

REPORT

on the results of the work of the external expert evaluation committee for compliance with the requirements of specialized accreditation standards NC JSC "Medical University of Karaganda" educational programs in the framework of specialized accreditation of educational programs6R111300 Infectious diseases, including children's,6R111500 Neuropathology, including children,6R113400 Oncology (adult), 6R114200 Pediatrics, 6R114300 Neonatology, 6R111000 Nephrology, including children's,6R112700 General Surgery.

from "16" to "18" April 2019.

INDEPENDENT AGENCY ACCREDITATION AND RATING External expert committee

Addressed to Accreditation to the council IAAR

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(I) LIST OF SYMBOLS AND ABBREVIATIONS

AC Academic Council

BD Basic disciplines

SAC StateAttestationCommission

SVMC State volume of medical care

SCES State Compulsory Education Standard

DAW Department of Academic Work

RETR emote educational technologies

DSDIC Department of Strategic Development and International Cooperation

HRD Human Resources Department

HEI Higher education institution

FSC Final state certification

IL Instructional letter

IWP Individual work plan

NC JSC KMU Karaganda Medical University

EPCEducational Program Committee

CEDCatalog of elective disciplines

MHCMinistry of Health care

MESMinistry of Education and Science

MEPModular educational programs

MTPModular training programs

MCMedical Center

SWScientific work

RCHRegional Clinic Hospital

RCCHRegional Children's Clinical Hospital

EPEducational program

GRTGrade rating tolerance

SDSpecial disciplines

PTSProfessors and teaching staff

RKThe Republic of Kazakhstan

WPWork programs

WCWorking curriculum

IWRIndependent work of residents

IWRTIndependent work of residents with teachers

CM Curriculum model

EMCDEducational and methodical complex of disciplines

EMA Educational and methodical advice

KMU AC Academic Council KMU

ACFFaculty Academic Council

PSC Practical Skills Center

CBL Training in clinical cases

PBL Problem based learning

TBL Team based learning

(II) INTRODUCTION

In accordance with the order IAAR№ 33-19-OДfrom 04/05/2019 in NK JSC "Medical University of Karaganda" the visit of the external expert commission (EEC) took place from April 16 to April 18, 2019.Conformity assessment was carried out educational residency programs:6R111300 Infectious diseases, including children's,6R111500 Neuropathology, including children,6R113400 Oncology (adult), 6R114200 Pediatrics, 6R114300 Neonatology, 6R111000 Nephrology, including children's,6R112700 General Surgery.

standards of specialized accreditation IAAR:

- 1. **Chairman of the Commission** Bayldinova Klara Zhenisovna, Candidate of Medical Sciences, Associate Professor, Kazakh National Medical University named after SD Asfendiyarov (Almaty);
- 2. **Foreign expert** Ion Bologan, Doctor of Medical Sciences, State University of Medicine and Pharmacy. N. Testemitanu (Chisinau, Moldova);
- 3. **Foreign expert** Zhuravel Irina Aleksandrovna, Doctor of Chemical Sciences, Professor, National University of Pharmacy (Kharkiv, Ukraine);
- 4. **Expert** TurdalievaBotagozSaitovna, Doctor of Medical Sciences, Professor, JSC "Kazakh Medical University of Continuing Education" (Almaty);
- 5. **Expert** DzhardemalievaNurzhamalZhenisovna, Candidate of Medical Sciences, assistant professor, Kazakh National Medical University named after S. Asfendiyarov (Almaty);
- 6. **Expert** Baskakova Irina Valentinovna, Candidate of Medical Sciences, assistant professor, Kazakh National Medical University named after S. Asfendiyarov (Almaty);
- 7. **Expert** OspanovaDinaraAlmakhanovna, Doctor of Medical Sciences, Associate Professor, JSC "Kazakh Medical University of Continuing Education" (Almaty);
- 8. **Expert** KurmangalievKairatBolatovich, Candidate of Medical Sciences, assistant professor, NK JSC "West Kazakhstan Medical University. Marat Ospanov "(Aktobe);
- 9. **Expert** KulzhanovaSholpanAbdlgaziyevna, Doctor of Medical Sciences, Professor, NK JSC"Astana Medical University" (Astana);
- 10. **Expert**–JumalinaAkmaralKanashevna, DoctorofMedicalSciences, Professor, NK JSC"West Kazakhstan Medical University. Marat Ospanov "(Aktobe);
- 11. Expert—Pak Laura Alekseevna, PhD, NK JSC"Semey Medical University", (Semey);
- 12. **Expert**—Amrenova Kuralai Shaganovna, Candidate of Medical Sciences, assistant professor, NK JSC"Semey Medical University", (Semey);
- 13. **Expert**–NarmanovaOryngulZhaksybayevna, Doctor of Medical Sciences, Professor, NK JSC"Astana Medical University" (Astana);
- 14. **Employer** BekzatovaGulmiraKhakimovna, SOMU "Regional Infectious Diseases Hospital" UZ KO (Karaganda);
- 15. Employer Bashirova Tatyana Pavlovna, LLP «City Center for Medical Care» (Karaganda);
- 16. **Student** Aldanysh Zhumazhan Zhumabekuly, NK JSC"Medical University Astana" (Astana);
- 17. **Student** Alikhan Altynbekuly, Leader «Alliance student student of Kazakhstan» to the Karaganda region (Karaganda);
- 18. **Partner in Agency** Aimurziyeva Aigerim Urinbaevna, Director of Medical Projects of the Agency (Astana).
 - The EEC report contains an assessment of the compliance of the submitted educational programs of the educational organization with the IAAR criteria, recommendations of the EEC for further improvement of educational programs and parameters of the profile of educational programs

