



INDEPENDENT AGENCY FOR  
ACCREDITATION AND RATING

# REPORT

**on the results of the external expert panel (EEP)  
evaluation of the compliance with the requirements of the  
specialized accreditation standards  
of the residency courses (specialties):  
6R110800 «Pulmonology, including pediatric»**

**SC “ASTANA MEDICAL UNIVERSITY”  
April 03-05, 2017**

Astana 2017

**INDEPENDENT AGENCY FOR ACCREDITATION AND RATING  
EXTERNAL EXPERT PANEL**

*Addressed to the  
IAAR Accreditation Council*



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**Astana, 2017**

Based on the Order of the Independent agency for accreditation and rating (hereinafter – IAAR) no. 12-17-OD as of 15/03/2017 external expert panel evaluated academic activities compliance of the following residency academic programs of the JSC “ASTANA MEDICAL UNIVERSITY” (hereinafter – AMU) with the specialized accreditation standards of IAAR:

6R110800 «Pulmonology, including pediatric» 6R112800 «Cardiosurgery, including pediatric».

The Report of the external expert panel (EEP) contains an assessment of the academic programs’ compliance to the IAAR criteria, as well as EEP recommendations for further activity improvements.

EEP membership:

**1. Panel Chair** – Yermukhanova Lyudmila, Head of the Department “Public health and health care, Ph.D. in medicine, M.Ospanov Western-Kazakhstan State Medical University (Aktobe city);

**2. International expert** – Zakrevskiy Viktor, Doctor of medical sciences, State-owned Academic institution of the higher professional education “North-Western State Medical University named after I.I.Mechnikov (Saint-Petersburg city, Russian Federation);

**3. Expert** – Karibayeva Dina, Head of the Department of general medical practice no. 2, Ph.D. in medicine, Associate Professor, Kazakh National Medical University named after S.D.Asfendiyarova (Almaty city);

**4. Employer** – Abdrakhmanova Raushan – Chief nurse, JSC “Railway Hospitals of the Emergency Medicine” (Astana city);

**5. Employer** – Utesheva Natalya – lung specialist of therapeutic department no. 1, Hospital of the Medical center of the Department of Presidential Affairs of the Republic of Kazakhstan (Astana);

**6. Student** – Mukasheva Gulmira, resident of the 2<sup>nd</sup> year of study on the specialty «Radiation therapy», JSC “Kazakh Medical University of continuous education” (Almaty city);

**7. Student** – Izbakiyeva Rizvangul, resident of the 3<sup>rd</sup> year of study on the specialty “Obstetrics and Gynaecology, including pediatric” (Almaty city);

**8. Observer from the Agency** – Nurkhamyetova Aiman, Head of the post accreditation monitoring (Astana city).

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## I. INTRODUCTION OF THE JSC «ASTANA MEDICAL UNIVERSITY»

The history of JSC "AMU" is a way of establishment and perfection throughout more than half a century. By the decision of the Central Committee of the Communist Party and the Council of Ministers of the Kazakh SSR in October 1964 the Tselinograd State Medical Institute was incorporated.

Over the years of existence of the Medical Institute, there have been multiple changes in its organizational form, reforming the management system in accordance with the requirements of the time. In 1997 the institute was reorganized into the Kazakh State Medical Academy. By the Governmental Decree of the Republic of Kazakhstan as of May 13, 2008 No. 451 Republican State-owned enterprise "Kazakh State Medical Academy" under the Ministry of Health care of the Republic of Kazakhstan was reorganized into a joint-stock company "Kazakh Medical Academy" with 100% state participation in the authorized capital. Since January 6, 2009, JSC "Kazakh Medical Academy" has been transformed into JSC "ASTANA MEDICAL UNIVERSITY" and became a member of JSC "National Medical Holding". Clinical facilities of the University were the largest national and republican centers and research institutes, subsidiaries of the National Medical Holding. Since July 1, 2010, the University has been under the control of the Ministry of Health of the Republic of Kazakhstan (hereinafter - MH RK).

Currently, the university has a license from the Committee for Control in Education and Science under the Ministry of Education and Science of the Republic of Kazakhstan as of 31.01.2009, registration number 0064050, series AB, without limitation of the term, for the right to conduct academic activities under programs of higher and postgraduate professional education.

The University has a multilevel system of education: pre-university - preparatory courses of study, higher pre-graduate - in 6 specialties of the bachelor's degree, postgraduate - in 25 specialties of the residency, in 5 specialties of the master degree, 3 specialties of Ph.D. doctoral and additional professional studies - in 56 specialties.

Within the framework of the state assignment under the program 031 "Implementation of international standards in the field of hospital management", JSC "AMU" implements academic program for the training of "Master of Business Administration" (MBA) in the field of hospital management.

**Mission of the HEI.** ASTANA MEDICAL UNIVERSITY is one of the leaders in the system of medical education in the training of competitive health professionals on the principle of "lifelong education for all", carrying out its activities in accordance with national and international quality standards in the interests of the individual, society and the state.

In accordance with the Mission, the University in the future positions itself as the leading academic, research, autonomous medical university, scientific and clinical center of the Republic of Kazakhstan, integrated into the world educational and scientific space.

**The structural units of JSC "AMU" are as follows:**

- ✓ **the supreme body** is the Sole Shareholder;
- ✓ **management body** - Board of Directors;
- ✓ **executive body** - the Management Board;
- ✓ **supervisory body** - Internal Audit Service.

**Language of instruction:** state language, Russian and English.

The relationship between the students and the University is regulated by the Articles of incorporation, the Code of Corporate Culture and Ethics, and bilateral agreements (tripartite with the employer, the Mayor's house) on the provision of academic services that determine the level of education received, the terms of study, the amount of tuition and other conditions.

In 2011, the University integrated the EFQM Excellence Model with the existing quality management system. In November 2011, the University successfully passed the validation by international experts (assessors) to meet the criteria and fundamental concepts of the EFQM Excellence Model at the level of "Striving for Excellence", and in November 2012 - the assessment of the level of excellence of the EFQM Model "Recognized Excellence", 4 stars.

In June 2013, the University successfully passed 3 recertification audit procedures of the management system in accordance with the international standard ISO 9001: 2008 and received the Certificate of the AFNOR body (France).

In 2013 The University's activity is highly appreciated by the European Quality Management Foundation and awarded a 5-star certificate of the Excellence Model.

In October 2013, in Bangkok city, Thailand, the university was awarded the Asian Award for Excellence and Best Practice in Quality Management at the ANQ-2013 Congress of the Asian Organization for Quality.

In addition, in 2013 the university successfully passed the national institutional accreditation procedure (IQAA).

Based on the results of the general rating of the best universities in Kazakhstan throughout 2009-2013, the University among medical HEIs has been steadily taking the leading positions: in 2009, 2010 - 3<sup>rd</sup> place, the last 3 years - stable 1<sup>st</sup> place.

According to the criteria and indicators of the academic ranking of the Master's degree programs of the Bologna Process Center and the academic mobility of the Ministry of Education and Science of the Republic of Kazakhstan in 2013, the academic programs of the Master degree level of JSC "AMU" came were ranked as second.

According to the results of the independent rating of HEIs of the Republic of Kazakhstan in 2016, conducted by IAAR the University became the 2<sup>nd</sup>. According to the rankings of the master's degree academic programs of the HEIs of Kazakhstan among the medical HEIs of Kazakhstan in 2016, the successes in the rating of the IAAR were as follows:

Master degree:

- 2<sup>nd</sup> place in the specialty "Nursing care";

The university has 5 academic buildings with lecture halls and class rooms with multimedia support, academic and clinical center, computer classes with access to the Internet and with modern powerful computers, a library with reading rooms, modern laboratories. In addition, all structural units are computerized, with social facilities - "Medical Center AMU" LLP, first aid room, student hostel, gym, conference hall, 2 dining rooms and buffets in academic buildings. A museum of the Medical University of Astana was established at the University.

In 2016, the University signed the Executive Protocol, the Agreement on Cooperation and Strategic Partnership with the Medical School of the Sapienza University of Rome, where the University plans to implement a project to modernize medical education, including the development of selected, priority academic programs:

- Public health, management and expertise in health care;

- Neurology;

- Anesthesiology and reanimation.

In accordance with the Law of the Republic of Kazakhstan "On Science", the University's scientific activity in 2014 was successfully accredited as an entity of scientific activity.

The University operates 1 scientific and clinical council and conducts 4 scientific seminars.

One of the important activities of JSC "AMU" is clinical activity. Medical treatment related work of the University is coordinated and analyzed by the department of clinical work and evidence-based medicine, established in 2011.

At present, 47 clinical departments of JSC "AMU" are based in the 66 medical organizations of Astana city. At the clinical departments of the University there are more than 450 highly qualified staff specialists.

## II. ANALYSIS OF THE SPECIALIZED SELF-ASSESSMENT REPORT

HEI presents self-assessment report according to the criteria of specialized accreditation of the residency academic program 6R110800 "Pulmonology, including pediatric" of JSC "AMU" is presented. The report includes a description of standards and applications according to relevant standards. The report of the university contains the statement of the rector Shaidarov M.Z. validating the accuracy and credibility of the report, as well as a list of members of the self-assessment working group on the criteria of the specialized accreditation of the residency academic program "Pulmonology, including pediatric", indicating the responsibilities of each member of internal commissions, information on the person responsible for conduct of self-assessment of the academic program.

Specialized accreditation of the academic program for the residency specialty 6R110800 "Pulmonology, including pediatric" is conducted in accordance with the Strategic Development Plan of JSC "ASTANA MEDICAL UNIVERSITY" for 2017-2021, the University's objectives in the field of quality for 2017.

The HEI is self-reviewed under the rector's order as of January 24, 2017 No. 19-n / κ "On self-assessment procedure of the residency academic program "Pulmonology, including pediatric".

Self-review of the academic program was carried out throughout the period from January 25, 2017 to March 1, 2017 in accordance with existing regulations and methodological recommendations: - The Law of the Republic of Kazakhstan "On Education" as of July 27, 2007 No. 319-III with additions and amendments as of 01/01/2017; - the Strategic development plan of the Republic of Kazakhstan until 2020; - The State Program for the Development of Education of the Republic of Kazakhstan for 2011-2020; - The State Health Development Program of the Republic of Kazakhstan "Densaulyk (Health care)" for 2016-2019; - IAAR guidance on self-assessment of academic programs of the residency specialty "Pulmonology, including pediatric".

Twenty-seven people participated in the self-assessment work, 5 of them (19%) have candidates' degrees, 4 (15%) are doctors of sciences, 1 (4%) - PhD. holder.

