors and 7 candidates of medical sciences who successfully combine pedagogical activity with medical one.

University Hospital of SSMU is the largest multi-discipline curative, educational and pedagogical institution in the Republic. Every year more than 16,000 patients receive specialized care in inpatient departments, including 20% (more than 3 thousand patients) from remote rural areas. Urgent children's surgical, otolaryngological children's and adult, maxillofacial surgery, neurosurgical, angiosurgical, cardiosurgical services are the only specialized profile departments serving the Semey region.

Modern methods of treatment are widely introduced in the hospital, such as endovideosurgery, endovascular surgery, cardiosurgery, and plasmapheresis. Patients with ACS receive qualified specialized care and high-tech medical services in our institution, where the only angiographic installation in the Semey region is located with an X-ray endovascular operating room. Since 2016 the system "Electronic clinic" has been introduced, there is a possibility of preliminary recording to a specialist. The AIS "Electronic Case History" was introduced and is functioning. For the convenience of visitors, the IS "Electronic queue" is installed. On the basis of the Hospital, a training and resource center with Internet access to the Cochrane Library is organized.

The university has an extensive infrastructure, which includes administrative and educational buildings, clinical facilities, laboratories, auxiliary facilities, dormitories: four own educational buildings in the city of Semey, an educational building in Pavlodar (on the rights of economic management); four own hostels (3 - in Semey, 1 - in Pavlodar), etc.

The university has a high status of a research center in the field of medicine, biology, biochemistry, etc. The university is constantly working to expand international cooperation. Contracts have been signed by foreign universities of the USA, the UK, Japan, Russia, etc.

As part of the implementation of the Roadmap, since 2016 the university has been working closely with Saint Luis University (USA), with which a long-term memorandum on strategic partnership has been concluded in five areas: the professional development of the faculty; development of a university hospital; development of educational programs; improvement of management policy; the introduction of new approaches to learning.

In order to obtain the status of a research university, the priority scientific direction is to study the consequences of nuclear tests. There are 5 grants, financed by the Ministry of Education and Science of the Republic of Kazakhstan, for a total of over 87 million tenge. Scientists of the University have been working in a relatively new field of research since 2017 - clinical research. At the moment, 3 multicenter randomized clinical trials of rheumatological and anti-tuberculosis drugs are being implemented in accordance with GCP standards. To comply with ethical standards and regulations, the University has a Local Ethics Commission that conducts an examination of all types of scientific research and dissertational works conducted at the university.

The quarterly scientific and practical medical journal "Science and Health Care", founded in 1999, as well as the newspaper "Medicine for All" is published in SSMU in accordance with the Law of the Republic of Kazakhstan "On Mass Media" and the Charter of the SSMU.

The Alma-mater Alumni Association was established, which, together with the University's rector, established the medal "Kurmetti Tulek" (Honorary University Graduate). The Association provides support to gifted students, from the Association's fund, orphans receive a scholarship, free complex lunches in the student dining room.

Forms and methods of university management: Academic Council of the University and faculties, Educational Methodological Council, Supervisory Board, Board of Trustees, Council of Wise Men "Akylman", Student Self-Government, Parents' Committees.

The university management ensures the future of the university through the Strategic Program of SSMU for 2017-2021, which defines the Mission, Vision, and also through the Policy and the Goals in the field of quality.

# (IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

Previously, there was no accreditation in this institution.

# (V) DESCRIPTION OF EEC VISIT

On May 14, 2018, a preliminary meeting of the members of the External Expert Commission of the IAAR took place. During the organizational meeting, the visit program was specified, the responsibility of the EEC members was distributed. A brief overview of the reports on the specialized self-assessment of the EP was carried out, additional information was identified which should be requested from the university to fully inform the EEC members when carrying out specialized accreditation.

To obtain objective information on the evaluation of the university's activities, the following methods were used by the EEC members: visual inspection, observation, interviewing of employees of various structural divisions, teachers, trainees, graduates and employers, questioning of faculty and residents.

The visit of the external expert commission to the university was organized in accordance with the program coordinated with the chairman of the EEC and approved by the rector of the university. The work of the EEC was carried out from May 15 to May 17, 2018.

In order to obtain objective information about the quality of educational programs and the entire infrastructure of the university, the content of the self-assessment reports was clarified: the rector of the university, Yersin Tursynkhanovich Zhunussov, the vice-rector for educational and methodical and educational work, Aigul Bitimbaevna Zhunussova, the vice-rector for scientific and clinical work, Tolkyn Alpysbaevich Bulegenov, vice-rector for strategic partnership and international cooperation - Nurzhan Sarsynbekovich Aidosov, vice-rector for organizational and economic work - Andrey Sergeyevich Barsukov, dean of postgraduate and further education - Gulnaz Nursoltanovna Tanatarova, dean of undergraduate education - Ainash Saparovna Orazalina. Also, meetings were held with the director of the Pavlodar branch of the SSMU - Yernar Karimkhanovich Kairkhanov, the dean of the faculty of further education of the PB SSMU and the head of the department of surgery No.1 - Olga Grigoryevna Tashtemirova, the head of the department of special disciplines - Zhannar Amangeldinovna Zhagiparova, teachers of residency departments, residents and doctoral students, as well as employers.

During the conversation with the rector, pro-rectors, SC members, the experts received the necessary information supplementing the self-assessment reports. The organizational structure and strategic plan for the development of the university were introduced to EEC. They asked questions about the problems of implementing accredited educational programs and ways of solving, and proposals for continuous improvement. The importance of international cooperation for the development of academic mobility, exchange of the best technologies in the training of residents was underscored.

The next stage of the EEC's work was conducting interviews with the teaching staff, residents, employers. Each interview was attended by a sufficient number of people to create an idea of the practical implementation of the educational program and its impact. In particular, the residents expressed their opinion about teachers, the organization of practical classes in an interactive form, the provision of methodological materials, access to clinical resources, patient monitoring, etc.

The general opinion of employers was the satisfaction with the quality of training graduates of different specialties.

A total of 52 people took part in the meetings.

Table 1 - Information on the number and categories of meeting participants

Category of participants	Number
Rector	1

Director	1
Deputy director	1
Chief Physicians	2
Deputy Chief Physician	2
Vise-rectors	4
Deans	4
Dean Deputies	1
Heads of Chairs	4
Responsible for the course	2
Teachers of departments	17
Residents	4
Graduates	0
Employers	2
Heads of departments	3
Heads of the library	3
Heads of the ECC	1
Total	52

During the work of the EEC, a visual inspection of the university infrastructure was carried out: classrooms, computer classes, a library, a reading room, a sports hall, medical centers, food outlets, and a practical skills center.

During the visit to the university library, the EEC members got acquainted with the work and library resources, including electronic ones, the rules for entering international databases. The work of the office registrar was demonstrated. Thus, the EEC obtained evidence of compliance with the accreditation standards of the IAAR, which are relevant to the mission, the final results of the training, the educational program, administration and administration, and educational resources.

To conduct educational and professional practice, the university concluded agreements with the heads of medical and preventive organizations, established a close relationship with the basic MO. Social partnership in the field of medical education is aimed at bringing the level of professional training closer to the needs of employers.

When visiting practical bases, experts got acquainted with the material and technical base of medical organizations, visited the administrative building, specialized offices where residents undergo practical training. The members of the EEC met the chief physicians, chief and senior nurses, head of offices. It is noteworthy that MOs not only provide jobs for the duration of training, but also actively participate in adjusting the content of educational programs, as well as in assessing the knowledge, skills and habits of residents. Feedback from the leaders of the MO on the residents and graduates of the university are positive.

May 15, 2018 according to the work plan of the EEC, in order to validate these self-assessment reports, visits were made to practical classes at the departments, acquaintance with clinical databases, study of the possibilities for developing practical, communicative skills of students.

Practical training bases for accredited programs were visited.

In the specialties "Urology and andrology, including children's" and "Children's surgery", experts visited the Pavlodar branch of the SSMU, Pavlodar regional hospital named after G. Sultanov and the Children's Regional Hospital. These are unique medical complexes that combine advisory-diagnostic, laboratory, treatment-and-preventive stages of patient care, the project of which is implemented within the framework of public-private partnership.

Hospitals have an information system that provides electronic workflow and automation of personnel workplaces. Here there are several software: KMIS (for registration and patient management on the basis of GAFMC).

On the basis of hospitals, the conditions for the passage of the residency in the specialties "Urology and andrology, including children's", and "Children's Surgery" are created, the staff of

which are engaged in the preparation of both residents and practicing doctors, conduct consultative reception of diagnostically complex patients, which allows improving training specialists of urologists-andrologists and children's surgeons, to conduct research work with students of undergraduate, internships, postgraduate education, organize master classes for n practicing doctors, scientific and practical conferences, round tables on topical topics of urology and andrology, pediatric surgery.

For the convenience of patients in the structure of the Clinical Database, it is possible to conduct a wide range of laboratory and instrumental studies for all segments of the population of all ages.

Expert work in clinical databases began with an introduction to the staff of the residence. We were met in Semey: by responsible for the course of urology and andrology, including children - Akkaliev Merhat Ntabekovich; in Pavlodar by responsible for the course of urology and andrology, including children - Sadykov Nariman Maratovich.

15.05.18. experts of the EEC attended the training of the 1-year resident of specialty 6R113600 - "Urology and andrology, including children's". The lesson was attended by a learning resident: Abzelbekov Zhandos Muratbekovich.

The experts got acquainted with the educational-methodical documentation of the department on the specialty "Urology and andrology, including children's", the portfolio of the resident. As a result of visiting the department, evidence was received of the active participation of the resident in practicing practical skills, access to training conducted manipulations, a sufficient number of patients per resident, and good equipping of study rooms.

In order to motivate and stimulate the research activities of students, the University finances their participation in national and international conferences. Residents conduct research work in the Renal Center of Semey and at the main base of the department. Resident - urologists regularly participate in online seminars on basic and advanced capabilities of Thomson Reuters information resources for scientific activities. Resident-urologists take an active part in the meetings of the Association of Doctors - Urologists of the East Kazakhstan region. The experts also got acquainted with the equipment of the educational and clinical center of SSMU and accessibility of mastering and training practical skills on simulators for the resident. We clearly saw the completeness of the library of this University. They conducted a questionnaire and interview with the faculty and the resident.

16.05.18. experts of the EEC attended the training sessions for residents of the first year of specialization 6R113600 - "Urology and andrology, including children's" and "6R110900 - children's surgery." The lesson was attended by studying residents: Niyaztaev Shukhrat Madikarimovich, Musin Zhandos Sarkytuly, Dauletova Assem Batyrkhanovna in PB of SSMU.

The regional clinical hospital serves the population of the Pavlodar region, providing specialized care to patients arriving in planned and emergency procedures. To organize the educational process, the departments are provided with a conference hall for 150 seats, training rooms that meet sanitary and hygienic standards and fire safety. At the clinical base, all the necessary labor conditions have been created for quality education, taking into account the residents' own needs, including health.

During the visit, the experts visited the therapeutic and surgical buildings, got acquainted with technologically highly equipped clinical and biochemical laboratories, endoscopic, gastroenterological, urological and children's surgical departments.

They had conversations with the chief doctor of the Pavlodar RCH named after. G. Sultanova - Kosumbaeva Shuga Zekenovna, Sadykov Nariman Maratovich - head of the department of urology, deputy. director for quality control of treatment - Shahin Serik Zhumageldinovich. In the course of the conversation, the head physician explained in detail the interaction with the SSMU in the teaching and practical work of the resident. She told about further development plans in this direction. On the equipment of the hospital.

In the Pavlodar children's regional hospital, a conversation was held with Kuzekov Ardak Mubarakovich - the chief doctor of the Pavlodar regional children's hospital, Gulsara Kayratnova

Tapisheva - deputy head physician for medical work, Ramazanov Yerlan Amangeldinovich - head of the department of pediatric surgery. The head physician in detail acquainted with the equipment, with further development plans, about trust and assistance to residents in obtaining practical skills and theoretical knowledge.

During the conversation, it was revealed that the administration of Pavlodar regional children's hospital and Pavlodar RCH named after Sultanov, Pavlodar works in close contact with SSMU

Many hospital doctors conduct practical classes at their workplaces, actively participate in the implementation of the EP, participate in assessing the quality of knowledge and skills of residents. On the specialty "Urology and andrology, including children's", 1 resident is trained. On the specialty "Pediatric Surgery" 2 residents are studying. We attended the practical training of residents of the first year of study with teachers and observed the work of residents within the residency for accredited specialties under the guidance of clinical mentors (working at the patient's bed, filling out medical records). We talked about the practical training, skills they acquired.

EEC acquainted with the educational and methodological documentation of the departments on the specialties "Urology and andrology, including children", "Children's surgery", a portfolio of residents. Obtained evidence of active participation of the resident in working out practical skills, access to operating equipment, a sufficient number of patients per resident, good equipment of study rooms.

- 1. During the work of the EEC, a visual inspection of the infrastructure of the university, the branch and clinical facilities was conducted: classrooms, an operation room, an intensive care unit, a wake-up room, a room reserved for recreation and self-training of residents. During the visit, the educational and methodological complex of disciplines of the educational program was studied in the specialties "Urology and andrology, incl. Children's and Children's Surgery.
- 2. During the visit to the clinical base, the issue of interaction of the Semey State Medical University with practical health care was discussed. There is a close relationship with medical organizations. Social partnership in the field of obtaining in-depth medical education within the residency specialties "Urology and andrology, incl. Children's and Children's Surgery. The educational program is aimed at approximating the level of training of personnel to the needs of employers, strengthening the university's links with practical health care.
- 3. With the purpose of providing the personnel potential of the region, medical organizations have concluded contracts with SSMU for training 3 residents of the specialty "Urology and andrology, incl. children "and" Pediatric surgery "on a paid basis in conditions of multi-field clinics, which the hospital itself produces.
- 4. At the clinical bases of the department, which implements the educational program for accredited specialties, the necessary conditions have been created for qualitative training.
- 5. When visiting the clinical base of the SSMU on the basis of the Pavlodar branch, the experts got acquainted with the material and technical base of the medical organization. High-level equipment that allows residents to master key and professional competences in the field of urology and andrology, as well as pediatric surgery.

During the visit, experts noted the strengths of the process of training residents of specialties "Urology and andrology, incl. children's »» and «Pediatric surgery». The experts singled out the constructive and effective relations between the clinical bases and the university due to which qualitative training of residents is carried out. A positive practice is the active process of academic mobility. Evidence of this is the training of residents in Baskent University, Ankara, Turkey, at the expense of the University.

In accordance with the accreditation procedure, 10 teachers and 4 residents were interviewed during the EEC work.

To work EEK were created comfortable conditions, access to all necessary information resources is organized. The Commission notes the high level of the corporate culture of the university staff, the high degree of the team's openness in providing information to the EEC members. Recommendations for improving the activities of the university, developed by the EEC

on the results of the examination, were presented at a meeting with the administration on May 14, 2018.

#### (VI) CORRESPONDENCE TO THE SPECIALIZED ACCREDITATION STANDARDS

### 6.1 Standard «Mission and leadership»

#### The evidence

All the activities of the university are aimed at realizing its mission. The strategic goal and objectives of the mission correspond to the goals and objectives of the university.

The mission of educational programs of the residency is carried out in accordance with the mission of the SSMU and consists in training professionals who meet the requirements of the national health system and international standards, through the introduction of innovations in education, science and practice.

Goals, actions to achieve the goals and target indicators that contribute to the improvement of the system for the training of residents in the SSMU are reflected in the priority areas of the "Strategic Plan of the State Medical University for 2017-2021" and are implemented through the improvement of educational programs, the expansion of academic mobility, the development of educational technologies and improving the evaluation of students' learning achievements, broad involvement of students in the professional environment and improving practical training.

The official source of information about the university is the website http://www.ssmu.kz, which is open, publicly available for prompt and objective information to the public about the activities of the University.

University in forming the development plan of the OP attracts the teaching staff of the departments / courses, employers, students. Employers annually formulate their needs in specialists, the requirements for their training, and are actively involved in the process of adjusting work curricula in the specialty, taking into account the need for practical health care, making their proposals for change.

When forming the development plan for the EP, transparency of processes is noted, while information on the content of the EP is communicated to stakeholders.

Specialty programs are held in public discussions with representatives of all stakeholders, taking into account the identified shortcomings, remarks and proposals, adjust and introduce amendments.

In this organization, there is an order of approval, periodic review (review) and monitoring of educational programs and documents regulating this process. The university documents all the processes regulating the implementation of the EP. Every employee knows his duties, functions and rights.

The presence and effective functioning of the information and feedback-oriented information and communication system, oriented to the trainees, employees and stakeholders, demonstrates the functioning of the quality assurance system, analyzes the external and internal environment. The degree of satisfaction of teachers, residents is determined in the course of sociological monitoring. Monitoring is organized and conducted in accordance with established requirements. Surveys and questionnaires are conducted among residents, graduates, employers and teachers in order to identify their views on the quality of the professional activities of teachers, the quality of management activities and other important issues of the educational process.

The mission, the objectives of the EP and the expected learning outcomes of the trainees are periodically reviewed to reflect not only the standards for medical specialties, but also the needs and expectations of the stakeholders.

Training in the residency is carried out in full-time form, the term of study is 3 years depending on the specialty.

Postgraduate education program of the residency in the specialties implemented at the university is based on normative documents, the State Educational Establishment of the Republic of Kazakhstan - 2015, standard curricula of specialties approved by the Ministry of Healthcare of the

Republic of Kazakhstan. Autonomy in compiling an educational program is achieved through a component of choice.

The results of training residents on the specialties of residency are formed at the level of the entire educational program, at the module level, a separate discipline.

The need for graduates of the residency is confirmed by the receipt of applications for specialists from medical and preventive institutions in Semey and Pavlodar.

To assess the final results of training at the university, questionnaires and interviews of employees of medical and preventive institutions and other categories of stakeholders about the clinical competence of graduates of the residency are conducted.

# Analytical part

By the standard "Mission and leadership" we want to note that the success of the implementation of the EP is determined mainly on the basis of planned, purposeful and effective implementation of the development plan for the EP, which should accordingly be the most transparent and accessible to all stakeholders.

Continuous development and adjustment of the EP is carried out, taking into account the needs of interested persons and students. In the development of the EP, they are consistent with the national development priorities and the development strategy of the university.

# Strengths / best practice

The strengths include:

- The University attracts representatives of stakeholder groups, including trainees, faculty and employers, to the formation of the EP.
- The University demonstrates the degree of implementation of the principles of sustainability, efficiency, effectiveness, priority, transparency, responsibility, delegation of authority.
- The management of the EP demonstrates evidence of openness and accessibility for students, faculty, employers.

# **REC** recommendations:

• To intensify the implementation by residents of scientific works on the results of their own research, design and release of articles and participation in scientific forums.

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

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strong - 11
satisfactory - 7
suggest an improvement of-1
unsatisfactory -0
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# 6.2 Standard "Educational program"

#### The evidence

The university defines the content and volume of educational disciplines rather well.

The quality of training of specialists and their professional competence is confirmed by the characteristics and feedback from the leaders of the medical organizations.

In the organization of education, when forming and updating educational programs, the opinion of students, the interests of employers is taken into account. In accordance with the standard curriculum developed WEP and working training programs. At the basis of the WTP is the SES, the opinion of teachers and employers is taken into account. SEPs include a list of mandatory disciplines with an indication of the number of hours, regulate the ratio of basic, profiling disciplines and elective components, determine the scope of the discipline.

The training is conducted in three languages: state, Russian and English.

Individual assistance and counseling for students on the issues of the educational process are tracked, and conditions are created for effective development of the EP. The educational process takes into account the individual characteristics of students, is supported in the implementation of the educational process and is a monitoring system for their achievements.

During the meetings of the commission with residents and employers, it was concluded that it is necessary to expand the amount of hours for mastering practical skills in clinics.

Trainees can get advice from teachers, as well as write on the rector's blog, which is posted on the university's website and receive a detailed answer.

# Analytical part

The standard "Educational program" is developed in accordance with the mission, objectives and expected results of the learning residents. The implementation of the EP allows to provide a sufficient material and technical base, human resources, active cooperation with healthcare organizations. By the standard, one can note the qualitative and quantitative composition of teachers for the implementation of the EP, the high level of professional development of teachers and feedback from the heads of practical bases on the adequate level of training of specialists. Increase the hours for mastering practical skills will strengthen the EP.

# Strengths / best practice

- The management of the EP demonstrates the presence of a professional context in the content of the training disciplines;
- The leadership of the EP demonstrates an effective balance between theoretical and practiceoriented disciplines;
  - Disciplines cover all issues, problems in the field taught;
- The structure of the EP provides for various types of activities, the content of which promotes the development of the basic and professional competencies of students taking into account their personal characteristics;
- The management of the EP provides equal opportunities for students, including regardless of the language of instruction
- The management of the EP ensures the availability and effective functioning of the system of individual assistance and counseling of students on the educational process
  - Management creates conditions for the effective development of the EP
- The management of the EP demonstrates the use of the advantages, individual characteristics, needs and cultural experience of students in the implementation of the EP
- The management of the EP demonstrates individual support for students in the implementation of the EP
- The management of the EP monitors the satisfaction of residents, managers of medical organizations and employers.

#### REC recommendations:

• Expand the catalog of elective disciplines: for example, include neuro-urology, phthisiourology, and increase the amount of andrological component and credits for studying pediatric urology within elective course.

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

Strong-17 Satisfactory - 6 Supposed to improve - 2 Unsatisfactory-0

#### 6.3 Standard «Assessment of residents»

# The Evidence

To evaluate the educational achievements of the residents, the SSMU has developed criteria, regulations and procedures in accordance with the goals and objectives set for the implementation of educational programs in accordance with the directive, normative and internal documents:

1. The Law of the Republic of Kazakhstan "On Education" of 27.07.2007 No. 319-111.

- 2. Resolution of the Government of the Republic of Kazakhstan from 17.05.2013 No. 499 "Standard rules for the activities of organizations implementing higher professional education programs"
- 3. State Standard of the Republic of Kazakhstan-2015 on Residence
- 4. Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 125 dated March 18, 2008 "Standard Rules for Conducting Current Monitoring of Academic Progress, Intermediate and Final Certification of Students"
- 5. Order of the Ministry of Education and Science of the Republic of Kazakhstan № 152 dated April 20, 2011 "On approval of the Rules for the organization of the educational process on credit technology training."
- 6. The order of the Ministry of Education and Science of the Republic of Kazakhstan №198 of 2.06.2014 "On approval of the Rules for the organization of the educational process on credit technology training."

The policy for assessing residents is formulated in the Regulation on the residence of the SSMU (Annex 1.8), it defines the general objectives and principles for assessing residents. Details of evaluation methods and criteria for assessing the competencies of residents are presented in a document corresponding to the State Education Standard - 2015. Methods for assessing residents are described in the modular educational program of the residency in the specialty "Urology and andrology, including children's" in accordance with the order of the Minister of Education and Science of the Republic of Kazakhstan dated April 20, 2011 No. 152 "On Approval of the Rules for the Organization of the Educational Process on Credit Learning Technology", with changes from June 2, 2014 No. 198, as well as in the Education Strategy of the specialty of the residency, approved at the meeting of the UMS of the PF of the SSMU. The methods and forms for assessing the competencies of residents, adopted before 2015, are formulated in the Education Strategy of the specialty of the residency approved at a meeting of CEP and EMC.

The current monitoring of the knowledge of residents is carried out through oral interviews, interviews, clinical analysis of the patient, and analysis of situational tasks. Intermediate (boundary) control is carried out by oral interview.

The final control of the discipline/module is carried out after the completion of the academic discipline / module. By the decision of the Academic Council of the SSMU, the form of final control of all specialties of the residency is an examination conducted in the form of computer testing at Sirius.

The forms of control are set out in the syllabus, which are developed on the basis of modular educational programs for students in the SEP-2015. Control and measuring tools (questions of the boundary, final control) are made in accordance with the modular educational program.

After completing the exam for each discipline / module, the trainee is presented with a final grade (final control). The reliability of the test is assessed in the ITEMAN 4 program, and based on the results of the evaluation (if the Cronbach's coefficient does not reach the required value), the tasks within the option for future testing are reconfigured. In addition, the quality of individual test tasks with the definition of an index of complexity, discrimination, and distraction analysis is assessed in the ITEMAN 4 program. Substandard tasks are removed from the bank or corrected. The content validity of the means for carrying out the intermediate certification (test tasks, clinical situations - cases, practical skills) is assessed by independent experts present at the exam.

In addition, in accordance with the Regulation of the standard procedures of the SSMU, the teachers of the disciplines provide the test tasks applied for in the examination to the Test Committee for review.

A resident who does not agree with the result of a theoretical examination shall appeal no later than the next day after the examination.

During the year there is an appeal committee, which includes the Vice-Rector for the CSW, the Dean of the PFE, the head of the legal and passport-visa work, the head of the Information Technology Center, the head of the Registrar's Office. The Appeals Commission examines applications from residents regarding the procedure for examinations. In the event complaints and

applications are received from residents on the incorrectness of examination questions, etc., the commission on the order of the dean of the PFE includes teachers-specialists in the subject discipline.

The final certification of students in the university is carried out within the terms provided by the academic calendar and working curricula of specialties in the form of passing a comprehensive examination, which is conducted in the form of passing an independent examination, conducted on test assignments of the COTS and delivery of practical skills in OSCE technology on models. In the course of the FCE, the graduate must demonstrate the mastery of the competencies mastered in the process of preparation for this educational program in accordance with the chosen type of activity.

Reliability and validity of methods for assessing the knowledge of students is conducted in the form of study and analysis of the control and measurement fund (tickets, situational tasks, tests.).

Documentation of daily sessions of residents is carried out by filling out a paper training journal and an electronic journal in the ACS Sirius. Analysis of the key indicators of the learning process in the residency, the adoption of decisions on residency programs are recorded in the minutes of the department, the dean's office, the Educational and Methodological Council, the Committee of Educational Programs, the Dean's Scientific Council of the PFE, and the Academic Council of the Semey State Medical University.

According to the Academic Policy (the Regulation "On the Rating System for Evaluation of Educational Achievements of Students" developed in accordance with the Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 125 dated March 18, 2008 "Standard Rules for Conducting Current Monitoring of Academic Performance, Intermediate and Final Certification of Students in Higher Educational Establishments") for examinations are appointed examiners from among professors, associate professors and teachers with a scientific or academic degree, among employers, highly qualified specialists in practical health corresponding the profile of the residency program.