Working group on the preparation of the report, and all the staff of the University during the period of self-assessment in preparation for the special accreditation of the residency academic program 6R110800 "Pulmonology, including pediatric", a certain work was done: the necessary information was collected in accordance with the IAAR guidance for conduct of self-assessment of the academic program, a thorough analysis of the materials and their content was reflected in the self-assessment report, which included all the necessary information on all aspects of the academic program (hereinafter - AP) implementation. The analysis of the University activities for the period from 2012 to 2016 was carried out on the basis of annual departmental and university reports using SWOT and FUND analysis methods, questionnaires and surveys, as well as statistical methods for processing information materials on the University activities.

As a result of the integrated assessment of the residency AP "Pulmonology, including pediatric", weak and strong aspects and improvement areas in each standard have been identified.

### **Standard 1: MISSION AND FINAL RESULTS**

The mission of the residency academic program is implemented in accordance with the mission of JSC "ASTANA MEDICAL UNIVERSITY" and consists in the qualitative training of competitive highly qualified specialists performing their professional activities based on the knowledge and modern innovative intellectual technologies, capable of constant studying under the conditions of dynamically developing modern medicine.



In order to spread the mission and policy of postgraduate education (residency), the university developed a set of promotion activities, creating awareness of the faculty (teaching staff), students, the public, health authorities, residents and other stakeholders. The content of the documents is brought to staff attention at the department meetings, to the attention of the residents - at the curatorial hours, meetings with the deans, and placed on the information stands of the departments and all structural units, the university's website [www.amu.kz](http://www.amu.kz), in the automated information system (AIS) Sirius University.

Residency training for the specialty "Pulmonology, including pediatric" is carried out full-time, the term of study is 2 years.

The training of the resident listener for the specialty "Pulmonology, including pediatric" is conducted in accordance with:

- State educational standards, State Compulsory Educational Standards of the Republic of Kazakhstan-2015;
- industrial qualification framework, Order No. 699 as of 12.11.2009. MH RK "Qualification characteristics of medical and pharmaceutical specialties";
- with professional standards approved in accordance with paragraph 3 of Article 138-5 of the Labor Code of the Republic of Kazakhstan as of May 15, 2007;
- standard academic programs (hereinafter referred to as "SAP 2010");
- standard curriculum (SC);
- Instructive letter No. 8 "On the development of educational and methodological documentation in the training organizations of the Republic of Kazakhstan, implementing residency training" (2010);
- working curricula;
- academic calendar;
- individual plans for the work of the resident listener.

Freedom in compiling an academic program is achieved through the university component.

The training results of residents in the field of specialties are formed at the level of the entire academic program, at the level of the module, a separate discipline.

## **Standard 2: ACADEMIC PROGRAM**

Residents of the specialty 6R110800 "Pulmonology, including pediatric" until 2016 was trained in accordance with the State educational standards RK-2009, at the moment - in accordance with the State Compulsory Educational Standard (SCES-2015); Order of the Ministry of Education and Science of the Republic of Kazakhstan as of 20.04.2011 no. 152 "On approval of the Rules for the organization of the academic process on credit technology training"; Order of the Ministry of Education and Science of the Republic of Kazakhstan as of 02.06.2014. No. 198 "On Amendments and Additions to the Order of the Ministry of Education and Science of the Republic of Kazakhstan as of April 20, 2011 No. 152" On Approval of the Rules for Organization of the Educational Process on Credit Technology of Education "; Standard Curriculum of the MH RK.

In JSC "AMU" implementation of the academic program (AP) in the specialty 6R110800 "Pulmonology, including pediatric" is governed by the regulatory legal document of the University: "Strategy of JSC "ASTANA MEDICAL UNIVERSITY" for 2016-2020", SU-AMU-AP-13-16 "Management of the postgraduate education process", SU-AMU-22-13 "Organization of the academic process on the credit technology of education", SU-AMU-48-12 "Education in the residency", SU-AMU-63-15 "Competent model of the resident" SU-AMU-25-12 "Planning of the academic process", PL-AMU-13-15 "Regulations on the conduct of the current control of the progress, of interim and final students' attestation".

These documents determine the order and organization of specialists' training in the residency in the context of clinical specialties at clinical departments.



The purpose of the residency training on the specialty 6R110800 "Pulmonology, including pediatric" is the preparation and provision of the healthcare sector with qualified pulmonologists who have the system of universal and professional competencies ascertained in the State Compulsory Educational Standard-2015.

Training in the residency is conducted taking into account the principles of continuity - an objective necessary connection of the basic and continuous medical education in the development process. The previous level of education of those wishing to master residency academic programs is of paramount importance in terms of mastering the final results of training in the residency.

### **Standard 3: ASSESSMENT OF RESIDENTS**

Academic achievements of residents in JSC "AMU" are assessed with the help of criteria, regulations and procedures developed in accordance with the set goals and objectives for the implementation of academic programs and assigned qualifications under the current rating system and control of the educational process, in accordance with the legislative, regulatory and internal documents.

In order to determine the extent to which residents study curricula of the state standard of education focused on the final results of training and mastered competences according to the "Qualification characteristics of medical and pharmaceutical specialties" (Order of the Ministry of Health of the Republic of Kazakhstan No. 699 as of 12.11.2009), the current monitoring of progress, and attestation are carried out under the Regulation "On conduct of current monitoring of academic performance, interim and final certification of students" PL-AMU-13-15, approved on July 28, 2015 by the decision of the Management Board of JSC "AMU" No. 8.

Academic achievements on the midterm examination and final forms of students' control in the residency at the University are assessed based on a score-grading system on the basis of "Standard Rules for Conducting Current Monitoring of Academic Progress, Interim and Final State Attestation of Students in Higher Educational Institutions", approved by the Ministry of Education and Science of the Republic of Kazakhstan as of March 18, 2008 no. 125, as well as in accordance with the Regulation "On the rating system for assessing the educational achievements of students" PL-AMU-31-13, approved by the Management Board of JSC "AMU" No. 49 as of November 22, 2013.

The current monitoring of knowledge of resident pulmonologists (formative assessment) is conducted daily by means of verbal inquiries, interview, clinical analysis of the patient, and analysis of situational tasks. Formative evaluation is used to assess final learning outcomes based on the Dublin descriptors.

Interim (midterm examination) control is carried out through the verbal inquiry.

The final assessment (summary evaluation) of the discipline / module is carried out after the completion of the academic discipline / module.

By the decision of the Academic Council of JSC "AMU" final control in the disciplines of the specialty "Pulmonology, including pediatric" is assured through the examination conducted in two stages: stage 1<sup>st</sup> - verbal inquiry, 2<sup>nd</sup> stage - assessment of practical skills.

Upon completion of the module study, the supervisor conducts resident questioning as a form of process assessment and training methodology.

The forms of control are set out in the syllabus, which are developed on the basis of working training programs for students taught under the State Compulsory Educational Standard-2015 and a standard curriculum for students based on State Educational Standards-2009.

Control and measuring tools (midterm and final examination) are compiled in accordance with the working curriculum and the syllabus. Learning kit is provided to residents in printed and e-formats. The e-version is submitted to the Educational and Methodological B and published on the university's website.

Academic and educational portal of JSC "ASTANA MEDICAL UNIVERSITY" LMS.amu.kz has been created. An automated system for managing the academic process on the basis of the Sirius program was introduced: the module of the "Registrar's Office (recording the progress of resident students); an individual student's path has been constructed (recording for elective disciplines); foundation for students' feedback laid by questionnaire; module "Pedagogical Journal"; module "Electronic Dean's Office".

In Sirius, there is a personal study room for students, where his data is placed, with a catalogue of elective disciplines, an individual curriculum, a history of academic achievements, and a transcript. The student has the opportunity to review the curriculum, the schedule of classes and sessions, the academic calendar.

The general policy for assessing residents, including the assessment deadlines, evaluation criteria, methods and forms of conduct, are reflected in the syllabuses of each discipline, guidebook for residents, annually updated. After completion of the exam for each discipline / module, the student is presented a final grade (final assessment). Examination sheet of the exam is made by the teacher in "Sirius" in the section "The progress journal", and then it is printed out in the office of the registrar, who is engaged in the recording and accumulation of the number of hours for all students throughout the training period. In the future, the summary record of the general final assessment is submitted to the dean's office of postgraduate education by the office-registrar. The summary record is taken into consideration during the mid-term evaluation. The form and procedure for conducting final assessment procedure for each academic discipline / module shall be established no later than one month before the beginning of the academic period (academic year) by the University Educational and Methodological Council.

Pulmonary residents who have fully fulfilled the requirements of the individual working curriculum are admitted to intermediate (at the end of each semester) and final state certification (at the end of the second year of study).

The interim certification of residents at the University is carried out based on the working curriculum, academic calendar and working study programs in the form of an interview (verbal interaction). The periodicity and timing of the interim certification are approved by the pro-rector for scientific and clinical activities. During the mid-term assessment, the final assessments of the completed disciplines / modules are taken into account.

At the end of the academic year, on the basis of the interim assessments results, by the University Rector's order students of postgraduate education may be transferred from one course to another. To this end, a transfer mark is determined by the decision of the Academic Council. So, for the 2016-2017 academic year, the transfer mark from the 1<sup>st</sup> to the 2<sup>nd</sup> year of residency accounted for 70-74%, approved at the meeting of the Academic Council No. 1 as of August 31, 2016.

The resident student who completed the course program in full, but did not receive the minimum transfer mark, in order to increase his average grade, is given the opportunity to study again individual disciplines on a paid basis during the summer semester and to pass exams again.

The results of the examinations and proposals for improving the academic process after the completion of the intermediate certification are submitted for discussion at the meetings of the departments and the Committee on Academic Programs of Postgraduate Education.

Final State Attestation (FSA) is a form of state control over the clinical achievements of a resident aimed at determining the correspondence of the knowledge, skills, and competences acquired to the requirements of the state standard of education in the specialty: 6R110800 "Pulmonology, including pediatric". The FSA of residents is implemented in the form of a comprehensive exam conducted in accordance with the Regulation "On conducting current monitoring of progress, interim and final certification of students" PL-AMU-13-15, approved on July 28 by the decision of the Management Board of JSC "AMU" No. 8. The complex examination consists of two parts - theoretical and practical, and determines the level of residents knowledge by specialties. The theoretical part of the exam is conducted in the form of testing. The practical part of the exam is held at the patient's bedside at a clinical facility, where residents

have the opportunity to show the level of mastering practical skills.

The FSA of residents at the University is held within the time frames stipulated by the academic calendar and working curricula of specialties. Residents who completed the academic process in accordance with the requirements of the working curriculum and working training programs are allowed to undertake the final certification. When the final certification is carried out, the membership of the certification panel is approved by the order of the University Rector, which also includes representatives of employers (doctors-pulmonologists with the first and highest qualification category).

The results of the complex examination are formalized as an examination sheet provided by the office registrar department. Retake of the complex examination with a positive assessment mark in order to increase it to a higher grade shall not be allowed. The criterion for the successful completion of a residency in the specialty is the receipt of a positive evaluation of students' achievements during the FSA procedure.