According to the "Regulations on Independent Examination" of November 20, 2012, as independent examiners, persons who have the status of independent examiners who are responsible for the extremely correct and demanding atmosphere in the exam are involved. Participation of independent examiners increases the transparency of examinations, creates conditions for conscientious behavior of students in examinations.

The following organization of the city of Pavlodar is the partner of the Department of Special Disciplines in the organization of an independent interim certification: "Polyclinic No. 2 of Pavlodar". Sitkazinov AK became the independent examiner for the admission of the mini-clinical examination at the boundary control in the discipline "Urology and andrology of outpatient-polyclinic-1" in 2017-2018. - Chief Physician of "Polyclinic №2 of Pavlodar city", a doctor - urologist of the highest category. As a result of participation in the examination by the expert was given a positive response and recommendations for the examination.

# Analytical part

According to the "Resident Assessment" standard, it should be noted that the assessment of educational achievements of residents in accredited specialties is conducted in compliance with the regulations in the field of education.

Forms of formative and summary control are transparent and accessible to stakeholders of the educational program.

#### Strengths / best practice

- A mechanism has been developed to monitor the effectiveness of the implementation of the EP
- Formation of the teaching staff is carried out in strict accordance with the qualification requirements for the licensing of educational activities
  - Performance indicators of EPs are developed taking into account the requirements of practical

health care. Involvement of external examiners from among practical health professionals in the conduct of summary control of knowledge and skills of residents.

• Use of the educational and educational portal "Sirius" for constructive and fair feedback of residents on the basis of the results of their knowledge and skills assessment.

Conclusions of the EEC on the criteria: (strong/satisfactory/suggest improvements/unsatisfactory) strong-9 satisfactory - 1 suggest an improvement of -0 unsatisfactory-0

# 6.4 Standard "Residents"

#### The Evidence

According to the Standard Rules for Admission to Education for Educational Organizations Implementing Professional Curriculums for Post-Graduate Education, approved by Decree No. 109 of the Government of the Republic of Kazakhstan of January 19, 2012, the formation of a contingent of students of residences of universities and scientific organizations is carried out through the placement of a state educational order, training at the expense of the citizens' own funds and other sources.

At the beginning of March / April, the coordinators of the Center for the Future Resident meet with the graduates of the internship, where they introduce interns with data on the demand for medical personnel in the East Kazakhstan region and for Kazakhstan as a whole, present residency programs, as well as a list of prerequisites for admission to the specialty. Further, in March, the dean of the PFE together with the Center for the Future Resident collects applications from those entering the residency. In parallel with the dean's office, the educational department responsible for the specialty of the residency, the EC performs the analysis of the educational program's provision with teaching staff, including curators and mentors, clinical facilities. At the end of the collection of applications, the data are processed and presented at the meeting of the Academic Council of the dean's office of the PFE, at which the final decision is made regarding the admission policy for the current year.

The recruitment of students to the residency is regulated by the Regulation on admission to the residence of the SSMU, developed in accordance with the Model Rules for Admission to the Educational Organization, implementing professional training programs for postgraduate education (Decree of the Government of the Republic of Kazakhstan dated 19.01.2012 No. 109 as amended on 09.07.2013. post No. 701), the requirements of GSO RK - 2009 №387.

The management of the process of admission to the residence is carried out under the supervision of the rector of the SSMU, who is the Chairman of the admissions office for the residence. Organization and implementation of the process is entrusted to the dean's office.

In accordance with paragraph 9 of the Decree of the Government of the Republic of Kazakhstan No. 109 of January 19, "On the approval of the Model Rules for Admission to Education in the Educational Organization, Realizing the Professional Curriculum of Post-Graduate Education" with amend. from 09.07.2013. № 701 by the order of the rector an admission committee is annually created, which includes the rector, the vice-rector for quality and continuous education, the dean of postgraduate and additional education; deputy. dean of postgraduate and additional education; Methodist for Master and Residency, Head of Legal and Passport-Visa Work; head of the Information Technology Center.

The functions of the admission committee include:

- 1) receiving documents from those entering the residence;
- 2) authentication of submitted documents:
- 3) the formation and transfer to the Basic University of an electronic data log of incoming, statistical reports on admission;

- 4) scheduling the entrance examinations for the residence;
- 5) consideration of applications relating to the procedure for admission, appeals.

For the examination period an examination committee is formed, which includes 4 of the most experienced, qualified university teachers with a degree.

The requirements for those entering the residency are described in the Regulations on Admission to the Residency of the SSMU and include the compulsory availability of basic medical education, internships, knowledge of one of the foreign languages (English, French, German), prerequisites necessary for mastering the specialty.

Those entering the residency take 2 exams:

- 1) Testing in a foreign language, which takes place at the Base University (SSU named after Shakarim), and conducted by the National Testing Center.
- 2) oral examination in the specialty, which includes the questions of the basics of the chosen specialty (introduction to urology).

The system for assessing the results of entrance examinations is regulated by the Decree of the Government of the Republic of Kazakhstan No. 109 of January 19, 2012. "On the approval of the Model Rules for Admission to Education in the Educational Organization, Realizing the Professional Curriculum of Post-Graduate Education" with amend. from 09.07.2013. No. 701 and represents a 100-point scale.

The number of admitted listeners accepted corresponds to the possibilities of clinical and practical training, the maximum allowable burden on managers, and also the material and technical capabilities of the organization.

The number of resident listeners is constantly coordinated with relevant stakeholders, taking into account the need for medical personnel in various fields of medicine. The review is carried out regularly, taking into account the needs of the industry and the situation in the labor market.

The university conducts admission to the residency on the basis of the Decree of the Government of the Republic of Kazakhstan dated January 19, 2012 No. 109 "Standard rules for admission to education in the education organization that implement educational programs for postgraduate education (with amendments as of July 26, 2017).

The Regulation on the residence of the SSMU in accordance with the Sanitary Regulations "Sanitary and Epidemiological Requirements for the Organization and Conduct of Sanitary and Anti-Epidemic (Preventive) Measures for the Prevention of Infectious Diseases", approved by Order No. 194 of the Minister of the National Economy of the Republic of Kazakhstan dated March 12, 2015, regulates the following:

- 1. Residents of surgical, dental, gynecological, obstetrical, hematological profiles with positive results on markers of HBV and HCV are not allowed to study in their specialty.
- 2. According to the conclusion of the CDC, patients with tuberculosis who successfully completed the full course of treatment in modes I, II and IV categories are admitted to study, with the outcome "cured" or "Treatment completed".

All information on the formation of the contingent is posted on the university's website. Applicants can familiarize themselves with the conditions of admission and selection to the residence on the university's website.

In order to ensure the transparency of the selection procedure and the equality of access to learning in the residency, the university carries out a number of activities

- 1) informing through the media, the university's website about the beginning of receiving documents to the residence no later than 1 month before the start of the work of the selection committee (Annex cutting from newspapers with the announcement will give the dean's office)
- 2) posting information on the university's website about the procedure, rules and terms of admission to the residence;
  - 3) organization of the work of the Center for the Future Resident;
  - 4) inclusion in the examination board of representatives of practical health care (Annex 4.2);
  - 5) organization of the work of the Appeals Committee;
  - 6) the publication of the results of the entrance exams on the university's website, the

placement of the list of applicants with the marks on the stand.

According to Article 3. of the Law of the Republic of Kazakhstan of July 27, 2007 No. 319-III "On Education" (with amendments and additions as of December 4, 2015), the selection for the residence of the SSMU is carried out in accordance with the principles of state policy in the field education, namely:

- 1) equality of the rights of all to receive a quality education;
- 2) the availability of education of all levels for the population, taking into account the intellectual development, psychophysiological and individual characteristics of each person;
  - 3) respect for human rights and freedoms;
  - 4) stimulating the education of the individual and developing giftedness;
  - 5) the continuity of the education process, ensuring the continuity of its levels;
  - 6) democratic nature of education management, transparency of the education system.

The policy of admission to the residence of the SSMU for a specific academic year is discussed collectively at a meeting of the Academic Council, the dean's office of the Department of Education, which includes heads of departments, Responsible for specialties of residency, heads of structural divisions of the university (UO, PR), chairman of the CEP, chairman of the Test Committee, the head of the Council of Employers at the SSMU and the managers of residents. During the meeting, prerequisites for admission to the specialty residencies for the new academic year are discussed and approved, the activities of the departments are coordinated to prepare the process for the reception of residents: the lists of examiners are specified, the deadlines for passing exam questions are set, and other issues related to the admission policy are resolved.

An important consideration in making decisions regarding the control figures of admission is given to discussing the trends in the demand for medical personnel in the East Kazakhstan and Pavlodar oblasts.

At the same time, monitoring of educational organizations conducting training of residents, in general in Kazakhstan, is conducted. The purpose of the monitoring is to determine the specialties of the residency, according to which the reception will be oriented to the needs of other regions of Kazakhstan.

In order to ensure transparency of the procedure for selecting a resident, SSMU forms an examination committee of at least 4 qualified specialists, it is practiced to attract representatives of practical health care as experts. In addition, the dean's office staff is present at the exam.

Since 2017 in the framework of the anti-corruption program, the system of codification of incoming responses is used in examinations. The procedure of the exam is organized in such a way as to ensure maximum transparency and objectivity of the evaluation. During the examination, the tickets spread out on the tables are constantly mixed in the presence of the incoming ones, the answers sheets of the examiners are coded by the dean's office staff, so the examiner does not see the name. incoming, the sheet of which he checked. The ticket contained 3 questions, so the answer sheet was checked by 3 examiners (each on one issue), the chairman of the commission on the specialty carries out a general examination of the objectivity of the assessors submitted by the examiners. After the grading, dean's office staff, in the presence of the examiners, decodes the marks, after which the grades are entered in the examination sheet.

In order to ensure the transparency of the examination procedure, the settlement of disputable issues for the exam period, the university establishes an appeal committee.

The composition of the appellate commission is approved by the order of the chairman of the admissions committee. Appeal commission is created to consider applications of persons who do not agree with the results of entrance examinations. The competence of the Appeals Commission includes the decision to add points to the person who appeals the results of the entrance exam in the specialty.

An application for appeal shall be filed in the name of the chairman of the appeal commission by the person entering the residence. Applications for the content of exam materials and for technical reasons are accepted until 13.00 hours the day after the announcement of the results of the entrance examination and are considered by the Appeals Commission within one day

from the date of submission of the application.

The Appeals Commission works with each individual on an individual basis. In the event that a person does not appear at the meeting of the appeal committee, his application for appeal is not considered. When the application is considered by the appellate commission, the person who filed the appeal provides an identity document. Decisions of appellate commissions are taken by a majority of votes of the total number of commission members. In the event of a tie, the vote of the chairman of the commission is decisive. The work of the appeal commissions is formalized by a protocol signed by the chairman and all members of the commission.

In order to improve the procedure for admission to the residence of SMU Semei, the Center for the Future Resident was set up, its mission is to provide comprehensive support to the arrivals of the SMU, arriving at the residence, and all necessary information regarding the procedure for receiving documents for residency, entrance examinations, as well as the specifics of the training process (Annex 4.3).

The head and members of the CFR are residents of the first and second years of study. The Center takes a direct part in the process of implementing career guidance work with the incoming, discussing the policy of admission and selection to the residency.

Within the framework of the Center's activities the following activities are carried out:

- conducting introductory lectures on the residency of the State Medical University of Semey with students of the specialty "General Medicine", interns of 6-7 courses;
  - presentations for representatives of practical public health;
- informing the TPI by e-mail about the collection of applications to the residence of the SMU of Semey;
  - collection of applications to the residence.

The University provides residents with support oriented to social, financial and personal needs, allocates appropriate resources for social and personal support. Residents in need are provided with a hostel, material assistance.

In order to provide socio-psychological conditions for the individual, to provide comprehensive socio-psychological support for students during the entire period of study, the university has a resident support service for the youth policy department, and a psychologist's office works in the medical center of the Semey State Medical University.

The confidentiality of counseling and support is reflected in the Code of Business Ethics.

Students of the residence are regularly invited to the meetings of the advisory bodies and take part in the discussion of issues in the context of this specialty. The suggestions and recommendations of the students are necessarily taken into account by the members of the advisory bodies and are taken into account when forming the final decision of the meeting.

# Analytical part

According to the "Residents" standard, it can be noted that the selection and admission to the residence is conducted in accordance with regulatory documents. The database of the test tasks includes questions on clinical competencies, without taking into account the knowledge of biomedical sciences due to the fact that this is not prescribed in the policy of the organization of applicants for residency. The information about the acceptance conditions is in the public domain. Residents are provided with appropriate working conditions.

Residents are given the opportunity to participate in advisory bodies, in evaluating the training program.

#### Strengths / best practice

- Development and implementation of a clinical examination in the admission of residents as a selection procedure in order to identify the specific abilities of applicants in the field of the chosen specialty.
- Admission of the number of residents, taking into account the capabilities of the clinical base, the potential of the teaching staff, the material and technical equipment of the department.

• The possibility of obtaining socio-psychological support *EEC recommendations*:

When selecting for residency, the specific abilities of the applicant should be taken into account: the inclination and interest in the chosen specialty, estaplished in the process of undergraduate education: active participation in the SSS, preparation of reports for the scientific conference, having a certain awareness of the chosen specialty.

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

strong-23 satisfactory -4 suggest an improvement-1 unsatisfactory-0

#### 6.5 Standard "Teachers"

#### The Evidence

The educational process of the residency involves people who have a doctorate, an academic degree of Doctor PhD, doctors of the highest category who have successfully mastered new educational technologies.

The availability of basic education in accordance with the planned pedagogical activity, the availability of scientific and pedagogical experience, academic degree, academic title is mandatory for the teaching staff who prepare the residents. These requirements are reflected in the job descriptions approved by the rector of the SMU of Semey.

The University provides a balance between teaching, research and the provision of medical assistance by involving the teachers. Scientific work is an integral part of the university teachers' activities and a prerequisite for the preparation of residents for all accredited specialties. Teachers, preparing residents take part in scientific research, development of clinical protocols for diagnosis and treatment of RCHD Ministry of Health of the Republic of Kazakhstan.

University teachers regularly improve their pedagogical qualifications on a free basis. Control over the upgrading of the qualifications of the teaching staff is carried out by the SUM, as well as by the personnel department. The training plan includes all types of internships, PC courses, etc. Upon completion of the upgrade, relevant certificates are provided.

The University has developed mechanisms and criteria for the systematic evaluation of the effectiveness of the quality of teaching: they are intra-departmental control, open classes, mutual visits of classes, questioning of residents, etc. The results of open classes are discussed at the sessions of the departments.

The university conducts a personnel policy in such a way that the profile of the teaching staff strictly corresponds to the range and balance of pedagogical skills, which is achieved by constant monitoring and regulation of the ratio of teaching staff teaching basic and clinical disciplines. Curators are appointed from the number of teaching staff who have a doctorate, a candidate of medical sciences, and also a higher qualification category actively engaged in scientific and practical activities in this field.

#### Аналитическая часть

По стандарту «Преподаватели» можно отметить высокий уровень профессионализма преподавателей, реализующих образовательные программы резидентуры и систематически повышающих квалификацию.

Все преподаватели выполняют запланированную нагрузку. Кадровый потенциал соответствует специфике образовательной программы.

# Сильные стороны/лучшая практика

• Подбор и расстановка педагогических кадров осуществляется с учетом квалификации

и профессионального роста. Анализ количественного и качественного состава преподавателей соответствует квалификационным требованиям, целям образовательной программы.

- Внедрение института наставничества
- Права и обязанности наставников регламентированы должностными инструкциями

The teaching staff of the Semey State Medical University helps to achieve the mission and goals of the university, the qualifications of the teaching staff correspond to the level of the posts held and ensure the implementation of educational programs. The qualification of the teaching staff is confirmed by the appropriate academic degree, academic rank, work experience, among the teachers of the clinical departments - the availability of a qualification category of a specialist and the trust of colleagues, membership in associations.

# Analytical part

According to the "Teachers" standard, one can note the high level of professionalism of teachers implementing educational programs of the residency and systematically upgrading their qualifications.

All teachers perform the planned workload. Personnel potential corresponds to the specifics of the educational program.

# Strengths / best practice

- The selection and place of the teaching staff is carried out taking into account the qualifications and professional growth. The analysis of the quantitative and qualitative composition of teachers corresponds to the qualification requirements, the objectives of the educational program.
- The introduction of the mentoring institution
- The rights and duties of mentors are regulated by job descriptions

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

strong-5 satisfactory -0 suggest an improvement of -0 unsatisfactory-0

#### 6.6 The Standard "Educational Resources"

At the university there are service departments to support the residents of the residency in the implementation of their educational, personal and career needs. There are structural units, support services for residents, who assist in the development of educational programs. There is also a unified system of library and information services, the purchase of educational and methodological literature on the applications of the departments, the amount of funds allocated for the purchase of literature at a high level. The departments have modern tools, equipment, auditoriums, laboratories, their availability, serviceability at a good level. The manual supports and updates the material and laboratory base. There is a unified system of information support for students and teachers (for example, based on the Web site) for all educational programs, there are Wi-Fi points to support residents in access to the Internet in places convenient for students and teachers. There is a good dynamics of financial resources allocated for the acquisition of laboratory equipment, educational literature, periodicals, information resources, computers.

According to the university, the strengths of the standard 6 "Educational resources" are: a sufficient material and technical base for the training of residents in the specialties; for mastering clinical competencies the University provides the educational program with clinical databases in accordance with the level of medical care, the profile of patients of different ages; the university provides opportunities for independent training of students, providing access to educational resources of the library and the Internet; direct joint activity of residents with the staff of clinical bases in all spheres of their activity, at all stages of rendering medical qualified and specialized

assistance;

#### The Evidence

The university has educational auditoriums and training rooms, teachers' rooms, a simulation center, a library with a reading room, a gym, a medical center, a computer technology office, a resident service center that are equipped with the necessary equipment to ensure the quality of education. In order to effectively implement educational programs, the university's leadership strengthens and modernizes material and technical resources. Based on the results of the assessment of the degree of building deterioration, the results of inventory, the moral aging of machinery, etc., measures are taken to maintain resources at the level of the high requirements for education. All classrooms are equipped in accordance with the ongoing education program, with qualification requirements, in accordance with sanitary and hygienic and fire safety standards. A safety journal is maintained. The provision of trained residents with computer and information resources is sufficient to maintain a good educational process, meets licensing and certification requirements. The university's website operates in Kazakh and Russian languages, offering full information about the university and answers to questions.

The implementation of the EP takes into account the individual needs and capacities of the students who are studying. Each student is given the opportunity to develop the practical skills and skills in the offices of the practical skills center, clinical bases.

The university has free access to educational Internet resources, introduced information technologies, monitors the use and development of innovative learning technologies by the teachers.

The center of practical skills is equipped with modern mannequins, phantoms and models for processing practical skills and abilities in special disciplines.

Computer technologies are widely used in the testing of students, as well as in the creation of methodological materials on electronic and paper carriers, in the educational process, in the study of new material, in practical exercises.

The library's book stock is 758,831 copies, including:

- 1) in the Kazakh language 261497 copies. for one training -132.7 units
- 2) in the Russian language 476592 copies.
- 3) in a foreign language 20742 copies. for 1 trainer is 29.3 units.

Own editions of educational and educational literature are available in hard copy and on electronic media and count 31155 copies, including 5160 copies in the state language. Due to the revenues of the educational-methodical, educational and scientific literature published by the teachers of SMU, the dynamics of growth of own publications is traced. Most of the educational and methodological literature is published on the basis of its own copying office.

The library of the university operates an automated program "IRBIS-64", which provides an opportunity to quickly access the information, improve the search capability of the electronic catalog, create a reference and information fund on electronic media.

#### Analytical part

According to the "Educational Resources" standard, it can be noted that organized information for the learning process in all taught subjects is provided for residents and it meets the required criteria.

Training equipment and computer technology meet the safety requirements for operation.

#### Strengths / best practice

- The training equipment and software used to develop the EP are sufficient and meet the safety requirements for operation.
- The University creates a learning environment that promotes the formation of basic and professional competencies and takes into account the individual needs and opportunities of residents
- The University creates conditions for the development of practical skills and competences

- among residents in the subjects studied
- The University is assessing the material and technical resources and information support for the EP.
- The University has the necessary number of classrooms equipped with modern technical training facilities that meet sanitary and epidemiological standards and requirements.
- The university has the necessary number of computers, educational literature, multimedia equipment.
- Free access to educational Internet resources.
- The management of the EP showed the reflection on the web resource of information characterizing the EP.

#### EEC recommendations:

• It is recommended to encourage the interest of employees in carrying out the research in the field of education through the implementation of scientific and technical programs / projects through the use of the possibilities of grants and (or) an initiative research plan, the approval of which through the Scientific Council and registration in JSC" NCSTE "with the implementation of the GOST report provides an opportunity participate in grants of MES of Republic of Kazakhstan.

Conclusions of the WEC on the criteria: (strong / satisfactory / suggest improvements / unsatisfactory)

Strong-18
Satisfactory -0
suggest an improvement of-1
unsatisfactory-0

6.7 Standard "Evaluation of educational programs"

#### The Evidence

The evaluation of the EP is carried out taking into account the mission of the postgraduate education (residence) program in accordance with the mission of the University and consists in the qualitative preparation of competitive graduates who are able to continue their lifelong learning in the conditions of dynamically developing modern medicine and carry out their professional activities on the basis of modern innovative intellectual technologies in a complex with the decision of socially important problems of practical public health, and also possessing actively civic position, satisfying the needs and expectations of society and the state.

At the State Medical University of Semey, monitoring and evaluation of the implementation of the educational program of the residency is carried out on the basis of collective solidarity of all stakeholders and staff of the university. At the stage of planning the educational process in the specialty of the residency, the responsibility for checking working curricula for compliance with the requirements of state educational standards, scheduling is entrusted to the Training Department. Responsibility for the selection of the composition of teachers corresponding to the qualification requirements, the profile of the specialty is assigned to the personnel department. Control over improvement and development of teachers' competencies, advanced training of teachers of the residency is provided by the dean's office. Quality control and monitoring of educational and methodical documentation of the residency departments is carried out by the Educational Clinical Center (ECC). The ECC is the structural unit responsible for providing and maintaining the simulators necessary for practicing the skills of residents (for rare nosologies) and at the stage of final certification. Providing the educational program of the residency with the necessary clinical facilities is the research department, whose functions include monitoring and selection of clinics available in the cities of Semey, Pavlodar and Ust-Kamenogorsk for subsequent contracting. The Registrar's office registers and stores the examination sheets, which are documentary evidence of

recognition of the educational achievements of residents.

The key figures in the monitoring and evaluation of the educational program of the residency are the profile department, the dean's office and the Ministry of Health of the Republic of Kazakhstan, which work in close cooperation with residents, practical health care and potential employers.

The system of monitoring and evaluation of the EP of residents covers all aspects of the organization, implementation and evaluation of the EP: the development, approval of the EP, the organization and conduct of the educational process, the achievement of the final results of training by residents, the analysis of the results of external and internal audit of the EP and the educational process in the university, from all participants of the educational process and stakeholders.

Monitoring of the implementation of the EP is carried out within the framework of the internal control during the audit of all activities of the teaching staff and students. Intrafederal control is carried out by the staff of the department in accordance with the plan of the department.

Monitoring of the educational process includes monthly meetings of the departments, which discuss the implementation of the curriculum, the results of quality control of the learning process (discussion of practical exercises, lectures, etc.).

Monitoring of progress and attendance is carried out by the departments according to the schedule of lessons with recording of data in the journal. In the absence of students in the classroom, the dean's office is informed. Monitoring and control by the dean's office is carried out on the basis of the results of the boundary control, intermediate certification and final state attestation.

Monitoring and control of the achievement of the final results of training is carried out by the departments and the dean's office of the faculty of residency and additional education with the final certification.

Transparency of the process and results of evaluation of educational programs in the specialties "6R113600-Urology and andrology, including children" and "6R110900 - Children's surgery" is provided by conducting the monitoring procedures and collecting feedback from stakeholders, which are regulated by the Regulations on the residency of the Semey State Medical University, and job descriptions of the dean's office staff responsible for the residency.

The frequency of the collection and analysis of feedback is defined in the plans of the dean's office of the PGAE, the Academic Council of the dean's office.

In order to ensure transparency of the process and the results of the assessment for management and stakeholders, the process of collecting feedback from trainees is automated and produced in the Sirius automated control system, in order to avoid the correction or distortion of feedback data. In addition, the results of the feedback are published on the university's website so that all interested parties have the opportunity to get acquainted with it.

Information on the OEP, the educational strategy of the specialty "6R113600-Urology and andrology, including children's" is available and presented on the university's website www.ssmu.kz.

When developing a new educational program and submitting an application to the authorized body, the security and qualification level of the teaching staff for this specialty are taken into account. Annually, the report of the chairman of the FSA on the results of the Final certification of graduates of the residency is heard at the AC of the Semey State Medical University.

The Dean's office of PGAE is working to collect feedback from residents to determine their level of satisfaction with the contents of the educational program, the organization of the educational process in the form of questionnaires, focus groups, monitoring of appeals to the dean's blog, pro-rector, rector. The Dean's office has a box for collecting feedback, where residents can incognito leave their suggestions, wishes and complaints. An important role in the evaluation of the educational program is played by monitoring the achievement by residents of the final learning objectives. Therefore, the dean's office collects feedback from graduates of the residence and their employers.

The profile departments collect feedback from residents, representatives of practical health care,

teachers of related disciplines in assessing and optimizing the content of the educational program in the form of reviews, focus groups, questionnaires, etc.

The results of the study of feedback from stakeholders are announced at the meetings of the departments, the Dean's Academic Council and EPC of PGAE.

Feedback analysis is provided for discussion at the meetings of the departments, the Committee for Educational Programs and the Academic Council of the dean's office of the PGAE, which include teachers, residents and members of the Employers' Council. During these meetings, plans are being developed to further improve the quality of the graduate training.

The main tool for involving students in the evaluation of the EP is the questionnaire "Satisfaction of residents with an educational program", "Teacher through the eyes of a resident." An example of effective use of feedback is the systematic questioning of residents in the departments after each discipline.

The results of the survey of students in the specialty "Urology and andrology, including children", "Children's surgery" identified the satisfaction with the quality of the educational process showed that the residents interviewed were satisfied with the quality of the educational process at the university.