Residents who have passed the final attestation and who have confirmed the study results of the relevant vocational training program of higher education, by the decision of the State attestation panel is given the qualification "doctor" in the specialty "Pulmonology, including pediatric" and is issued a certificate of completion of the state residency.

External examiners are involved in the stages of the interim and final state attestation. At the interim attestation professors and heads of other dean's office departments of the postgraduate education of JSC "AMU" serve as external examiners.

When forming and implementing new methods of assessment, responsibility is distributed between the department, the educational and methodological center, Committee of Academic programs, Educational and Methodological Council. In addition, students have a real opportunity to participate in the introduction of new methods of evaluation in the course of direct discussion and approval of the latter at the level of the Committee of Academic programs. Students of the residence are invited to the sessions of the Committee of Academic programs and take part in the discussion of issues in the context of this specialty.

#### **Standard 4: RESIDENTS**

The procedure for the admission of citizens to the residency at the university is established by the Governmental Decree of the Republic of Kazakhstan as of 24.04.2006 No. 317 "On the concept of reforming the medical and pharmaceutical education of the Republic of Kazakhstan", Order of the Ministry of Health, Republic of Kazakhstan as of 31.01.2008. no. 28 "On approval of the Residency Regulations", the Standard Rules for admission to academic programs in the institution of education, implementing professional curricula of postgraduate education approved by the Governmental Decree of the Republic of Kazakhstan no. 109 as of 19.01.2012, Order of the Ministry of Education and Science of the Republic of Kazakhstan no. 376 as of 11.06.2015 "On admission of documents and enrollment in higher institutions of education for training on academic programs."

The general provisions implementing core curriculum in the selection and admission of the residents are guided by the internal regulatory document - "Rules for admission to the residence" (PR-AMU-06-14), approved by the decision of the Board of JSC "AMU" on March 6, 2014 No. 11, which are revised depending on the introduction of amendments and additions to the regulatory legal documents above and have a policy on the criteria for the selection and admission of residents, developed on the basis of objectivity, transparency and openness. The procedure for admission of citizens to the residency at the University is established by the "Standard Admission Rules to Educational Institution of education implementing professional academic programs of postgraduate education" approved by the Governmental Decree of the Republic of Kazakhstan as of January 19, 2012 No. 109. The policy ensures an appeal procedure for admission. For the period of entrance examinations and admission to the residency in the

specialty "Pulmonology, including pediatric", the Appeal Commission is created on the same level as the admissions and examination commissions.

The number of enrolled residency students corresponds to the capabilities of clinical and practical training, the maximum permissible workload on managers, and also the material and technical capabilities of the organization. The number of enrolled residency students is constantly coordinated with the relevant stakeholders, taking into account the demand for the medical personnel in various fields of medicine.

Annually, taking into account the demands of the clinical departments of the University and the regions of the republic in medical personnel, a request is sent for the demand in the scientific and pedagogical staff and in clinical specialists of the residency at the Department of Science and Human Resources Development of the Ministry of Healthcare and Social Development of the Republic of Kazakhstan. In accordance with the request, the Department of Science and Human Resources Development of the Ministry of Public Health of the Republic of Kazakhstan allocates the state order for the training of medical personnel in the residency in the specialty "Pulmonology, including pediatric".

Pulmonary residents are part of the Committee of academic programs, which allows them to directly participate in the development of the core curriculum based on the choice of elective disciplines of the individual curriculum. At the regular meetings of the Committee of academic programs, resident-pulmonologists can submit proposals and recommendations on the organization of the academic process in the residency: the schedule of classes, the training program on the maximum permissible discharge, the list of elective disciplines, the library fund and other issues relating directly to the learning process.

The Dean's Office for Youth Affairs, the Division of Professional Guidance and Psychological Adaptation of Students, which are structural units implementing the state youth policy, civil, patriotic, legal, ethical, professional, aesthetic, ethno-and multicultural education of residents are functioning at the University (Standard SU-AMU - 47-13 , Concept of academic activity of JSC "AMU" KC - AMU - 01 -12). The University provides support to residents-pulmonologists focused on social, financial and personal needs, allocates appropriate resources for social and personal support. Financial support consists in providing residents studying at the scholarship program with a monthly allowance; those who need are provided with a dormitory, and material assistance. In order to provide conditions for personal development in the HEI, a stable material and technical facility has been created: a rehearsal room, a sports and gymnasium, equipment for cultural and sports events.

Throughout the entire period of study in the residency, each trainee is provided with comprehensive support through socio-psychological, legal service, implemented by the Dean's office for youth affairs, the Department of Professional Adaptation and Psychological Adaptation of Students.

Support and counseling in the residency for the specialty "Pulmonology, including pediatric" is carried out with the direct participation of the supervisor appointed from among the teachers of the clinical departments or highly qualified doctors (the first and the highest category) in the clinical facility, where the resident pulmonologists are trained. Consultation on all issues related to the organization of the academic process for mastering the compulsory and elective disciplines is carried out by the supervisor, the head of the clinical department and the dean's office of postgraduate education. The staff of the dean's office (dean, deputy dean, leading specialist, methodologist) together with the staff of the departments provide information support, advise and supervise the choice of the specialty.

The university and the supervisors themselves maintain confidentiality and individual approach to counseling and rendered support, as well as career guidance and career planning, including recommendations on employment issues.

The medical institution of education (university) provides support in case of a professional stagnation involving resident pulmonologists in solving problem situations. In order to provide comprehensive support to each student during the entire period of study at the university, there is



a socio-psychological, legal support service for students, implemented by the Dean's Office for Youth Affairs, the Department of Professional Adaptation and Psychological Adaptation of Students.

### **Standard 5: TEACHERS**

Teaching staff of JSC "AMU" contributes to the achievement of the mission and goals of the HEI, the qualification of the teaching staff corresponds to the level of occupied positions and ensures the implementation of academic programs. The qualification of the teaching staff is confirmed by the corresponding academic degree, academic rank, work experience, and faculty of the clinical departments having a qualification category of a specialist and the trust of colleagues.

Requirements for staffing, and to the academic process of the residency are determined by the qualification requirements for educational activities during the licensing procedure. According to the state Compulsory Educational Standard-2015, the residency on the specialties approved and put into effect by the order of the Minister of Health of the Republic of Kazakhstan as of July 31, 2015 No. 647, the training sessions in the residency can be conducted by persons holding a doctorate or Ph.D. degree. To conduct classes in the residency on the specialty 6R110800 "Pulmonology, including pediatric" invited distinguished scientists of Kazakhstan and specialists of the first and highest category are invited.

Faculty is formed, based on the needs for effective implementation of academic programs, as well as on the basis of the total volume of academic load. Time regulations by types of educational work are approved in accordance with the State Educational Standard of the Republic of Kazakhstan-2009, State Compulsory Educational Standard of the Republic of Kazakhstan -2015 "Education system of the Republic of Kazakhstan. Academic work and teaching load."

The University pays great attention to ensuring the proper recognition and rewarding of the faculty merits. With the aim of staffing the university with competent and experienced personnel, ensuring sufficient material conditions for conscientious performance of duties, production efficiency and quality of work, the relationship between concrete results of work and increasing material incentives for workers, for the successes achieved in scientific activity, innovation in work, long and impeccable work, and for other achievements in the work at the University, various forms of labor incentives are envisaged. Incentives and promotion are made in accordance with the Regulation on the promotion and motivation of the employees of JSC "AMU" (PL-AMU-49-12 as of 20.09.12). Material incentives for employees and structural units of the University for labor are made in accordance with PL-AMU-76-12 "Regulations on labor remuneration, bonuses and other social payments of JSC ASTANA MEDICAL UNIVERSITY" approved by the Board Decision as of 20.10.2011 № 28.

Teachers are provided with economic and resource support, which directly affects the upgrade of scientific, teaching and clinical skills of employees. At the University in 2010 it became a tradition to hold a contest for the "Best Teacher" for the Day of Medical Worker in six categories. The winners of this competition are awarded a cash prize.

In order to encourage the teaching staff to perfect and develop their pedagogical skills and professionalism, the Department of Innovative Technologies and Monitoring of the Quality of Training has developed the Regulation on the contest "The Best Educational Innovations of JSC ASTANA MEDICAL UNIVERSITY" approved by the decision of the Board, Minutes No. 20 as of May 28, 2013.

The University introduced a rating assessment of the faculty activities, and initiated an annual award of the teaching staff (the day of the medical worker, the International Women's Day and the Independence Day of the Republic of Kazakhstan, and the year-end results), which has a positive effect on the motivation of the faculty and the improvement of the university activities.

The University creates and provides opportunities for the teaching staff to perfect and develop their pedagogical skills and professionalism.

Annually teachers undertake courses of professional skill improvement at the expense of university. Improvement of the teaching staff qualifications envisages development of the competence of the JSC "AUM" teaching staff outlined in the Development Program for 2012-2016, approved at the meeting of the Board meeting of JSC "AUM", minutes No. 5 as of 01.02.12.

The participation of teachers in programs of continuous education is reflected in individual reports and faculty plans, and is monitored by the intra-departmental control, the Educational and Methodological Center, the IT department and the Medical and Advisory Department and the HR department. Activities are held both within the university and with the invitation of foreign lecturers. To improve the level of both professional and pedagogical competence, personal potential and readiness for solving non-standard tasks by IT and the Medical and Advisory Department, throughout 2013 to 2016 20 training events (master classes, seminars, etc.) were organized with the invitation of foreign specialists from Spain (Barcelona), Russia (Moscow); Hungary (Budapest), Austria (Salzburg), UAE, Dubai; London, Great Britain; USA; Prague, Czech Republic; Istanbul, Turkey; Milan, Italy; Geneva, Switzerland; Colombia; Paris, France; Lausanne, Switzerland; Germany.

Teachers and supervisors teaching residents-pulmonologists are not only experienced lectures, but also highly qualified doctors. Along with the teaching load, they perform a large amount of medical and diagnostic work. Teachers are actively working to improve the educational, pedagogical and therapeutic-diagnostic processes, conduct scientific research.

The staffing of the faculty in the specialty "Pulmonology, including pediatric" is complete, which allows maintaining a reasonable ratio between the number of teachers and the number of residents, which guarantees their individual relationship and monitoring the achievements of residents.

All the teachers implementing the educational process for residents of the specialty 6R110800 "Pulmonology, including pediatric", have the highest qualification category.

The share of the faculty teaching core disciplines in the Department of Internal Medicine of the internship in 2014-2015 academic year accounted for 71.4%, in 2015-2016 academic year - 71.4%, in 2016-2017 academic year - 75%; the average age of teachers was 51 year. In the department of pulmonology and phthisiology, the share of the faculty teaching core disciplines in the academic year 2014-2015 accounted for 0%, in 2015-2016 academic year - 0%, in 2016-2017 academic year - 50 %; the average age of teachers was 44 years, this state is connected with a small number of staff in the department.