In the university, international standards and innovative technologies are introduced into educational processes, which positively affects the satisfaction indicators. Completely 100% of the respondents are satisfied with the content of the EP, training methods, the organization of the learning process, which confirms the successful implementation of the EP in the university.

The increase in the level of residents' satisfaction is due to the purposeful improvement of the educational, methodical, library and administrative support and maintenance of students, the wide introduction of innovative technologies and information and communication systems into the educational process. Library support at the university meets modern world requirements.

The respondents are satisfied with the relations in the student team and the relationship with the administration by 100%, which proves that the University has created a suitable friendly environment for unhindered acquisition of knowledge.

From the methodological abilities of teachers, which are integral components of the success of the learning process, students highly appreciate the clear and accessible presentation of the material, the orientation towards the use of the studied material in future professional and public activities, which confirms the teacher's methodological skill and the interest of the students in this matter.

From the individual qualities of the teacher as a person, the highest marks are given to the presentation of the qualities of a demanding mentor, benevolence and tact in relation to the students, a respectful attitude. In this issue, most residents characterize the teachers clearly positive, which demonstrates the presence and support of the corporate culture of the university.

Satisfaction with the competence of teachers and the quality of teaching is an important indicator for the sustainable development of the university. The Semey State University, in order to maintain this indicator at a high level, strives for a permanent qualitative improvement in the composition of the faculty of the university, improving the credit technology of teaching students and the entire educational process as a whole.

#### Analytical part

The standard "Evaluation of educational programs" is developed in accordance with the mission, objectives and expected results of students. The evaluation of the EP by the university covers all levels of organization and implementation of the EP.

# Strengths / best practice

The strengths include:

• Monitoring and evaluation system for the educational program has been formed at the university, based on a multilevel approach;

- Component for choice of EPs is regulated for the process implementation the component of choice
- Evaluation of the specialty on "Urology and andrology, including children's", "Children's surgery" is carried out according to the intra-university system of quality control of education and involvement of residents and employers in assessing the university's activities.
- A dynamic assessment of clinical databases is carried out.
- Improvement of the OP by feedback from residents

# Conclusions of the EEC on the criteria: (strong / satisfactory / suggest improvements / unsatisfactory)

```
strong - 10
satisfactory - 3
suggest an improvement of -0
unsatisfactory -0
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#### 6.8 The standard "Management and administration"

#### The Evidence

The selection of students in the residency is regulated by the "Regulations on Admission to the Residency of the SMU of Semey", developed in accordance with the Standard Rules for Admission to the Educational Organization Implementing the Professional Curriculum of Post-Graduate Education (Decree of the Government of the Republic of Kazakhstan dated 19.01.2012 No. 09 with amendment dated 09.07. 2013, Post No. 701), the requirements of the State Obligatory Standard of the Residency for Medical Specialties, approved by the Order of the acting President. Minister of Health and Social Development of the Republic of Kazakhstan No. 647 of July 31, 2015.

Management of the process of admission to the residency is carried out under the guidance of the rector of the SMU of Semey, who is the Chairman of the admissions committee. Organization and implementation of the process are entrusted to the dean's office.

In accordance with paragraph 9. of the Decree of the Government of the Republic of Kazakhstan No. 109 of January 19, "On the approval of the Model Rules for Admission to Education in the Educational Organization, Implementing Professional Curricula of Post-Graduate Education" with amend. from 09.07.2013. № 701, the order of the rector annually creates a selection committee, which includes the rector, vice-rector for quality and continuing education, the dean of postgraduate and additional education; deputy dean of postgraduate and additional education; Methodist for Master and Residency, Head of Legal and Passport-Visa Work; head of the Information Technology Center.

Evaluation of the results of the exams arriving at the residence of the SMU of Semey is carried out in accordance with the Model Rules mentioned above, according to a 100-score scale.

In order to ensure the transparency of the examination procedure, the settlement of disputes during the examinations at the university, an appeal commission has been created.

The composition of the appellate commission is approved by the order of the chairman of the admissions committee. Appeal commission is created to consider applications of persons who do not agree with the results of entrance examinations. The competence of the Appeals Commission includes the decision to add points to the person who appeals the results of the entrance exam in the specialty.

An application for appeal shall be filed in the name of the chairman of the appeal commission by the person entering the residence. Applications for the content of exam materials and for technical reasons are accepted until 13.00 hours the day after the announcement of the results of the entrance examination and are considered by the Appeals Commission within one day from the date of submission of the application.

The Appeals Commission works with each student on an individual basis. In the event that a person does not appear at the meeting of the appeal committee, his application for appeal is not considered. When the application is considered by the appellate commission, the person who filed the appeal provides an identity document. Decisions of appellate commissions are taken by a majority of votes of the total number of commission members. In the event of a tie, the vote of the chairman of the commission is decisive. The work of the appeal commissions is formalized by a protocol signed by the chairman and all members of the commission.

#### Analytical part

Periodic assessment of the activities of university management is carried out at meetings of collegial and deliberative bodies through internal audit and self-assessment.

One of the important strategic directions of the university is to increase the effectiveness of the management system, which is defined with the aim of ensuring the effective functioning of quality management. Activities to achieve the indicators of direct results: analysis of the QMS of the University and a report to the Academic Council, external audit, internal audit of the university's structural units.

The structure of academic leadership ensures the quality and effectiveness of the university's activities in order to ensure the training of highly qualified resident specialists, the organization and control of educational, methodological, social and educational work of the university, the effectiveness of the work of structural units.

# Strengths / best practice

Continuous organizational, coordinating and administrative work aimed at achieving the mission of the educational program; transparency of the management system and decisions; the responsibility of the academic leadership for the development and management of the educational program is defined; stable financial condition of the University; wide cooperation with partners in the health sector. The structure of academic leadership ensures the quality and effectiveness of the university's activities in order to ensure the training of highly qualified resident specialists, the organization and control of educational, methodological, social and educational work of the university, the effectiveness of the work of structural units.

Evaluation of the activities of management and structural units of the University is carried out by regular quality assurance of internal audit and self-assessment.

# Conclusions of the EEC on the criteria: (strong / satisfactory / suggest improvements / unsatisfactory)

In general, according to this Standard, the activities of the organization meet the criteria. Quantitative indicators reflecting the organization's compliance with the criteria of the Standard are as follows:

Strong positions - 12 satisfactory - 1 suggest improvements - 0 unsatisfactory – 0

# 6.9 Standard "Continuous improvement"

#### The Evidence

The development strategy of the university provides for continuous analysis and evaluation of the quality system of the educational and medical activities of the university through a systematic analysis of the QMS, monitoring feedback from consumers of services to determine the degree of their satisfaction and the modernization of the communications system at the university. All areas of the university are regulated by corporate documents.

The University strives not only to provide high-quality training for resident specialists and to provide opportunities for retraining personnel for health care in connection with the introduction of new innovative technologies in production, but also tries to achieve the greatest possible satisfaction

of consumers.

The development of the university is based on the principles of improving QMS, the introduction of new technologies in the educational process, improving the quality of training of residents with the goal of flexible response to market demands. The university management seeks to prevent emerging problems and their causes by improving the system of internal control and risk management.

It should be noted that the university is constantly developing the potential of the faculty, which corresponds to the achievement of the institutional and program mission and goals of the university.

In order to provide a comprehensive and in-depth analysis, the annual work plan of the university's university includes a report of the rector on the conducted work, which contains a management review. The report of the rector reflects the results of the implementation of the action plan, the results of the university's activities on the processes, recommendations and proposals for the past period and tasks for the new period.

The work carried out allows for continuous improvement in various areas of the university. Based on the results of the management review, decisions are made on improving the educational management, justifying the need to make changes to the quality management system of the EP, including updating the training documentation.

An important direction of the work of the departments is the formation of stable partnership relations with independent experts invited from the practical health care.

Also, a feature of analyzing the formation of the competencies of students at the university is the evaluation of the portfolio.

At the university, students of all levels, including residents, have the opportunity to express their opinions freely on all issues of the quality of preparation, the correspondence of the material and technical base, the conditions of clinical practice, etc. For feedback from students and staff on the website of the university there is a rector's blog.

In order to improve the organizational structure and management principles, it is planned: the introduction of a risk management system in educational activities; optimization of the quality management system model;

Strengths of the university in the standard of 9 "Continuous improvement" processes of continuous improvement of the educational program of the residency by specialties are realized on the basis of: upgrading the qualifications of the teaching staff every 5 years, incl. on pedagogical competence; participation of teaching staff in training events (seminars, master classes, conferences); understanding of their own experience in the implementation of pedagogical technologies in the educational process; exchange of experience in the implementation of pedagogical technologies in the educational process with colleagues from other educational and scientific organizations implementing residency programs; management processes of the EP, providing for monitoring, evaluation and revision.

#### Analytical part

The process of updating the educational program is based on prospective studies and analyzes, on the results of their own experience, studying the literature on medical education, studying the needs of the labor market.

Due to changes in the educational environment of the world space, legislative acts, regulatory acts and rationalization, the requirements for the design and content of educational programs are periodically reviewed. The Regulations on the residency, the Regulation on the rating system for assessing students' progress, the process cards, the instructions, the documented procedures, the management structure are updated each year. Further, the updated normative and regulating documents are posted on the University's corporate website to inform the university staff, and also are sent to corporate mail units.

#### Strengths / best practice

• The University has a Strategic Development Plan for the implementation of educational programs, ensuring timely response to changing conditions

- The University monitors the implementation of the EP through the updating of educational-methodical complex of specialties, within the framework of the intradepartment control and the analysis of current academic performance and boundary control:
- Educational services provided by the university are in demand
- The University takes a competitive position in the market.
- Strategic partnership with practical healthcare to develop the competence of the resident model for specialties, the development and implementation of educational programs.

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

In general, according to this Standard, the activities of the organization meet the criteria.

Quantitative indicators reflecting the organization's compliance with the criteria of the Standard are as follows:

Strong positions - 13
satisfactory - 0
suggest improvements - 0
unsatisfactory - 0

# (VII) REVIEW OF STRONG SIDES / BEST PRACTICES FOR EVERY STANDARD

# 6.1 The standard "Mission and leadership"

Strengths / best practice

The strengths include:

- The University attracts representatives of stakeholder groups, including trainees, faculty and employers, to the formation of the EP.
- The University demonstrates the degree of implementation of the principles of sustainability, efficiency, effectiveness, priority, transparency, responsibility, delegation of authority.
- The leadership of the EP demonstrates evidence of openness and accessibility for students, faculty, employers.

#### 6.2 Standard "Educational program"

Strengths / best practice

- The leadership of the EP demonstrates the availability of a professional context in the content of the training disciplines;
- The leadership of the EP demonstrates an effective balance between theoretical and practiceoriented disciplines;
- Disciplines cover all issues, problems in the field taught;
- The structure of the EP provides for various types of activities, the content of which contributes to the development of basic and professional competencies of students taking into account their personal characteristics;
- The leadership of the EP provides equal opportunities for students, including regardless of the language of instruction
- The management of the EP ensures the existence and effective functioning of the system of individual assistance and counseling of students on the issues of the educational process
- Management creates conditions for the effective development of the EP
- The leadership of the EP demonstrates the use of the advantages, individual characteristics, needs and cultural experience of students in the implementation of the EP
- The leadership of the EP demonstrates individual support for students in the implementation of the EP
- The management of the EP monitors the satisfaction of residents, managers of medical organizations and employers.

#### 6.3 Standard "Resident evaluation"

#### Strengths / best practice

- Mechanism has been developed to monitor the effectiveness of the implementation of the EP
- Formation of teaching staff is carried out in strict accordance with the qualification requirements for licensing educational activities
- Performance indicators of EPs are developed taking into account the requirements of practical health care. Attraction of external examiners among specialists in practical public health during the summary control of knowledge and skills of residents.
- Using the educational and educational portal "Sirius" for constructive and fair feedback of residents on the basis of the results of assessing their knowledge and skills.

#### 6.4. The standard "Residents"

### Strengths / best practice

- Development and implementation of clinical examination with the admission of residents as a selection procedure in order to identify the specific abilities of applicants in the field of the chosen specialty.
- Admission of the number of residents, taking into account the capabilities of the clinical base, the potential of the teaching staff, the material and technical equipment of the department.
- The possibility of obtaining socio-psychological support

#### 6.5 Standard "Teachers"

# Strengths / best practice

- The selection and place of teaching staff is carried out taking into account the qualifications and professional growth. The analysis of the quantitative and qualitative composition of teachers corresponds to the qualification requirements, the objectives of the educational program.
- The introduction of the institution of mentoring
- The rights and duties of mentors are regulated by job descriptions

#### 6.6 The Standard "Educational Resources"

#### Strengths / best practice

- The training equipment and software used to develop the EP are sufficient and meet the safety requirements for operation.
- The University creates a learning environment that promotes the formation of basic and professional competencies and takes into account the individual needs and opportunities of residents
- The University creates conditions for the development of practical skills and competences among residents in the subjects studied
- The University is assessing the material and technical resources and information support for the EP.
- The University has the necessary number of classrooms equipped with modern technical training facilities that meet sanitary and epidemiological standards and requirements.
- The university has the necessary number of computers, educational literature, multimedia equipment.
- Free access to educational Internet resources.
- The management of the EP showed the reflection on the web resource of information characterizing the EP.

# 6.7 Standard "Evaluation of educational programs"

#### Strengths / best practice

The strengths include:

- Monitoring and evaluation system for the educational program has been formed at the university, based on a multilevel approach;
- For the implementation of the component, the process of forming a component for the selection of EP is regulated;
- Evaluation of the specialty on" Urology and andrology, including children's "," Children's surgery "is carried out according to the intra-university system of quality control of education and involvement of residents and employers in assessing the university's activities.
- A dynamic assessment of clinical databases is carried out.
- Improvement of EP by feedback from residents

### 6.8 The standard "Management and administration"

# Strengths / best practice

Continuous organizational, coordinating and administrative work aimed at achieving the mission of the educational program; transparency of the management system and decisions; the responsibility of the academic leadership for the development and management of the educational program is defined; stable financial condition of the University; wide cooperation with partners in the health sector. The structure of academic leadership ensures the quality and effectiveness of the university's activities in order to ensure the training of highly qualified resident specialists, the organization and control of educational, methodological, social and educational work of the university, the effectiveness of the work of structural units.

Evaluation of the activities of management and structural units of the University is carried out by regular quality assurance of internal audit and self-assessment.

# 6.9 Standard "Continuous improvement"

#### Strengths / best practice

The University has a Strategic Development Plan for the implementation of educational programs, ensuring timely response to changing conditions

- The University monitors the implementation of REP through the update of the educational methodological complex of specialties, within the framework of the intra-department committee and the analysis of current academic performance and boundary control;
- Educational services provided by the university are in demand
- The University has a competitive position in the market.

Strategic partnership with practical healthcare to develop the competence of the resident model for specialties, the development and implementation of educational programs.

# (VIII) REVIEW OF RECOMMENDATIONS FOR IMPROVING QUALITY

# 6.1 The standard "Mission and leadership"

• To intensify the implementation by residents of scientific works on the results of their own research, design and release of articles and participation in scientific forums.

# 6.2 Standard "Educational program"

• To expand the catalog of elective disciplines: for example, to include neuro-urology, physiourology and to increase the amount of andrological component and credits for the study of pediatric urology due to electives.

# 6.4. The standard "Residents"

• When selecting for residence, take into account the specific abilities of the applicant: the inclination and interest in the chosen specialty, expressed in the process of undergraduate education: active participation in scientific work, preparation of reports for the scientific conference, the availability of certain information on the chosen specialty.

# 6.6 The Standard "Educational Resources"

• It is recommended to encourage the interest of employees in carrying out research in the field of education through the implementation of scientific and technical programs / projects through the use of the possibilities of grants and (or) an initiative research plan, the approval of which through the Scientific Council and registration in JSC"NCSTE "with the implementation of the GOST report provides an opportunity participate in grants of MES of RK.

# Appendix 1. Evaluation table "SPECIALIZED PROFILE PARAMETERS" in the specialty of residency 6R113600-Urology and andrology, including children's

Nº	EVALUATION CRITERIS	comm	e	Positions of educational organization  Involve + + + + + + + + + + + + + + + + + + +		
			strong	satisfied	Involve improvement unsatisfied	
11.	"MISSION AND FINAL EDUCATIONAL RESULTS"					
11.1	Mission definition				Ţ	
11.1.1	The medical education organization <b>should</b> determine the mission of the residency program and inform the public and <i>the health sector about the mission stated</i> .		+			
11.1.2	The medical organization of education <b>must</b> determine the mission on the basis of consideration of the needs of public health, the needs of the system of medical care and other aspects of social responsibility.		+			
11.1.3	The medical education organization should define a training program containing both theoretical and practical components, reinforcing the practice and the result of such training should be a physician competent and able to implement appropriate clinical practice in a specific field of medicine, capable of working at a high professional level, working independently, as well as in the team, if necessary the one is committed and ready for lifelong learning and participation in continuous medical education and continuing professional development.  The medical education organization should provide improved	F	+			
11.1.5	patient care that is appropriate, effective, compassionate and safe in addressing health problems and promoting health, including a patient-centered and holistic approach.  The medical education organization must ensure that residents (listeners) have appropriate working conditions to	Ž	-	)		
11.1.6	support their own health.  The medical education organization should promote the introduction of appropriate innovations in the learning process, allowing the development of broader and more specialized competencies than those identified as core competencies.			+		
11.1.7	The medical organization of education should encourage residents, in their becoming scientists / researchers in their chosen fields of medicine, including deeper and / or broader participation in the development of discipline, including in academic development and improving education and research in medicine  The medical education organization should assist residents in their becoming active participants in addressing the social determinants of health.		+		+	
11.2	PROFESSIONALISM AND PROFESSIONAL AUTONOMY					

1101		ı			
11.2.1	A medical education organization should include			+	
	professionalism in training residents and promote				
	professional autonomy which is necessary for a specialist to				
	act in the best interests of the patient and society.				