In the specialty 6R110800 "Pulmonology, including pediatric", the academic degree holders' rate for the reporting period accounted for 95.2%. In the Department of Internal Medicine of the internship in 2016-2017 academic year the educational process for residents is carried out by 4 teachers, one is professor, 3 associate professors, 1 Doctor of medicine, 3 Ph.D. holders in medicine. In the pulmonology and phthisiology department in 2016-2017 academic year the educational process of residents is implemented by 2 teachers, including 1 professor, 1 Master of Science.

The following were awarded with industrial awards of the Ministry of Health of the Republic of Kazakhstan:

– Doctor of medicine, professor Mukatova I.Yu.: for merits in the development of public health services granted by the Ministry of Health of the Republic of Kazakhstan an award pin "For excellence in the health care of the Republic of Kazakhstan" 2013, Jubilee medal "50 years to Astana medicine university" 2014, and an award pin "For contribution to the healthcare" in 2015.

– Doctor of medicine, professor Ainabekova B.A: an award pin "For contribution in the development of science of the Republic of Kazakhstan" 2010, Best mentor of 2013, award pin



"For the excellence in the healthcare of the Republic of Kazakhstan" - 2003, Anniversary medal "50 years to Astana Medical University" 2014.

– Ph.D. in Education - Zharikova D.R. award pin "Honorary teacher of 2010"

Head of the department Mukatova I.Yu. manages the NGO "Association of experts in respiratory medicine".

Professor Mukatova I.Yu. is also the chief freelance pulmonologist of the city of Astana and the Ministry of Healthcare of the Republic of Kazakhstan.

The authority of professors and prominent scientists of the HEI is recognized outside the Republic of Kazakhstan.

### **Standard 6: EDUCATIONAL RESOURCES**

The University has a sufficient and appropriate material and technical facilities, information resources, educational and information technologies, resources for clinical training of residents and for scientific research.

Based on the Law of the Republic of Kazakhstan "On Education" and the order of acting. Minister of Health of the Republic of Kazakhstan as of September 11, 2012 № 628 "On approval of the Regulations on the clinical facilities of medical organizations of education" departments are based in the following clinical facilities, according to the agreements on joint activities:

- 1) State-owned enterprise on the rights of economic management "City Hospital No. 1";
- 2) State-owned enterprise on the rights of economic management "City Hospital No. 2";
- 3) JSC "Railway hospitals of emergency medicine";
- 4) Antituberculosis umbilical dispensary in Astana;
- 5) National Scientific and Medical Center,
- 6) Republican Diagnostic Center,
- 7) City polyclinic №1, №7.

Clinical facilities and departments provide sufficient conditions for full-fledged training in the residency: study rooms, cloakroom, dining rooms. Pulmonary residents have free access to medical, procedural offices, ward chambers, adjacent departments, laboratories and other health facilities. The number of profile patients in the clinical facility of the department is sufficient for training, there are a variety of nosological forms of pulmonary disease that fully correspond to the requirements of the core curriculum for training in residency specialty 6R110 800 "Pulmonology, including pediatric".

For the effective work with residents, the Department of Internal Medicine of the internship has 8 computers, 3 laptops, 6 printers, 2 interactive whiteboards, 2 projectors, 15 TCO, and annually conducts systematic work to strengthen the material and technical facilities (Table 6.3). At the Department of Pulmonology and Phthisiology there are necessary technical aids: 2 laptops, 2 projectors, the department actively cooperates with the NGO Association of Specialists in Respiratory Medicine, which is headed by Mukatova I.Yu. The Association provided gratuitous use of the following equipment: computer spirographs (Care Fusion), CO2 breathing apparatus (Smoke Check Care Fusion), non-invasive lungs ventilation device (Mask), peak fluometers, spacers, VibroLung vibroacoustic therapy device.

Clinical facilities used for training in the residency on the specialty 6R110 800 "Pulmonology, including pediatric" are equipped with modern diagnostic equipment (somnological laboratory, computer tomographs, angiographs, ultrasound scanners, endoscopic equipment, functional diagnostics, gas analyzers, laboratories of various profiles, etc.) equipment for the specialized specialist care (inhalation therapy, invasive and non-invasive pulmonary ventilation, modern methods of physiotherapy and rehabilitation, etc.).

Pulmonary residents daily participate in joint tours with professors, conciliums, consultations with other specialized departments, health facilities in other regions and cities of

the Republic of Kazakhstan through telemedicine, and also learn practical skills during night shifts in offices as assistants of admitting physicians.

The premises of clinical facilities meet sanitary and hygienic standards, fire safety, meet the qualification requirements.

Thanks to facilities of each department with computers, laptops, office equipment and other technical means of training, each university lecturer has the opportunity for independent access to information. The clinical facilities of JSC "AMU", connected by means of local networks, the introduction of e-document management, history of illnesses record keeping in the electronic version provide faculty of JSC "AMU" with the possibility of using modern information and communication technologies for patient management and work in the healthcare system. The corporate network of the University provides access to modern databases in the field of medicine and public health of major publishing houses with an extensive list of information for both residents and faculty. The collection includes the following resources: 1. Sciencedirect - a collection of books, articles from the Elsevier company in English; 2. Scopus - abstract database of articles with citation index and hirsch index; 3. WEB of knowledge - database of articles, periodicals in the field of medicine, exact sciences and other directions from the Thompson Reuters company; 4. Book-UP-Russian resource with a collection of electronic publications in Russian on the main disciplines of medical education; 5. Oxford university press-electronic collection of periodicals in all fields of science from Oxford university; 6. Emerald- a database of periodicals in the field of health management; 7. PUBMED is an English-language text database of medical and biological publications created by the National Center for Biotechnological Information (NCBI).

Training in other institutions or academic mobility within the framework of the academic programs of the residency is not envisaged.

State-owned enterprise on the rights of economic management "City Hospital No. 1" is a multi-purpose hospital, which allows expanding the practical horizons of residents in related specialties. The specialized department is equipped for 15 beds with one urgent day a week. In the JSC " Railway hospitals of emergency medicine " pulmonology department has 40 beds with an intensive care unit, it carries out 4 urgent days a week.

Professor Mukatova I.Yu. is also the chief freelance pulmonologist of the city of Astana and Ministry of Health of the Republic of Kazakhstan, which makes it possible to additionally use various clinical facilities of city and republican importance for teaching and improving the theoretical and practical skills of residents - pulmonologists.

Observation of the clinical practice of residents - pulmonologists is carried out directly by the heads of the departments, supervisors, head of the department, physicians and residents.

### ***Standard 7: EVALUATION OF ACADEMIC PROGRAMS***

The residency academic programs are assessed taking into account the mission of academic programs of postgraduate education (residency) in accordance with the mission and strategy of the university development and consists in the qualitative preparation of competitive graduates of the resident who are able to continue training throughout life in the conditions of dynamically developing modern medicine and carrying out their professional activities on the basis of modern innovative smart technologies in conjunction with the decision of socially significant problems of practical Health, as well as having an active civil position, satisfying the needs and expectations of society and the state.

The system of monitoring and evaluation of the academic programs of residents in the specialty "Pulmonology, including pediatric" at the departments is conducted under the Residency academic programs. The activities of the program cover all aspects of the organization, implementation and evaluation of academic programs: the development, approval of the Residency academic programs, 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 educational programs and educational process in the university, the analysis of feedback data from all participants in the educational process and stakeholders. To monitor and evaluate the quality of the Residency academic programs, a common standard for planning and describing academic programs based on the priority principle was developed, and a database of learning kits for the Residency academic programs was created during the academic year.

The process of program evaluation involves all stakeholders (faculty, students, employers) through representation in the relevant structures. The work of all structures that support the implementation and evaluation of the academic programs is regulated by the University Charter, the university strategic plan, the university's annual plans and reports, and the relevant QMS procedures. The results of the questionnaire survey, the reports of the departments containing the evaluation of academic programs, are presented at the extended meetings of the Editorial and Methodological Boards, the University administration, the Academic Council with the participation of the heads of organizations of practical public health. As a result of the evaluation, measures are being developed to improve activities. The received data on the feedback analysis and of monitoring results are used to improve the training program of residents, if required amendments and additions are made to the working programs.

The main tool for involving students in the evaluation of academic programs is the questionnaire survey "Satisfaction of residents with academic programs." A questioning of two representatives of stakeholders is conducted, i.e. a resident and teacher "Teacher by the eyes of a resident". An example of effective use of feedback is the systematic questioning of residents in the departments after each discipline is completed.

The results of the report based on the questionnaires showed that the respondents are generally satisfied with the quality of the academic process at the University.

Satisfaction of resident-pulmonologists with the content of the academic program, teaching methods, organization of the academic process confirms successful implementation of the academic program in the university.

The results of the employer questionnaire testify the employers' satisfaction with the quality of the theoretical and practical training of graduates of the residency in the specialty "Pulmonology, including pediatric", their ability to apply practical skills, communicative abilities, the ability to further self-education.

The results of the survey of employers, outcomes of the residents' certification, and employment are discussed at the Dean's Council, by profile departments, Committee of academic programs (included in the work plans of the Committee of academic programs, resolutions of the Dean's Council, amendments and additions are made to the learning kit).

The JSC "AMU" developed mechanisms for the approval of academic programs, which provide for the evaluation of programs at the planning, implementation, analysis and implementation phases, which allows monitoring the implementation of the academic program and the progress of residents, ensuring the identification and timely resolution of emerging problems.

The academic program for the specialty of residency "Pulmonology, including pediatric" at the planning stage is evaluated on the majoring Committee of academic programs, the Educational and Methodological Board, approved by the Educational and Methodological Center.

### ***Standard 8: MANAGEMENT AND ADMINISTRATION***

Academic leaders of JSC "AUM" are persons in the management and administration of structural units responsible for making decisions on academic matters: the rector, pro-rectors, deans, heads of departments, heads of structural divisions, course managers. Management qualities of the rector and vice-rectors are characterized by high professionalism and qualification, a clear focus on results, flexibility and adaptability, initiative, high level of responsibility, ability to manage tasks, solve problems by the ability to motivate employees to

work efficiently.

Management and administration of JSC "AMU" monitors and controls the entire academic process, the publication of orders and regulatory enactments that regulate the implementation of the academic programs at all its stages, the organization of external audit, the provision of all types of state control of the university (post-licensing control, certification, etc.) , involving all stakeholders in the evaluation of the program, creating conditions for the organization, planning and implementation of academic programs.

Activities of the university management is periodically monitored at a meeting of collegial and advisory bodies through internal audit and self-assessment. Heads of administrative departments report at sessions of the administration and on the Academic Council. Reports of vice-rectors and deans are heard at the meetings of the Academic Council.

The Rector of JSC "AMU" reports on the expanded meeting of the Academic Council of the University and to the Ministry of Health care of the Republic of Kazakhstan on the results of educational, scientific, academic, financial and economic activities.

According to the Regulations of the JSC "AMU" on the formation of the organizational structure (PLAMU-87), the main structural units of the University are institutes, deans, departments, divisions, units, centers, which include staff in the following categories: faculty, administrative staff, training and support staff.

According to the organizational structure approved by the decision of the Board of Directors of JSC "AMU" dated as of October 25, 2016, Protocol No. 7 there are 116 structural subdivisions, 1 of which has the status of Institute (Institute of Radiobiology and Radiation Protection), 5 dean offices, 22 academic and scientific-educational laboratories, vivarium, research center of pharmacology.

The academic, research, clinical, educational work at the University is provided by the staff of 67 departments, 50 of which are undergraduate education departments and 17 postgraduate departments.

The internal structure of the University is not static, and as the university grows and develops, it undergoes the necessary adjustments and changes.

Responsibility of each structural unit and employees is established in the regulations on structural divisions and in job descriptions.

The working program of the discipline is developed for the entire duration of the State Education Standard of the Republic of Kazakhstan, discussed at the meeting of the department, Committees of Academic programs, the Editorial and Methodological Board and approved by the supervising pro-rector for scientific and clinical work.

The Dean's office together with the Committees of Academic programs and the Departments provide the learning process through the development and approval of all teaching and methodological materials, monitoring the performance of activities.

Responsibility for the policy for assessing the knowledge and skills of students is borne by relevant officials at various stages of training (faculty, heads of departments, planning and organization department of the educational process, dean's office, the Editorial and Methodological Board, pro-rector for scientific and clinical activities).

The activity of the Committees of Academic programs is to provide methodological support for the academic process in the specialty. The working program, the list of elective disciplines, teaching aids, monographs, etc. are approved at the Committee meeting. Within the work of the committee, monitoring of individual residents' plans fulfillment, current analysis of the state of the educational process is also carried out. Representatives of all departments and divisions implement the residency program take part in the work of the Committee, which allows smooth integration of the disciplines studied.

The faculty exercises systematic control over the academic achievements of the students at the current sessions, during the Student's Independent work according to the approved schedule of training sessions on the basis of the working curriculum in accordance with the State Educational Standard of the Republic of Kazakhstan.



The activity of the faculty is regulated by their job descriptions.

Heads of departments are directly responsible for the organization and effectiveness of current and final assessment of academic achievement and intermediate certification in disciplines, consult and take exams on the profile of the academic discipline in accordance with the academic calendar, work program, syllabus and exam schedule.

The registrar's office registers the academic achievements of residents, ensures the organization of all types of knowledge control and calculates the students' academic rating.

The Educational and Methodological Board develops documents regulating the academic process on the basis of State Educational Standard of the Republic of Kazakhstan, develops regulations on the organization of the academic process.

The Vice-Rector for Scientific and Clinical Activity controls the process of training post-graduate education in JSC "AMU" in accordance with the State Educational Standard of the Republic of Kazakhstan, and approves the schedule of classes, examinations and retake of courses.

Management and structural units' activities of the University are evaluated through the regular quality assurance division of internal audit and self-assessment.

The mechanism for the implementation of the Mission, Vision is the Strategic Development Plan of the University, compiled for a 5-year period. Throughout this period, the implementation of the University's Strategic Development Plan for 2017-2021 is in progress. The strategic plan is elaborated based on the main directions for development and definition of goals, objectives and indicators of the strategy implementation.

### ***Standard 9: CONTINUOUS IMPROVEMENT***

The development strategy of JSC "AMU" provides for continuous analysis and evaluation of the quality system of the educational and medical activities of the university through a systematic analysis of QMS, monitoring feedback from consumers of services to determine the degree of their customer satisfaction and modernization of the communications system at the university.

All areas of the university are regulated by corporate documents (Procedures, Regulations, Instructions, Rules of JSC "AMU", etc.). The university strives not only to provide high-quality training for specialists and 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 the QMS, the introduction of new technologies in the academic process, improving the quality of training of residents with a view to responding flexibly to market demands. The university's management seeks to prevent emerging problems and their causes by improving the system of internal control and risk management. The university management conducts an annual analysis of activities in accordance with the documented procedure SU-AMU-09 "Management review".

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

In connection with changes in the educational environment of the world space, legislative acts, regulatory and legal documentation and rationalization, the requirements for the design and content of academic programs are periodically reviewed.

The system of quality management of academic training is a continuous process and is aimed at the continuous improvement of quality assurance mechanisms, as well as improving the quality of the mastering results of academic programs.

The mission of academic programs for postgraduate education (residency) is carried out in accordance with the mission of JSC "AMU".

The quality policy is supported to meet the established requirements, and is constantly improving and adapting, as, for instance, in connection with the state reforms in healthcare and

education and the annual Message of the President of the country.

Continuous improvement in the quality of the core curriculum the university conducts through revision and adaptation:

- Educational technologies;
- Innovative environment of education;
- Qualifications of the teaching staff;
- Continuity of the training process and professional self-development of specialists in the field of health, adapted and competitive in the Kazakhstan and international labor markets.

Currently, the university has worked out and successfully operates QMS, aimed at achieving qualitative results in the training of specialists, taking into account the needs of the labor market and social forecast. It is based on the principles of systematic self-examination and self-assessment of the university's academic activities and is aimed at further development of the university.

### **III. OUTLINE OF THE EEP VISIT**

According to the program of the IAAR EEP visit to JSC "AMU" within the framework of the specialized accreditation of the academic program of the residency in the specialty 6R110800 "Pulmonology, including pediatric" is coordinated by the university rector and approved by the director of the IAAR.

All the materials requested by the panel were provided by the AMU in a timely and full manner.

JSC "AMU" staff ensured the presence of all participants indicated in the visit program. The 3-day visit program of the EEP was totally implemented.

On April 3, 2017, the meetings of the EEP members were held with the rector, pro-rectors of the university, heads and directors of the departments of the accredited academic programs. Also, the EEP conducted a visual inspection of the university units that ensure the quality of the academic process (EEP visited the training center, the computer testing department, the office-registrar department, the library, the training and clinical center, the department of automation management, e-learning and information security, the Institute of Radiobiology and Radiation protection). Interviewing and questioning of the JSC "AMU" teachers was conducted.

On April 4, 2017, the EEP visited the clinical facilities of the accredited program (visual examination and study of the departments' documentation on the accredited program, attendance of classes according to the schedule): City hospital No.1 of Astana, which is the clinical facility of the pulmonology and phthysiology department, Professor I. Mukatova. During the visit, the staff of the department made presentations and answered EEP expert questions. The administration of the City Hospital No. 1 highly assessed the level of training of resident pulmonologists. Employees of the City Hospital No. 1 noted that the department's staff closely cooperate with the clinic, provide medical and counseling assistance to emergency and planned patients, and participate in the provision of highly specialized assistance. Pulmonary residents actively participate in the clinical, scientific, sanitary-educational, cultural work of the department and the hospital.

Interviewing and questionnaire survey of residents, a meeting with employers and graduates was conducted.

On April 5, the EEP members visited the Central Hospital with a policlinic of the Ministry of Internal Affairs of the Republic of Kazakhstan, City Hospital No. 2, which are the clinical facilities of the Department of Internal Medicine Diseases, Department Chair, Professor Ainabyekova Bayan Alkenovna. The administration of the Central Hospital with the policlinic of the Ministry of Internal Affairs of the Republic of Kazakhstan, City Hospital No. 2 gave a high assessment of the level of the resident pulmonologists training. The staff of the clinical facilities



noted the high professionalism of the staff of the department, the high level of medical and consultative assistance to patients.

The administration reviewed regulatory documentation, academic and methodical documentation in the areas of accredited programs.

Panel members showed study rooms for residents, demonstrated training opportunities for residents, a 3D video film on Chronic Obstructive Pulmonary Disease.

Head of the Internship Department of internal illnesses Professor Ainabekova Bayan Alkenovna spoke about the peculiarities of working with residents, of the influence of equipment and methodological support to the development of practical skills of students and opportunities for targeted training. In the process of training residents are widely using modern methods of diagnosis and treatment. The Panel demonstrated the capabilities of a conference room for a videoconference.

In accordance with the accreditation procedure, on-line questioning of teachers and residency students was conducted.

According to the results of the questionnaire survey of 11 teachers, it was revealed that 27.3% of respondents noted that they were satisfied with the content of the academic program, 63.6% noted that the university provides an opportunity for the continuous development of teachers' potential, 45.5% of respondents answered that they can actively apply their own methods of teaching in the academic process and believe that the management of the university pays enough attention to the content of the academic program. 27.3% of the respondents answered that the library has the necessary scientific and educational literature. 18% of the teachers who participated in the questionnaire believe that the relevant medical centers and offices are working well in the university. 81.8% of the respondents rated the level of development of conditions for students with different physical abilities at a fairly good level.

45.5% of the respondents note the proper accessibility of the management to students, 45.5% of the respondents also estimate the availability of the teachers' guidance well. The majority of respondents positively assess the involvement of the faculty in the process of making managerial and strategic decisions.

Many respondents are satisfied with the management support both in the development of new academic programs and in motivational approaches.

In general, the overwhelming majority of the respondents answered positively and considered that this is an actively developing university with great growth opportunities and conditions for both teachers and employees, as well as for students.

27.3% note equal opportunities for the entire faculty. 27.3% appreciated the adequacy of recognizing the potential and abilities of teachers positively.

18% of respondents positively assess the level of opportunity to combine teaching with scientific research with applied activity (18%).

54.5% of respondents were satisfied with the provision of benefits (rest, sanatorium treatment, etc.).

Some respondents are faced with problems - a lack of learning class rooms (45.5%), infrequent involvement of practitioners in training (27.3%), imbalance in the academic load for semesters (27.3%), overcrowded training groups (27.3%), lack of access to the Internet (9.1%), low discipline of students (9.1%), lack of technical facilities in classrooms (27.3%). 27.3% of the teachers were partially and completely dissatisfied with the conditions of labor, remuneration.