11.2.2	The medical education organization should ensure proper			+	
	independence from the government and other bodies in				
	decision-making in key areas such as the development of an				
	educational program (see 12.1 and 12.6), evaluation (see				
	13.1), selection and reception of residents (see 14.1 and 14.2),				
	selection / selection of teachers (see 15.1) and conditions for				
11.0.2	employment and resource allocation (see 18.3).				
11.2.3	The medical education organization should guarantee			+	
	academic freedom, which will include appropriate freedom of				
	expression, freedom of request and publication.				
11.3	FINAL EDUCATIONAL RESULTS				
11.3.1	The medical organization of education must determine the			+	
	final results of the training that should be achieved by				
	residents, as a result of the training program in relation to:	1			
	their achievements at the postgraduate level in knowledge,				
	skills and thinking; an appropriate basis for their future				
	careers in the chosen field of medicine; future roles in the				
	health system; commitment and skills in lifelong learning;		A STATE OF		
	needs and problems of public health, the needs of the health				
_	system and other aspects of social responsibility; professional				
	behavior.				
11.3.2	The medical organization of education must determine the		+		
	final results of training in general and specific for the				
	discipline / specialty components that are required to reach				
	the students at the end of the program.				
11.3.3	The medical education organization should determine the		+		
	final results of the training regarding proper behavior and		·		
	attitude towards patients and their relatives, fellow trainees,				
	teachers, other health care workers.			•	
11.3.4					
11.5.4	The medical education organization must ensure proper		+		
1	professional behavior and the attitude of residents to				
183	colleagues and other medical personnel, patients and their	1	1		
44.5 =	relatives and also compliance with the Code of Honor.				
11.3.5	The medical organization of education should inform the		+		
	public about the established final results of training the				
	residency program in the relevant specialties.				
11.3.6	The medical organization of education should guarantee		+		
	continuity between the final results of training programs for				
	basic and postgraduate medical education.				
11.4	PARTICIPATION IN THE FORMULATION OF				
	MISSION AND FINAL RESULTS				
11.4.1	The medical education organization must determine the			+	
	mission and determine the final results of the training				
	program in collaboration with the main stakeholders.				
11 4 2					
11.4.2	The medical education organization should formulate a			+	
	mission and determine the final results of the training				
	program, taking into account suggestions from other				
	stakeholders, which are representatives of other medical				
	specialties, patients, society, organizations and authorized				
	health authorities, professional organizations and medical				 
					-

	scientific societies.					
	TOTAL		11	7	1	0
12.	STANDART "EDUCATIONAL PROGRAM"					
12.1	FRAME PARAMETERS OF THE PROGRAM OF THE					
	POSTGRADUATE MEDICAL EDUCATION					
12.1.1	The medical organization of education should determine the			+		
	educational framework parameters based on the established					
	final results of training under this program and the					
	qualifications of the graduate-resident, develop them in					
	accordance with the required results of the existing basic					
	medical education and organize the systemic and transparent					
10.1.0	training.					
12.1.2	The medical organization of education should ensure that the			+		
	contents of the resident program comply with the					
	requirements of the State Educational Establishment of the					
	Republic of Kazakhstan and ensure the breadth of the training					
	of specialists in accordance with the name of the program and					
	the necessary depth of training in the field defined by the	1				
12.1.3	specialty.  The medical education organization should use practice-					<del>                                     </del>
12.1.3	oriented training, ensuring the personal participation of					
	residents in providing medical care and responsibility for					
	patient care.			L.		
12.1.4	The medical education organization should use appropriate			+		
12.1.7	methods of teaching and learning and ensure the integration					
	of the components in practice and theory, which include					
	didactic exercises and experience in assisting the patient also					
	with independent and active learning.					
12.1.5	The medical education organization must ensure that			+		
	instruction is conducted in accordance with the principles of					
	equality.					
12.1.6	A medical education organization should use a student-		+			
	centered approach in teaching that stimulates, prepares and					
	supports students to take responsibility for their own learning		-			
	process and demonstrate in their practice.		Alter			
12.1.7	The medical education organization should send the resident		+			
	through mentoring, regular evaluation and feedback, inform					
	the program and the rights and obligations of residents, and	1	/			
10.1.0	also include ethics obligations in the program.					
12.1.8	The medical organization of education should increase the			+		
	degree of independence and responsibility of residents	4				
	regarding their knowledge, skills and experience development.					
12.1.9	The medical education organization should recognize gender,					
14.1.7	cultural and religious characteristics and prepare residents for		+			
	appropriate relationship with patients.					
12.2	SCIENTIFIC APROACH					
						<u> </u>
12.2.1	MThe medical education organization should introduce the		+			
	scientific basis and methodology of medical research,					
10.0.0	including clinical research and clinical epidemiology.					
12.2.2	The medical education organization must ensure that the		+			
	resident is able to use the scientific grounds, study and know					
	the basics of evidence-based medicine through broad access					
	to relevant clinical / practical experience at the appropriate					
	profile bases in the chosen field of medicine.					

10.0.0		Π			
12.2.3	The medical organization of education should include			+	
	teaching and studying critical evaluation of literature, articles				
	and scientific data, the application of scientific developments.				
12.2.4	The medical organization of education should include			+	
	teaching and studying critical evaluation of literature, articles				
	and scientific data, the application of scientific developments.				
12.3	PROGRAM CONTENT				
12.3.1	In the training program The medical education organization		+		
	should include clinical work and relevant theory or practice				
	of basic medical, biological, behavioral and social sciences,				
	preventive medicine, clinical decision-making,				
	communication skills, medical ethics, public health, medical				
	jurisprudence and forensic medicine, disciplines, patient				
	safety, responsibility for one's own health, knowledge of				
	complementary and alternative medicine.				
12.3.2	The medical education organization should organize		+		
	educational programs with due regard for patient safety and				
	autonomy.				
12.3.3	The medical education organization should ensure the		+		
	development of knowledge, skills and professional attitudes				
	corresponding to the various roles of the physician, such as a	1			
	practicing physician or medical expert, communicator,		ALC: N		
	employee and team member, leader / manager or			L.	
	administrator, advocate of interests and health of the patient,				
	scientist / researcher.			<b>N</b> .	
12.3.4	The medical organization of education should adjust and		+		
	change the content to the changing conditions and needs of				
	of the state of th				
	the health care system.				
12.4	the health care system.  STUCTURE OF THE PROGRAM, CONTENT AND				
12.4	STUCTURE OF THE PROGRAM, CONTENT AND				
	STUCTURE OF THE PROGRAM, CONTENT AND DURATION				
<b>12.4</b> 12.4.1	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the				
	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the overall structure, composition and duration of the educational			-	
	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the overall structure, composition and duration of the educational program, clearly establish the mandatory component and	f		-	
	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the overall structure, composition and duration of the educational program, clearly establish the mandatory component and component of choice, integrate practice and theory, take into		Y	-	
	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the overall structure, composition and duration of the educational program, clearly establish the mandatory component and component of choice, integrate practice and theory, take into account the requirements of national legislation and provide	l			
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12.4.1	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the overall structure, composition and duration of the educational program, clearly establish the mandatory component and component of choice, integrate practice and theory, take into account the requirements of national legislation and provide an adequate picture of how local, national or regional health systems are oriented towards the needs of medical assistance to the population.  The medical education organization should, when deciding on the duration of the program, take into account the required final results of training basic medical education in relation to the chosen field of medicine, the requirements for performing different roles of certified professionals in the health sector, possible alternatives for using time-based learning.  ORGANIZATION OF EDUCATION PROCCESS  The medical organization of education should determine the responsibility and authority for the organization, coordination, management and evaluation of each training		+	+	
12.4.1 12.4.2 12.5 12.5.1	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the overall structure, composition and duration of the educational program, clearly establish the mandatory component and component of choice, integrate practice and theory, take into account the requirements of national legislation and provide an adequate picture of how local, national or regional health systems are oriented towards the needs of medical assistance to the population.  The medical education organization should, when deciding on the duration of the program, take into account the required final results of training basic medical education in relation to the chosen field of medicine, the requirements for performing different roles of certified professionals in the health sector, possible alternatives for using time-based learning.  ORGANIZATION OF EDUCATION PROCCESS  The medical organization of education should determine the responsibility and authority for the organization, coordination, management and evaluation of each training base, clinical base and educational process.			+	
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12.4.1 12.4.2 12.5 12.5.1	STUCTURE OF THE PROGRAM, CONTENT AND DURATION  The medical education organization should describe the overall structure, composition and duration of the educational program, clearly establish the mandatory component and component of choice, integrate practice and theory, take into account the requirements of national legislation and provide an adequate picture of how local, national or regional health systems are oriented towards the needs of medical assistance to the population.  The medical education organization should, when deciding on the duration of the program, take into account the required final results of training basic medical education in relation to the chosen field of medicine, the requirements for performing different roles of certified professionals in the health sector, possible alternatives for using time-based learning.  ORGANIZATION OF EDUCATION PROCCESS  The medical organization of education should determine the responsibility and authority for the organization, coordination, management and evaluation of each training base, clinical base and educational process.  The medical education organization should guarantee clinical training in conditions of multi-disciplinary clinics and			+	
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	ampleyees residents and other relevant stakeholders			l		
12.5.3	employees, residents and other relevant stakeholders.  Medical organization of education should guarantee training					
12.3.3	in conditions of various clinical bases that are characterized		+			
	by the profile of clinics, different categories of patients, the					
	level of medical care (primary medical care, specialized					
	medical care, highly specialized medical care), hospitals and					
	outpatient clinics.					
12.5.4	The medical education organization should coordinate		+			
12.3.4	numerous training bases to obtain appropriate access to		т			
	various aspects of the chosen field of medicine.					
12.5.5	The medical education organization should have access to the		+			
12.5.5	resources needed to plan and implement teaching methods,		'			
	evaluate students, innovate the training program.					
12.6	RELATIONSHIP BETWEEN POSTGRADUATE					
12.0	MEDICAL EDUCATION AND PROVISION OF					
	HEALTH CARE					
12.6.1	The medical education organization should describe and		+			
12.0.1	recognize the role of mentoring in professional development,					
	ensure integration between training and health care (training	*				
	in the workplace), ensure that training is complementary and					
	consistent with the requirements for medical care.	1				
12.6.2	The medical education organization should effectively		+			
	organize the use of the health system's capabilities or the			L .		
	provision of medical assistance for the purpose of training,					
	which involves the use of the capabilities of various clinical			<b>L</b>		
	bases, patient problems and clinical problems for learning		7			
	purposes, and at the same time, meeting the requirements for					
	medical care.					
	TOTAL		17	6	2	0
13.	STANART "RESIDENTS' EVALUATION"		17	6	2	0
13.1	STANART "RESIDENTS' EVALUATION" EVALUATION METHOD		17	6	2	0
	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and		+	6	2	0
13.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish			6	2	0
13.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for	Ī		6	2	0
13.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification	I		6	2	0
13.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills	Ī		6	2	0
13.1 13.1.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.			6	2	0
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13.1 13.1.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect	I		6	2	0
13.1 13.1.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.	I		l	2	0
13.1 13.1.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the	I		+	2	0
13.1 13.1.1	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment,			l	2	0
13.1.1 13.1.2	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.		+	l	2	0
13.1 13.1.1	STANART "RESIDENTS' EVALUATION"  EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and			l		0
13.1.1 13.1.2	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation		+	l	2	0
13.1.1 13.1.2 13.1.3	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation methods.		+ +	l		0
13.1.1 13.1.2	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation methods.  The medical organization of education should use the		+	l		0
13.1.1 13.1.2 13.1.3	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation methods.  The medical organization of education should use the appellation system of evaluation results based on the		+ +	l		0
13.1.1 13.1.2 13.1.3	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation methods.  The medical organization of education should use the appellation system of evaluation results based on the principles of fairness and through compliance with the legal		+ +	l		0
13.1.1 13.1.2 13.1.3 13.1.4	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation methods.  The medical organization of education should use the appellation system of evaluation results based on the principles of fairness and through compliance with the legal process.		+ +	l		
13.1.1 13.1.2 13.1.3	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation methods.  The medical organization of education should use the appellation system of evaluation results based on the principles of fairness and through compliance with the legal process.  The medical education organization should promote the		+ +	l		
13.1.1 13.1.2 13.1.3 13.1.4	EVALUATION METHOD  The medical education organization should formulate and implement a resident assessment policy, identify, establish and publish principles, objectives, methods and practices for the assessment of residents, including specialist qualification exams and ensure that the evaluation covers knowledge, skills and professional behavior and attitudes.  The medical education organization should use an additional set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of assessment methods and formats with respect to the established learning outcomes.  The medical organization of education must formulate the criteria for passing examinations or other types of assessment, including the number of permitted retakes.  The medical education organization should study and document the reliability, validity and validity of evaluation methods.  The medical organization of education should use the appellation system of evaluation results based on the principles of fairness and through compliance with the legal process.		+ +	l		

13.1.7	The medical organization of education should record different					
15.1./			+			Ì
	types and stages of training in the training journal or					Ì
	protocols.					
13.2	ASSOSIATION BETWEEN THE EVALUATION AND					Ì
	EDUCATION					ļ
13.2.1	The medical education organization should use evaluation		+			
	principles, methods and practices that are compatible with the					İ
	established learning outcomes and teaching methods, ensure					İ
	that the established learning outcomes are achieved by the					İ
	·					İ
	trainees, promote learning, determine adequacy and					Ì
	compliance with learning.					
13.2.2	The medical organization of education should ensure the		+			Ì
	provision of concrete, constructive and fair feedback up to					Ì
	date to residents on the basis of the results of assessing their					Ì
	knowledge and skills.					Ì
13.2.3	The medical organization of education should use the		+			
	principles, methods and practices of evaluation that promote					Ì
	integrated learning and involvement in practical clinical					Ì
	work, provide inter-professional training.	*				Ì
	TOTAL		9	1		
14			9	1		_
14.	STANDARD "RESIDENTS"					↓
14.1	RECEPTION POLICY AND SELECTION		1			<u> </u>
14.1.1	The medical education organization should consider the			+		
	relationship between the mission and the selection of					
	residents.			No.		
14.1.2	The medical organization of education must balance the		+			_
14.1.2	existing potential and opportunities for training and		'			
	recruitment of residents.					
1412				-		<b>├</b>
14.1.3	The medical organization of education should formulate and					
	implement a policy on the criteria and process for selecting					
	students, including the reception of residents with disabilities,					
	which requires the necessary conditions and equipment in					
	accordance with national laws and regulations, and take into					
	account the safety of doctors and patients.					
14.1.4	The medical education organization should formulate and		+			
	implement a policy of transferring residents from other					
	national or international programs.					
14.1.5						+
14.1.5	The medical education organization should guarantee a high		<del>,                                    </del>			
	level of understanding of biomedical sciences, achieved at the					
	undergraduate level before the beginning of postgraduate					
	education.					
14.1.6	The medical organization of education must guarantee the		+			1
	transparency of the selection procedure and the equality of					1
	access to postgraduate education.					
14.1.7	The medical organization of education should be considered,				+	<b>†</b>
,	within the framework of its procedure, the selection of					1
	specific abilities of applicants in order to enhance the result of					1
1410	the learning process in the selected field of medicine.					₩
14.1.8	The medical organization of education should develop an		+			
	appeal procedure regarding the decision of the admissions					1
	committee.					<u> </u>
14.1.9	The medical education organization should include	]	+			1
	associations and organizations of residents in the process of					
	developing a policy of admission and selection of residents.					1
14.1.10	The medical education organization should periodically		+			t
1 1.1.10	review the policy of admission, based on appropriate social		'			
	10 110 w the policy of admission, based on appropriate social	<u>l</u>		<u> </u>	<u> </u>	Щ_

	and professional data, to meet the needs of public health.				
14.2	NUMBER OF TRAININGS				
14.2.1	The medical organization of education should establish the		+		
17.2.1	number of residents that corresponds to clinical / practical		-		
	training opportunities, the potential for clinical mentoring and				
	other available resources, national and regional human				
	resources needs in accordance with the chosen field of				
	medicine, and if the medical education organization does not				
	independently determine the number of students demonstrate				
	their responsibility, explaining the existing relations with the				
	authorized bodies and I focus on the consequences of the				
	decisions on the reception of, for example, the imbalance				
	between the set and the existing potential and opportunities				
1122	bases and resources to prepare.				
14.2.2	The medical education organization should have accessible		+		
	information about the health needs of society, which includes				
	the consideration of a balanced set in accordance with the				
	gender, ethnic and social characteristics of the population,				
	including the potential need for a special policy of recruiting	7			
	and accepting their groups of small peoples and doctors from	A			
112	the countryside.				
14.2.3	The medical education organization should review the		+		
	number of residents through consultation with stakeholders.				
14.2.4	The medical organization of education should adapt the		+		
4	number of residents, taking into account the available				
	information on the number of qualified candidates, available				
	information on national and international labor markets, the				
	unpredictability of the exact needs of health professionals in			7	
	various fields of medicine.			<u> </u>	