A survey of 6 students of the residency was conducted. According to the results of the survey, 100% of respondents were satisfied with the relations with the dean's office, 83.5% were satisfied with the level of accessibility and responsiveness of the university administration, the availability of academic counseling (66.7%), educational materials (83.3%), accessibility of library resources (83.3% (100%)), the availability of computer classes and Internet resources (100%), the usefulness of the website of educational organizations in general (100%), the quality of services provided in libraries and reading rooms (100%), usefulness of the organization's

website in general and faculty in particular (100%), availability of study rooms, rooms for large groups (100%), proportionality of cabinets for small groups (100%). 83.3% of respondents were satisfied with the promotion of the academic environment (collegiality, mutual respect), educational activities to prevent cruel treatment of students - 83.3%, the overall quality of the curriculum - 100%, teaching methods in general - 100%, responsiveness from teachers - 100% in the academic process, 100% in the quality of teaching, 100% in the academic load / requirements for the student, 100% in the fairness of examinations and certification, 83.3% in the timeliness of student evaluation, before the enrollment of the rules and the strategy of the educational program (specialty) - 83.3%, the level of implementation of the rules and strategies of the educational program (specialty) - 83.3%, informing the requirements in order to successfully complete the specialty - 100%, tests and exams - 100%, available computer classes - 100%, available scientific laboratories - 50%, the ratio between student and teacher - 83.3%, objectivity and fairness of teachers - 83.3%, 100% of respondents are satisfied with students' awareness about courses, academic programs and academic degrees.

16.7% of residents are satisfied with the provision of students with dormitory. With regard to the qualitative characteristics of teachers the majority of students surveyed expressed positive views.

For the EEP work comfortable conditions were created with access to all necessary information resources. The Panel notes the high level of the corporate culture of JSC "AMU", the high degree of openness of the team in providing information to the members of the EEP. Recommendations on improving the activities of academic programs of accredited specialties of the university, developed by the EEP on the results of the examination, were presented at a meeting with the management of JSC "AMU" on April 5, 2017.

**Thus, according to the results of specialized accreditation, the EEP thinks that JSC "ASTANA MEDICAL UNIVERSITY" ensures:**

1. Wide use of student-oriented approaches in teaching.
2. Use of active teaching methods (PBL, RBL, CBL) in the training of residency students in the specialty 6R110800 "Pulmonology, including pediatric".
3. Close connection and interaction with practical healthcare in the implementation of academic programs of the residency.
4. Conformity of the academic program of the residency in the specialty 6R110800 "Pulmonology, including pediatric" to the urgent and priority needs of the healthcare of the Republic of Kazakhstan.
5. The patient-oriented and holistic approach in the residency students training in the specialty 6R110800 "Pulmonology, including pediatric" ensures the formation of competences of professionalism.
6. High level of the teaching staff of the departments in the students training of the residency in the specialty 6R110800 "Pulmonology, including pediatric", aimed at solving the problems of strategic development of the university and on improvement of its competitiveness.
7. Sufficient material and technical facilities for the implementation of the academic program of the residency in the specialty 6R110800 "Pulmonology, including pediatric".
8. Computerization and informatization of all structural divisions of the university, there is free access both for the teaching staff and for the students to the information resources of the university.
9. Prospects for strategic partnership with the Medical School of the Sapienza University of Rome.
10. High demand for the graduates of the residency in the specialty 6R110800 "Pulmonology, including pediatric".
11. High satisfaction of practical healthcare by the graduates of the residency on the specialty 6R110800 "Pulmonology, including pediatric".

**IV. RECOMMENDATIONS OF JSC “ASTANA MEDICAL UNIVERSITY”  
on academic programs of the residency specialties:**

1. to intensify the work on increasing the number of students of the residency in the specialty 6R110800 "Pulmonology, including pediatric";
2. to initiate the opening of the University clinic;
3. to involve foreign professors and specialists in the academic process for the development of international academic programs.



## PARAMETERS OF THE SPECIALIZED PROFILE

№	CRITERIA FOR EVALUATION	Comments	Corresponds to	Corresponds in part to	does not match
<b>11.</b>	<b>«MISSION AND OUTCOMES»</b>				
<b>11.1</b>	<b>STATEMENT OF MISSION AND OUTCOMES</b>				
11.1.1	Medical Education organization must define the mission of the residency program and to inform the general public and health care sector about the mission statement.		+		
11.1.2	Medical education organization must define the mission by addressing public health needs, the needs of the health care system and, accordingly, other aspects of social responsibility.		+		
11.1.3	Medical Education organization must identify a training program, comprising both theoretical and practical components, enhancing the practice and the result of such training must be a doctor, competent and able to carry out adequate and appropriate clinical practice in a particular field of medicine, capable of operating at a high professional level, to work independently as well as in a team, if necessary, which is committed and ready to learn throughout life and to the participation in continuing medical education and continuing professional development.		+		
11.1.4	Medical organization should ensure the improvement of care for patients that is appropriate, effective, safe and compassionate in dealing with health problems, and health promotion, including patient-centered and holistic approach.		+		
11.1.5	Medical education organization must ensure that the residents (students) have adequate working conditions for the support of their own health.		+		
11.1.6	Medical education organization should promote the implementation of relevant innovations in the learning process, allowing the development of more extensive and specific competences than those defined as		+		

	basic competence.				
11.1.7	Medical education organizations should encourage residents in their becoming scientists / researchers in their chosen fields of medicine, including a deeper and / or wider participation in the development of the discipline, including the academic development and improvement of education and research in medicine.		+		
11.1.8	Medical education organisation should encourage residents to their becoming active participants in addressing the social determinants of health.		+		
<b>11.2</b>	<b>PROFESSIONALISM AND PROFESSIONAL AUTONOMY</b>				
11.2.1	Medical education should include expertise in education and training of residents and should promote the professional autonomy required for a specialist to act in the best interests of the patient and society.		+		
11.2.2	Medical education organization should ensure proper independence from the government and other bodies in taking action in key areas such as the development of an educational program (see para. 12.1 and 12.6), assessment (see para. 13.1), the selection and admission of residents (see para. 14.1 and 14.2), the choice / selection of teachers (see para. 15.1), and the conditions of employment and the allocation of resources (see para. 18.3).		+		
11.2.3	Medical education should ensure academic freedom, which will include appropriate freedom, freedom of expression, freedom of inquiry, and publication.		+		
<b>11.3</b>	<b>LEARNING OUTCOMES</b>				
11.3.1	Medical Education organization must determine learning outcomes, which residents should reach as a result of training program with respect to: their achievements at the postgraduate level of knowledge, skills and mindset; appropriate framework for their future career in the chosen field of medicine; future roles in the healthcare system; commitment and skills for lifelong learning throughout life; need and problem of health of society, the needs of the healthcare system and other aspects of social responsibility; professional conduct..		+		
11.3.2	Medical Education organization must determine learning outcomes for general and specific to the discipline / major components		+		

	that are required to reach by students by the time of completing the program.				
11.3.3	Medical Education organization must determine learning outcomes with respect to proper behavior and attitudes to patients and their relatives, colleagues, trainees, teachers, other health care workers.		+		
11.3.4	Medical Education organization must ensure the proper professional behavior and attitude of residents to colleagues and other medical personnel, patients and their families and the following of the Code of Honor.		+		
11.3.5	Medical Education organization should inform the public about the established outcomes of training program of residency on relevant specialties.		+		
11.3.6	Medical education should ensure continuity between the outcomes of training programs, undergraduate and postgraduate medical education.		+		
<b>11.4</b>	<b>PARTICIPATION IN FORMULATION OF MISSION AND OUTCOMES</b>				
11.4.1	Medical Education organization must define the mission and define learning outcomes of the program, in collaboration with key stakeholders.		+		
11.4.2	Medical education organization should formulate mission and define learning outcomes of the program, taking into account proposals from other interested parties, which are members of other health professions, patients, society, institutions and authorities, professional organizations and medical research companies.		+		
	<b>TOTAL</b>		<b>19</b>		
<b>12.</b>	<b>STANDARD "EDUCATIONAL PROGRAM"</b>				
<b>12.1</b>	<b>FRAMEWORK SETTINGS of the program of postgraduate medical education</b>				
12.1.1	Medical education organization should define educational framework parameters based on established learning outcomes for the program and qualifications of the graduate resident, to develop them in accordance with the desired result, existing basic medical education and to organize systematic training and transparency.		+		
12.1.2	Medical education organization should ensure that program content corresponds to the requirements of RK SES of residency program and provide the breadth of training in			+	



	accordance with the name of the program and the required depth of training in the field defined by the major.				
12.1.3	Medical Education organization must use practice-oriented training providing direct involvement of residents in providing medical care and responsibility for patient care.			+	
12.1.4	Medical Education organization should use appropriate teaching and learning methods and to ensure the integration of components of the theory and practice, which include didactic lessons and experience to assist the patient as independent and active learning.		+		
12.1.5	Medical Education organization must ensure that the training is conducted in accordance with the principle of equality.		+		
12.1.6	Medical Education organization must use a student-centered approach to learning, which stimulates supports and prepares students to take responsibility for their own learning process and to demonstrate it in their practice.		+		
12.1.7	Medical education organization should guide the resident through mentoring, regular evaluation and feedback, inform about the program and the rights and responsibilities of residents, and include a commitment to ethics issues in the program.		+		
12.1.8	Medical education organization should raise the degree of autonomy and responsibility of residents about their knowledge, skills and development of experience.		+		
12.1.9	Medical education organizations should recognize gender, cultural and religious particularities and prepare residents to the appropriate relationship with patients.		+		
<b>12.2</b>	<b>SCIENTIFIC METHOD</b>				
12.2.1	Medical Education organization must implement a scientific basis and methodology of medical research, including clinical research and clinical epidemiology.		+		
12.2.2	Medical Education organization must ensure that the resident can use scientific justification, can study and know the basics of evidence-based medicine through a wide access to relevant clinical / practical experience on the bases of relevant expertise in the chosen field of medicine.		+		
12.2.3	Medical education organization should include teaching and learning critical evaluation of the literature, articles and		+		

	scientific data, the use of scientific developments.				
<b>12.3</b>	<b>PROGRAM CONTENT</b>				
12.3.1	Medical education organization should included clinical work and relevant theory or practice of basic biomedical, clinical, behavioural and social sciences, preventive medicine, clinical decision-making, communication skills, medical ethics, public health, medical jurisprudence and forensic medicine, management disciplines, patient safety, the responsibility for one's own health, knowledge of complementary and alternative medicine into the training program		+		
12.3.2	Medical education organization should organize educational programs with due regard to patient's safety and autonomy.		+		
12.3.3	Medical education organization should ensure the development of knowledge, skills and professional attitude corresponding to the different roles of the physician, such as a medical practitioner or a medical expert, communicator, collaborator and member of the team, leader / manager, or administrator, a defender of interests of the patient and health scientist / researcher.		+		
12.3.4	Medical education organization should adjust and modify the contents to changing conditions and needs of the health care system.		+		
<b>12.4</b>	<b>PROGRAM STRUCTURE, CONTENT AND DURATION</b>				
12.4.1	Medical education organization must describe the overall structure, composition and duration of the educational program, clearly establish a mandatory component and optional component, integrate practice and theory, take into account the requirements of national legislation and to ensure adequate representation of how the local, national or regional health systems are focused on needs of medical assistance to the population.		+		
12.4.2	Medical education should when deciding on the duration of the program, take into account the required learning outcomes in basic medical education in relation to the chosen field of medicine, the requirements for the implementation of the different roles of certified professionals in the healthcare sector, the possible alternatives for the use of learning based on time parameters.		+		
<b>12.5</b>	<b>ORGANIZATION OF LEARNING</b>				