14.3	SUPPORT AND CONSULTING OF RESIDENTS				
14.3.1	The medical education organization should have a system of		+		
	academic counseling of residents, provide advice to residents,				
	taking into account the results of monitoring progress in				
	training, including unintentional incidents.				
14.3.2	The medical education organization should have a system of		+		
1	academic counseling of residents, provide advice to residents,				
N.	taking into account the results of monitoring progress in				
	training, including unintentional incidents.	A			
14.3.3	The medical education organization should guarantee		+		
	confidentiality with regard to counseling and support				
	provided and provide support for career guidance and career				
	planning.				
14.3.4	The medical education organization should provide support in		+		
	case of a professional crisis and involve student organizations				
	(residents) in solving their problem situations.				
14.4	REPRESENTATION OF RESIDENTS				
14.4.1	The medical organization of education should develop and		+		
	implement a policy for the representation of residents and				
	their due in the formulation of the mission and the final				
	results of training, participation in the development of the				
	training program, planning of working conditions, evaluation				
	of the training program, management of the training program.				
14.4.2	The medical organization of education should encourage		+		
· · · · <del>-</del>	resident organizations to participate in decision-making about				
	the processes, conditions and rules of education and training.				
14.5	WORKING CONDITIONS				
1 1.0	TO CAMERICO COLIDATATOLIO	l	L		

1451		1	1	ı		
14.5.1	A medical education organization must conduct a training		+			
	program in accordance with paid positions / scholarships or					
	other ways to finance residents.					
14.5.2	The medical education organization should ensure the		+			
	participation of residents in all medical activities of clinical					
	facilities, including the inclusion of home-related duties					
1450	related to the training program.					
14.5.3	The medical organization of education must determine the		+			
	responsibility and communicate to all information about the					
	participation and conditions of the provision of medical					
	services by residents.					
14.5.4	The medical organization of education must provide		+			
	additional training, with forced interruptions in preparation,					
	on the occasion of pregnancy (including maternity / paternity					
	leave), illness, military service or secondment.					
14.5.5.		-		<del> </del>	1	
14.5.5.	The medical education organization should ensure that the			+		
	participation of residents in the provision of medical services					
	is not dominant and is not excessive.					
14.5.6	The medical organization of education should take into	7		+		
	account the needs of patients, the continuity of medical care					
4	and the educational needs of residents in the planning of duty					
- 400	and schedule for work on a call.					
14.5.7	The medical organization of education should be allowed to		+			
14.5.7	undergo special training in accordance with the individual					
	training program and taking into account previous experience		-			
	in providing medical care.					
14.5.8	The medical organization of education should ensure that the		+			
	quality of the training according to the individual program					
	and the total duration of training is not less than that of					
	residents who have completed a full training program.					
	TOTAL		23	4	1	0
15.	STANDARD "TEACHERS"					
15.1	RECEPTION TO WORK AND POLICY OF					
13.1						
15.1.1	SELECTION			3		
15.1.1	The medical organization of education should develop and		+			
	implement a policy of recruiting and accepting teachers,					
183	managers and mentors, which determines the required	1				
	experience, the criteria for scientific, educational,					
	pedagogical and clinical achievements, including the balance					
	between teaching, research and qualification of a specialist,					
	their responsibility, in particular the balance between					
	teaching, research and the provision of medical care.					
15 1 2						
15.1.2	The medical organization of education should, in its selection		+			
	policy, take into account the mission of the educational					
	program, the needs of the education system and the needs of					
	the medical care system.					
15.1.3	The medical organization of education should, in developing		+			
	and implementing the personnel policy, determine the					
	responsibility of all physicians as part of their professional					
	duties to participate in postgraduate education based on					
	practice, reward for their participation in postgraduate					
	training of specialists, ensure that teachers are practitioners in					
	relevant fields, that teachers in sub-specialties are appointed					
	only for a certain period of study in accordance with cn					
	tsifikoy training programs and qualifications.					

15.2	COMMITMENTS AND DEVELOPMENT					
15.2.1	The medical organization of education must ensure that		+			
13.2.1	teachers and residents have enough time for teaching,		'			
	mentoring and training, provide a program for the					
	development of teachers and mentors, and guarantee periodic					
	evaluation of the activities of teachers and mentors.					
15.2.2	The medical organization of education should, when					
13.2.2			+			
	developing and implementing the personnel policy, include in					
	their development program employees and the support of teachers their training and further professional development					
	of both professional and pedagogical qualifications; evaluate					
	and recognize the merits of academic activities as teachers,					
	mentors; to determine the ratio between the number of					
	teachers who received recognition and the number of					
	residents, guaranteeing their individual relationship and					
	monitoring the achievements of residents.		~	0	0	
4.5	TOTAL		5	0	0	0
16.	STANDARD "EDUCATIONAL RESOURCES"					
16.1	MATERIAL AND TECHNICAL SUPPORT AND EQUIPMENT					
16.1.1	The medical education organization should provide residents	1	+			
10.1.1	with a base and opportunities for practical and theoretical		THE R.			
	training, access to the latest professional literature and			L.		
	sources, adequate information and communication					
	technologies and equipment for teaching practical skills, a					
1612	safe environment for self-directed learning.					
16.1.2	The medical organization of education should regularly		+			
	evaluate and update material and technical equipment and			1		
	equipment for their compliance and quality assurance of					
1.5.0	postgraduate education.					
16.2	CLINICAL BASES					
16.2.1	The medical education organization should select and		+			
	approve the training bases and provide access to appropriate			1		
	clinical / practical training facilities, a sufficient number of					
	patients, appropriate patients and information about patients					
- 1	with various problems to achieve learning goals, including					
	the use of both inpatient and outpatient care, and watches.	_				
16.2.2	The medical education organization should, in selecting a	All	+			
	learning environment and clinical base, ensure that the					
	training program includes questions on health promotion and					
	disease prevention, training in other relevant clinics /	-				
	institutes and PHC profiles.					
16.3	INFORMATION TECHNOLOGY					
16.3.1	The medical education organization should guarantee access		+			
	to the web and electronic media and effectively use					
	information and communication technologies, with ethical					
	compliance, as an integrated part of the educational program.					
16.3.2	The medical education organization should encourage the use		+			
	of existing and new information and communication					
	technologies by teachers and students for: self-study,					
	communication with colleagues, access to relevant patient					
	data and health information systems, patient management,					
	practices and work in health care delivery systems.					
16.4	CLINICAL COMMANDS					
16.4.1	The medical education organization should guarantee the		+			
10.7.1						1

	health professionals.				
16.4.2	The medical education organization should provide training		+		
	in an interdisciplinary / interprofessional team and develop				
	the ability to work effectively with colleagues and other				
	health professionals.				
16.4.3	A medical education organization should promote the		+		
	development of the ability to guide and educate other health				
	professionals.				
16.5	MEDICAL SCIENTIFIC RESEARCH AND				
	ACHIEVEMENTS				
16.5.1	The medical education organization must ensure that		+		
	residents receive knowledge and are able to apply the				
	scientific bases and methodology of scientific research in the				
	selected field of medicine and ensure the appropriate				
	integration and balance between training and research.				
16.5.2	The medical organization of education should provide		+		
	information about the research base and priority areas in the				
	field of scientific research of the medical organization of	1			
1670	education	- ``.			
16.5.3	The medical education organization should promote the	- AN	+		
	participation of residents in medical research, development of				
	quality of health and the health system that include scientific				
	research in basic biomedical, clinical, behavioral and social				
1654	sciences.				
16.5.4	A medical education organization should provide the		+		
	residents with adequate time in the training program for				
16.5.5	conducting research.				
10.5.5	The medical organization of education should be granted		+	4	
	access to equipment for scientific research and ongoing scientific activities at training bases.				
16.6	EXPERTISE IN THE FIELD OF EDUCATION				
16.6.1	The medical organization of education should develop and		+		
10.0.1	implement a policy on the use of expertise in education		Т		
	regarding the planning, implementation and evaluation of the				
	educational program.				
16.6.2	The medical organization of education should be given due		+		
10.0.2	attention and ensure the development of expertise in assessing				
	education and research in the discipline of medical education.		7		
16.6.3	The medical organization of education should promote the		+		
	development of the interests of employees in conducting				
	research in education.	7			
16.7	PREPARATION IN OTHER INSTITUTIONS				
16.7.1	The medical education organization should develop and		+		
	implement an accessibility policy for residents and provide				
	them with training opportunities in alternative institutions				
	inside or outside the country.				
16.7.2	The medical organization of education should create a system		+		
10.7.2	for the translation and offsetting of learning outcomes		'		
	through active program coordination between training				
	institutions and the use of academic credits.				
16.7.3	The medical education organization should promote regional		+		
10.7.5	and international exchange of teachers and residents, by		'		
	providing appropriate resources.				
	providing appropriate resources.				

17. STANDARD "ESTIMATION OF EDUCATIONAL PROGRAMS"  17.1 MECHANISMS FOR MONITORING AND EVALUATION  17.1.1 The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	0 (
facilitating the exchange and mutual recognition of the elements of instruction.  TOTAL  19 0  17. STANDARD "ESTIMATION OF EDUCATIONAL PROGRAMS"  17.1 MECHANISMS FOR MONITORING AND EVALUATION  17.1.1 The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	0 (
elements of instruction.  TOTAL  19 0  17. STANDARD "ESTIMATION OF EDUCATIONAL PROGRAMS"  17.1 MECHANISMS FOR MONITORING AND EVALUATION  17.1.1 The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	0 (
TOTAL  19 0 17. STANDARD "ESTIMATION OF EDUCATIONAL PROGRAMS"  17.1 MECHANISMS FOR MONITORING AND EVALUATION  17.1.1 The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	0 (
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EVALUATION  17.1.1 The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	
17.1.1 The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	
monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	
mechanism for program evaluation, and evaluate the program	
taking into account the mission, the required final learning	
outcomes, the content of the educational program, the	
assessment of knowledge and skills, and educational	
resources.	
17.1.2 The medical organization of education should evaluate the +	
program regarding the policy of admission and the needs of	
education and the health system, the process of implementing	
the educational program, evaluation methods, the progress of	
residents, the qualifications of teachers, identified problems	
and shortcomings.	
17.1.3 The medical education organization should ensure that the	
relevant evaluation results are aimed at improving the	
educational program and involving stakeholders in the	
evaluation of the program.	
17.1.4 The medical education organization should ensure the +	
transparency of the process and the results of the assessment	
for management and all stakeholders.	
17.2 FEEDBACK FROM TEACHERS AND RESIDENTS	
17.2.1 The medical organization of education should study the +	
feedback on the educational program from teachers, residents, employers.	
17.2.2 The medical education organization should actively involve +	
educators and residents in the planning of the evaluation	
program, and use the evaluation results to improve the	
program.	
17.2.1 The medical organization of education should study the	
feedback on the educational program from teachers, residents,	
employers.	
17.3 RESULTS OF RESIDENTS AND QUALIFIED	
SPECIALISTS	
17.3.1 The medical organization of education should constantly +	
monitor qualified specialists, provide feedback on the clinical	
practice of qualified professionals from employers, establish	
and apply a mechanism for evaluating the program, using the	
collected data on the results of the clinical practice of	
qualified professionals.	
17.3.2 The medical organization of education should be informed +	
about the results of the assessment of the clinical practice of	
qualified specialists of the persons responsible for the	
reception of residents and the planning of the educational	
program.	
17.3 INVOLVEMENT OF INTERESTED PARTIES	
17.3.1 The medical education organization should involve the main +	
stakeholders in the program for monitoring and evaluating the	

	educational program.					
17.3.2.	The medical education organization should provide access to		+			
17.5.2.	the interested parties for the results of the course evaluation		Т			
	and the educational program, it is necessary to study and					
	analyze the results of feedback on the independent clinical					
	practice of specialists and feedback on the educational					
	program.					
17.4	PROCEDURE FOR THE APPROVAL OF					
	EDUCATIONAL PROGRAMS					
17.4.1	The medical organization of education must document that all		+			
	educational programs, including clinical bases, are approved					
	by the authorized body on the basis of clearly established					
	criteria, evaluation of the educational program and the					
	available authorities for awarding or revoking the recognition					
	by the authorized body of clinical bases or courses of					
	theoretical training.					
17.4.2	The medical organization of education should develop and		+			
	implement a system of quality control of clinical facilities and					
	other educational resources, material and technical	1				
	equipment, including visits to training bases or other	<b>N</b> .				
	established procedures.					
	TOTAL		10	3	0	0
18.	STANDARD "MANAGEMENT AND					
10.1	ADMINISTRATION"					
18.1	CONTROL					
18.1.1	The medical organization of education must ensure that the		+			
	educational program is conducted in accordance with the					
	requirements of the regulatory rules for the reception of			4		
	residents (selection criteria and quantity), the process, the					
	assessment of knowledge and skills, the established learning outcomes.					
18.1.2	The medical education organization should document the		+			-
10.1.2	completion of studies by awarding degrees, issuing diplomas,		'			
	certificates or other official qualifications for use by national	_		_		
	and international authorities and should be responsible for					
1	programs to ensure and improve the quality of postgraduate					
	training.					
18.1.3	The medical organization of education should guarantee the		+			
	transparency of management and decision-making, the					
	adequacy of the program to the health needs of the population					
	and the provision of medical services.					
18.2	ACADEMIC LEADERSHIP					
18.2.1	The medical education organization should determine the		+			
	responsibilities and responsibilities of management / staff in					
	postgraduate medical education.					
18.2.2	The medical education organization should evaluate the		+			
	management / staff at regular intervals in relation to the					
	achievement of the mission postgraduate training program,					
	the required outcomes of the program.					
18.3	BUDGET FOR TRAINING AND RESOURCE					
10 2 1	ALLOCATION  The medical organization of advantion must determine the					-
18.3.1	The medical organization of education must determine the		+			
	responsibility and authority for managing the budgets of the					
18.3.2	educational program.  The medical organization of education should have a clear set		-1-			
10.3.2	of responsibilities and authority to provide educational		+			
	of responsibilities and additionly to provide educational					L

				l		
	programs with resources, including a targeted training budget,					
	should allocate the resources necessary to implement and					
	implement the training program and allocate educational					
	resources in accordance with the needs.					
18.3.3	The medical education organization should manage the		+			
	budget in order to support the obligations of teachers and					
	residents to provide medical care and innovation in the					
	program.					
18.4	ADMINISTRATION AND MANAGEMENT					
18.4.1	The medical education organization should ensure the		+			
	availability of an appropriate administrative and academic					
	staff, staff to support the implementation of the educational					
	program, proper management and resource allocation.					
18.4.2	The medical education organization should develop a quality		+			
10.4.2			+			
	assurance program for management, including regular					
10.10	reviews.					
18.4.3	The medical education organization should ensure that a		+			
	regular management review is conducted to achieve quality					
	improvement.					
18.5	REQUIREMENTS AND NORMATIVE ACTS					
18.5.1	The medical organization of education must follow the	1		+		
	definition of the national authorized bodies of the number and					
	recognized medical specialties and other functions of medical					
	experts for the training of which postgraduate programs are					
	being developed.			h		
18.5.2	The medical organization of education must follow the		+			
10.5.2	definition of the national authorized bodies of the number and		'			
	recognized medical specialties and other functions of medical					
				4		
	experts for the training of which postgraduate programs are					
	being developed.				_	_
	TOTAL		12	1	0	0
19.	STANDARD "CONTINUOUS IMPROVEMENT"					
19.1	Medical organization of education in the implementation of		+	*		
	the development of postgraduate medical education with the					
700	involvement of relevant stakeholders should initiate					
	procedures for regular review and updating of the process,					
\ \	structure, content, learning outcomes / competencies,					
	assessment of knowledge and skills, program learning	4	7			
	environment, document shortcomings, allocate resources for					
	continuous improvement					
19.2	A medical education organization should					
*	- to base the updating process on prospective studies and		+			
	analyzes and on the results of their own experience and					
	studying the literature on medical education					
	- to ensure that the process of updating and restructuring leads		+			
	to a review of the policy and practice of the postgraduate		Т			
	medical education program in accordance with past					
10.2	experience, ongoing activities and future prospects.					
19.3	The medical education organization should, during the					
	renovation process, pay attention to the following questions:					
	- Adaptation of the mission and results of postgraduate		+			
	training programs in the scientific, socio-economic and					
	cultural development of society,					
	- Modification of the established learning outcomes after the		+			
	completion of postgraduate education in the selected field of					
	medicine in accordance with documented environmental					
	mostine in accordance with documented environmental	I		l		<u> </u>

	needs is extended to newly completed health professionals,					
	the changes may include clinical skills, public health					
	education and participation in care, the relevant duties					
	assigned at the end of the program.					
	- Adaptation of educational approaches and teaching methods		+			
	to ensure their relevance and relevance					
	- Correction of the structure, content and duration of training		+			
	programs in the residency in accordance with the					
	achievements in the basic biomedical sciences, clinical,					
	behavioral and social sciences, changes in the demographic					
	situation and population structure on health / illness, as well					
	as socio-economic and cultural conditions, ensure that new					
	relevant knowledge, concepts and methods are included, and					
	that obsolete ones are abolished					
	-Development of principles and methods of assessment in		+			
	accordance with changes in established results and methods					
	of training					
	-Adaptation of the policy of selection of residents, methods of		+			
	selection and reception of residents to changing expectations	1				
- /	and circumstances, needs for human resources, changes in					
	basic medical education and curriculum requirements	٠,				
	-Adaptation of the policy of recruitment and development of		+			
	academic mentors and teachers in accordance with changing			L		
	needs in postgraduate education					
	- Update equipment at clinical training bases and other		+			
	educational resources to the changing needs in postgraduate					
	medical education, that is, the number of residents, the					
	number and profile of teachers, the training program and the					
	modern principles of training					
	-Enhancement of the program monitoring and evaluation		+			
	process					
	-Development of organizational structure, management and		+			
	management to overcome changing circumstances, and the					
	needs of postgraduate education, and over time, the collection					
	of interests of various stakeholder groups	5.				
	TOTAL		13	0	0	0
1	TOTAL IN GENERAL		119	22	4	0
				1		