12.5.1	Medical education organization should define the responsibility and authority for the organization, coordination, management and evaluation of each base for training, of clinical base and of educational process.		+		
12.5.2	Medical education organization should ensure clinical training under conditions of multidisciplinary clinics and coordinate training on the basis of these clinics so that residents would acquire adequate training in various aspects of the chosen field of medicine. Medical education organization must comply with proper representation of employees, residents, and other relevant stakeholders while planning of the educational program.		+		
12.5.3	Medical education organization should ensure that training in a variety of clinical settings, which are characterized by clinics profiles, various categories of patients, of health care levels (primary care, specialized medical care, highly specialized medical care), hospitals and ambulant clinic.		+		
12.5.4	Medical education organization should coordinate numerous training bases for appropriate access to various aspects of the chosen field of medicine.		+		
12.5.5	Medical education organization should have access to the resources needed for the planning and implementation of teaching methods, evaluation of students, innovation of the education program.		+		
<b>12.6</b>	<b>RELATIONSHIP BETWEEN Postgraduate MEDICAL EDUCATION and PROVISION OF MEDICAL AID</b>				
12.6.1	Medical Education organization must describe and recognize the role of mentoring in professional development, ensure the integration between education and provision of medical aid (training in the workplace), ensure that training is complementary and is compatible with the requirements of medical assistance.		+		
12.6.2	Medical education organization should effectively organize the use of the opportunities of health care system, for the purposes of training that involves the use of the capabilities of different clinical sites, the problems of patients and clinical problems for training purposes, and at the same time respecting the requirements imposed for provision of medical help.		+		

	<b>TOTAL</b>		<b>26</b>		
<b>13.</b>	<b>STANDARD "EVALUATION OF RESIDENTS"</b>				
<b>13.1</b>	<b>METHODS OF EVALUATION</b>				
13.1.1	Medical Education organization should formulate and implement a policy of resident evaluation, it must determine, establish and publish the principles, goals, methods and practices for assessment of the residents, including professional qualification exams and it must ensure that the assessment covers the knowledge, skills and professional behaviours and attitudes.		+	+	
13.1.2	Medical education organization must use an extra set of evaluation methods and formats in accordance with their "applicability", which includes a combination of validity, reliability, impact on training, suitability and effectiveness of the methods and formats of assessment in respect to specified learning outcomes.		+		
13.1.3	Medical education organization must formulate the criteria for passing examinations or other forms of assessment, including the number of mulligans allowed.		+		
13.1.4	Medical education organizations should study and document the reliability, validity and fairness of assessment methods.		+		
13.1.5	Medical Education organization should use the system appellation of the evaluation results based on the principles of justice and in compliance with the legal process.		+		
13.1.6	Medical education organization should facilitate the involvement of external examiners; introduce new methods of assessment, if necessary.		+		
13.1.7	Medical education organization should keep a record of the different types and stages of learning in an educational journal or protocols .		+		
<b>13.2</b>	<b>RELATIONSHIP BETWEEN ASSESSMENT AND LEARNING</b>				
13.2.1	Medical Education organization must use the principles, methods and practices of evaluation that are consistent with the established learning outcomes and teaching methods and ensure that the specified learning outcomes are achieved by learners, promote learning, determine the adequacy and compliance of the training.		+		

13.2.2	Medical education organization should ensure the provision of timely, specific, constructive and fair feedback to residents on the basis of the assessment of their knowledge and skills.		+		
13.2.3	Medical Education organization should use the principles, methods and evaluation practices that contribute to the integrated training and involvement in practical clinical work and provide interprofessional education.		+		
	<b>TOTAL</b>		<b>9</b>	<b>1</b>	
<b>14.</b>	<b>STANDARD "RESIDENTS"</b>				
<b>14.1</b>	<b>ADMISSION AND SELECTION POLICY</b>				
14.1.1	Medical Education organization should consider the relationship between the mission and the selection of residents.		+		
14.1.2	Medical education organization should ensure a balance between available capacity and facilities for the preparation and the set of residents.		+		
14.1.3	Medical education organization must formulate and implement policy on the criteria and process of selection of students, including the reception of residents with disabilities, which requires the necessary conditions and equipment in accordance with national laws and regulations, and consider the safety of doctors and patients.		+		
14.1.4	Medical Education organization should formulate and implement a policy of transfer of residents from other national or international programs.			+	
14.1.5	Medical Education organization must ensure a high level of understanding of biomedical sciences achieved at the undergraduate level prior to the post-graduate education.		+		
14.1.6	Medical education organization should ensure the transparency of the selection procedure and equality of access to post-graduate education.		+		
14.1.7	Medical Education, an organization should consider in its selection procedures specific abilities of applicants in order to improve the results of the learning process in the chosen field of medicine.		+		
14.1.8	Medical education organization should develop a procedure for appeal against the decision of the selection committee.		+		
14.1.9	Medical education organization should include associations and organizations of the residents into the policy development process of admission and selection of residents.		+		

14.1.10	Medical education organization should periodically review the admission policy, on the basis of relevant social and professional data to meet public health needs.		+		
<b>14.2</b>	<b>NUMBER OF TRAINEES</b>				
14.2.1	Medical education organization must determine the number of residents, which corresponds to the clinical / practical training capabilities, the potential of clinical mentoring and other available resources to national and regional needs of human resources in accordance with the chosen field of medicine, and if medical education does not define their own set of students it is necessary to demonstrate their responsibility, explaining the existing relations with the authorities and paying attention to the consequences of the decisions on the admission, for example, the imbalance between the set and the existing potential and opportunities of database and resources to prepare.		+		
14.2.2	Medical education organization should have available information on the health needs of society, which includes consideration of balanced admission according to gender, ethnic and social characteristics of the population, including the potential need for a special policy of recruitment and admission of groups of small nations and doctors from rural areas.		+		
14.2.3	Medical education organizations should review the number of residents through consultation with stakeholders.			+	
14.2.4	Medical education organization should adapt the number of residents, taking into account the information available on the number of qualified candidates, the available information on national and international labor markets, the unpredictability of the exact needs for health professionals in various fields of medicine.		+		
<b>14.3</b>	<b>SUPPORT AND CONSULTING RESIDENTS</b>				
14.3.1	Medical education organization must have a system of academic advising provided to residents to provide advice to residents based on the results of monitoring progress in the training, including the unintentional incidents.		+		
14.3.2	Medical education organization should provide support to residents, focused on the social, financial and personal needs, to		+		



	allocate adequate resources for social and personal support.				
14.3.3	Medical education organization must ensure the confidentiality of counselling and support, and provide support for vocational guidance and career planning.		+		
14.3.4	Medical education organization should provide support in the case of a professional crisis and involve student organizations (residents) in the solution to their problem situations.		+		
<b>14.4</b>	<b>REPRESENTATION OF RESIDENTS</b>				
14.4.1	Medical Education organization should develop and implement a policy of representation of residents and ability to participate in the formulation of the mission and outcomes of training, participation in the development of training programs, planning, working conditions, evaluation of training programs, management training program.		+		
14.4.2	Medical education organizations should encourage the organization of residents to participate in making decisions about the processes, terms and conditions of education and training.		+		
<b>14.5</b>	<b>CONDITIONS OF WORK</b>				
14.5.1	Medical Education Organization should conduct a training program in accordance with the paid positions / grants or other means to finance the residents. .		+		
14.5.2	Medical Education organization must ensure resident participation in all the medical activities of the clinical sites, including the insertion of the obligation to be called to visit patient's house, related to the training program.		+		
14.5.3	Medical Education organization must determine responsibility and bring up all the information on the participation and conditions of the provision of health care services by residents.		+		
14.5.4	Medical Education organization should provide additional training, in case of the forced breaks in training, on the occasion of pregnancy (including maternity / paternity leave), illness, military service or secondment.		+		
14.5.5.	Medical educational organization should ensure that residents participation in the provision of medical services does not dominate and is not excessive.		+		

14.5.6	Medical education organization should take into account the needs of patients, continuity of medical aid and the educational needs of residents in the planning duties and on-call work schedule.		+		
14.5.7	Medical education organization should allow the training under special circumstances, in accordance with an individual program of training and taking into account previous experience in providing medical aid.		+		
14.5.8	Medical education program should ensure that the quality of an individual program of study and the total duration of training is not less than that of the resident, passed a complete training program.		+		
	<b>TOTAL</b>		<b>26</b>	<b>2</b>	
<b>15.</b>	<b>STANDARD "TEACHERS"</b>				
<b>15.1</b>	<b>RECRUITMENT AND SELECTION POLICY</b>				
15.1.1	Medical Education organization should develop and implement a policy of recruitment and admission of teachers, supervisors and mentors, which determines the required experience criteria of scientific and educational, pedagogical and clinical achievements, including the balance between teaching, research activities and professional qualifications of their responsibilities, duties staff and in particular the balance between teaching, research and medical care.		+		
15.1.2	Medical Education organization must, in its selection policy to take into account the mission of the educational program, the educational system needs and the needs of the health care system.		+		
15.1.3	Medical Education, an organization should develop and implement personnel policies define the responsibilities of all doctors as part of their professional duty to participate in postgraduate education based on practice, reward for their participation in postgraduate training, to ensure that teachers are practitioners in their respective fields , to ensure that teachers at sub-specialties are appointed only for a certain period of training in accordance with the specifics of the training program and their qualifications.		+		
<b>15.2</b>	<b>LIABILITIES AND DEVELOPMENT</b>				
15.2.1	Medical Education organization must ensure that teachers and residents have enough time to teaching, mentoring and training program to ensure the development of teachers and		+		

	trainers, to ensure periodic evaluation of teachers and mentors.				
15.2.2	Medical education organization should during the development and implementation of personnel policies include in the program development staff and support teachers of their training and further professional development of both professional and educational qualifications; assess and recognize the true academic activities as teachers, mentors; to determine the ratio between the number of teachers who have received the recognition and the number of residents to ensure their personal relationship and monitor the achievements of residents.		+		
	<b>TOTAL</b>		<b>5</b>		
<b>16.</b>	<b>STANDARD "EDUCATIONAL RESOURCES"</b>				
<b>16.1</b>	<b>LOGISTICS AND EQUIPMENT</b>				
16.1.1	Medical education organization must provide facilities and opportunities to residents for the practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.		+		
16.1.2	Medical education organizations should regularly evaluate and update the material and technical facilities and equipment for their compliance and quality assurance of postgraduate education.		+		
<b>16.2</b>	<b>CLINIC BASES</b>				
16.2.1	Medical Education organization shall select and approve the framework for the preparation and provide access to relevant clinical / practical bases for training, a sufficient number of patients, corresponding to patients and patient information with a variety of issues in order to achieve the learning objectives, including the utilization of both fixed and outpatient care and duty.		+		
16.2.2	Medical education organization should be when choosing a learning environment and a clinical database ensure that the curriculum include issues of health promotion and disease prevention, education profile in other relevant hospitals / institutions and PHC.		+		
<b>16.3</b>	<b>INFORMATION TECHNOLOGIES</b>				
16.3.1	Medical Education organization must ensure access to the Web and electronic media and		+		

	effectively use information and communication technologies, in an ethical manner, as an integrated part of the educational program.				
16.3.2	Medical Education organization should promote the use of teachers and students of existing and new information and communication technologies for: self-study, communication with colleagues, access to relevant data and patient health information systems, management of patients, practices and work in the health care systems.		+		
<b>16.4</b>	<b>CLINICAL TEAMS</b>				
16.4.1	Medical Education organization must guarantee work experience in a team of colleagues and other health professionals.		+		
16.4.2	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	Medical education organization should promote the development of skills in the management and training of other health professionals.		+		
<b>16.5</b>	<b>MEDICAL RESEARCH AND ACHIEVEMENTS</b>				
16.5.1	Medical education organization should ensure that residents receive knowledge and are able to apply scientific basis and methodology of scientific research in the chosen field of medicine and to ensure the proper integration and balance between training and research.		+		
16.5.2	Medical education organization should provide information on the research and development base and the priority areas in the field of scientific research of medical education organization		+		
16.5.3	Medical education organization should encourage the participation of residents in medical research, quality development of health and health systems, which include research in basic biomedical, clinical, behavioral and social sciences.		+		
16.5.4	Medical education organization should provide for the residents of the corresponding time in the training program for research.		+		
16.5.5	Medical education organization should have access to the equipment for research and scientific activities carried out on the bases of learning.		+		

<b>16.6</b>	<b>EXPERTISE IN THE FIELD OF EDUCATION</b>				
16.6.1	Medical Education organization should develop and implement a policy on the use of expertise in the field of education with respect to planning, implementation and evaluation of educational programs.		+		
16.6.2	Medical education organization should give due attention and ensure the development of expertise in the evaluation of education and research in the discipline of medical education.		+		
16.6.3	Medical education organization should promote the interests of employees in the conduct of research in education.		+		
<b>16.7</b>	<b>TRAINING IN OTHER INSTITUTIONS</b>				
16.7.1	Medical Education organization should develop and implement a policy of accessibility for residents and provide them with training opportunities in alternative institutions inside or outside the country.		+		
16.7.2	Medical Education organization should establish a system for the transfer of learning outcomes through active program coordination between training institutions and the use of academic credit.		+		
16.7.3	Medical education organization should be to promote regional and international exchange of faculty and residents, by providing adequate resources.			+	
16.7.4	Medical education organization should develop relations with relevant national and international authorities in order to facilitate the exchange and the mutual recognition of study components.		+		
	<b>TOTAL</b>		<b>19</b>	<b>2</b>	
<b>17.</b>	<b>STANDARD "ASSESSMENT OF EDUCATIONAL PROGRAMMES"</b>				
<b>17.1</b>	<b>ARRANGEMENTS FOR MONITORING AND EVALUATION</b>				
17.1.1	Medical educational organization should carry out constant monitoring of the educational program, define and implement a mechanism for the evaluation of the program and evaluation of the program carried out in view of the mission, the required learning outcomes, content, educational programs, assessment of knowledge and skills, educational resources.		+		
17.1.2	Medical education organization should carry out an assessment of the program relating to		+		



	the admission policy and education needs, and the health care system, the process of implementation of educational programs, assessment methods, progress resident of teachers identified problems and weaknesses.				
17.1.3	Medical education organization should ensure that relevant evaluation results are aimed at improving the educational program and the participation of stakeholders in the program evaluation.		+		
17.1.4	Medical education organization should ensure the transparency of the process and evaluate the results to management and all stakeholders.		+		
<b>17.2</b>	<b>FEEDBACK FROM TEACHERS AND RESIDENTS</b>				
17.2.1	Medical Education organization should study the feedback on the educational program of teachers, residents, employers.		+		
17.2.2	Medical education organizations should be actively involved teachers and residents in the evaluation of the program planning, assessment and use the results to improve the program.		+		
<b>17.3</b>	<b>RESULTS OF RESIDENTS AND QUALIFIED EXPERTS</b>				
17.3.1	Medical Education organization must continuously monitor the trained professionals to provide feedback on the clinical practice of qualified professionals from employers to establish and implement a mechanism to assess the programs using the data collected by the results of the clinical practice of qualified professionals.		+		
17.3.2	Medical educational organizations should inform about the results of the evaluation of clinical practice of qualified persons, responsible for the reception of the residents and planning the educational program.		+		
<b>17.3</b>	<b>INVOLVEMENT OF THE INTERESTED SIDES</b>				
17.3.1	Medical education organization should involve key stakeholders in the program for monitoring and evaluation of the educational program.		+		
17.3.2.	Medical education organization should ensure that interested parties access to the results of the course evaluation and educational programs should be studied and analysed feedback on the results of an independent clinical practice professionals and the		+		

	feedback on the educational program.				
<b>17.4</b>	<b>PROCEDURE FOR APPROVAL OF EDUCATIONAL PROGRAMS</b>				
17.4.1	Medical Education organization shall document that all educational programs, including clinical sites, approved by the competent authority on the basis of clearly defined criteria, evaluation of the educational program and the existing authority to award or revoke the recognition of an authorized body of clinical databases and theoretical training courses.		+		
17.4.2	Medical Education organization should develop and implement a system of quality control of clinical databases and other educational resources, material and technical equipment, including a visit to training bases or other established procedures.		+		
	<b>TOTAL</b>		<b>13</b>		
<b>18.</b>	<b>STANDARD "MANAGEMENT AND ADMINISTRATION"</b>				
<b>18.1</b>	<b>MANAGEMENT</b>				
18.1.1	Medical Education organization must ensure that the educational program is carried out in accordance with the requirements of regulations in relation to the reception of residents (the selection and the number of tests), process, assessment of knowledge and skills set of learning outcomes.		+		
18.1.2	Medical Education organization must document the completion of training by awarding degrees, issuing of diplomas, certificates or other formal evidence of qualification for use by national and international authorized bodies and shall be responsible for the program to ensure and improve the quality of postgraduate training.		+		
18.1.3	Medical Education organization should ensure transparency in the management and decision-making, compliance with the health needs of the population program and the provision of medical services.		+		
<b>18.2</b>	<b>ACADEMIC LEADERSHIP</b>				
18.2.1	Medical Education organization must determine the responsibility and duties of management / staff in postgraduate medical education.		+		
18.2.2	Medical Education organization should assess the management / staff at regular intervals towards the achievement of the mission of postgraduate training programs, the desired		+		

	end result of the program.				
<b>18.3</b>	<b>BUDGET FOR TRAINING AND RESOURCE ALLOCATION</b>				
18.3.1	Medical Education organization should define the responsibility and authority to manage the budgets of the educational program.		+		
18.3.2	Medical education organization should have clear responsibilities and powers of enforcement resources, educational programs, including targeted training budget should allocate the necessary resources for the introduction and implementation of training programs and share educational resources with the needs.		+		
18.3.3	Medical Education organization should manage the budget to maintain the commitment of teachers and residents to provide medical care and innovation in the program.		+		
<b>18.4</b>	<b>АДМИНИСТРИРОВАНИЕ И МЕНЕДЖМЕНТ</b>				
18.4.1	Medical education organization should ensure that adequate administrative and academic staff, staff to support the implementation of the educational program, proper management and allocation of resources.		+		
18.4.2	Medical education organization should develop a quality management program, including regular reviews.		+		
18.4.3	Medical Education organization should ensure that management is carried out regular review to achieve quality improvement.		+		
<b>18.5</b>	<b>REQUIREMENTS AND NORMATIVE REGULATIONS</b>				
18.5.1	Medical Education organization must follow the definition of the national competent authorities and the number of recognized medical specialties and other functions of medical experts, which are developed for training post-graduate training program.		+		
18.5.2	Medical education organization should identify and adopt the program of postgraduate medical education in cooperation with all stakeholders.		+		
	<b>TOTAL</b>		<b>12</b>		
<b>19.</b>	<b>STANDARD "CONTINUOUS IMPROVEMENT"</b>				
19.1	Medical education organization in the implementation of the development of postgraduate medical education with the involvement of relevant stakeholders should		+		

	initiate a regular review and updating process, structure, content, learning outcomes / competences, assessment of knowledge and skills, the program learning environment, documented fix flaws, to allocate resources for the continuous improvement.				
19.2	Medical Education organization should		+		
	- Base the upgrade process on prospective studies and analyzes, and the results of his own experience and review of the literature on medical education		+		
	- To ensure that the process of renewal and restructuring leads to a revision of the policy and practice of postgraduate medical education program in accordance with experience, current activities and future prospects.		+		
19.3	<b>Medical education organizations should be in the upgrade process to pay attention to the following questions:</b>		+		
	- Adaptation of the mission and outcomes of postgraduate training programs in scientific, socio-economic and cultural development of society,		+		
	- Modification of the set of learning outcomes after completion of postgraduate training in the chosen field of medicine in accordance with documented needs of the environment apply to recently completed the training of health professionals, changes may include clinical skills, training in the field of public health and participation in patient care, the respective responsibilities assigned upon completion of the program.		+		
	- Adaptation of educational approaches and teaching methods, to ensure their relevance and appropriateness		+		
	- Adjustment of the structure, content and duration of training programs in residency in accordance with developments in the basic biomedical sciences, clinical, behavioural and social sciences, changes in demographics and the structure of the population on health / illness, as well as socio-economic and cultural conditions, the adjustment It will ensure that new relevant knowledge, concepts and methods are included and outdated are cancelled		+		
	-Development of principles and valuation methods in accordance with changes in the established results and teaching methods		+		
	-Adaptation of the resident selection policies,			+	

	methods of selection and admission of residents to changing expectations and circumstances, human resource needs, changes in basic medical education and curriculum requirements				
	-a set of policy adaptation and development of academic mentors and teachers in accordance with the changing needs in postgraduate education		+		
	-Upgrading equipment at clinical sites of education and other educational resources to changing needs in postgraduate medical education, that is, the number of residents, the number of teachers and profile training program and contemporary educational principles		+		
	-Improving the monitoring process of the program and evaluation of the program		+		
	-Development of the organizational structure, governance and management to address changing circumstances, and postgraduate training needs, and eventually gathering the interests of different stakeholder groups		+		
	<b><i>TOTAL</i></b>		<b>11</b>	<b>1</b>	
	<b>TOTAL IN GENERAL</b>		<b>140</b>	<b>6</b>	