(III) REPRESENTATION OF EDUCATION ORGANIZATION

Karaganda State Medical University was established in 1950 on the basis of the Resolution of the Council of Ministers of the Kazakh SSR No. 65 of January 20, 1950, "On the Organization of the Karaganda State Medical Institute" in accordance with the decree of the Council of Ministers of the SSR Union of December 5, 1949 № 19630-p. Since that time, a highly qualified team of 11 departments of the medical faculty began teaching. The HEI developed progressively every year: new departments were opened, educational buildings, dormitories buildings, dispensaries, and recreation areas were erected. In 1959, the Faculty of Sanitation and Hygiene was opened (today, the Faculty of Preventive Medicine, Biology and Pharmacy), in 1962 the pediatric faculty was organized, in 1978 the faculty of dentistry. In 1992, the first medical and biological faculty was founded in Central Asia and the third in the UIS. In 1992, the Faculty of Advanced Training of Medical, Preventive and Clinical Disciplines was founded. In 1993 - the faculty of pedagogical qualification improvement . In 2002, opened the specialty "Oriental medicine" and "Pharmacy".

In 2013 - specialty "Biology" and "Technology of pharmaceutical production."

The quality of education and research is provided by a high level of infrastructure: 4 educational buildings with classrooms equipped with interactive equipment; a scientific library with reading rooms and an electronic library room, the fund of which currently stands at 858,805 copies, including 372,893 copies in the state language; research center and molecular genetic laboratory of collective use; 6 hostels, 57 clinical bases, a clinic, student sports and recreation camps and recreation areas.

Since 2007, the Center of Practical Skills (Simulation Center) has a total area of 1,023 m2, equipped with modern medical equipment, audio-visual equipment, computer equipment, high-tech mannequins and simulators, allowing students to develEP, maintain and improve clinical competence.

The consultative-diagnostic center and dental clinic, created on the basis of the university, are equipped with modern medical and diagnostic equipment to provide medical care to the population of the region at the level of national and international standards. The passage of high-quality and professional practice of students is carried out at 439 bases in the Republic of Kazakhstan and abroad.

Students and staff are provided with high-speed Wi-Fi network covering the area of all educational buildings and university dormitories. KMU is the first Kazakhstani university in which 64 virtual servers, 14 physical servers and a data processing center with a total volume of 193 Terabytes function.

Each student and university employee has a personal corporate Outlook email and a personal account to enter the information system, personal access to the corporate portal on the basis of SharePoint for the implementation of electronic document management.

To improve the quality and speed of work, Moodle-based distance learning technologies, the Cisco, WebEx platform for interactive online conferences, meetings and broadcasts and the OpenLabirinth program have been introduced. Access for students and university staff to world information resources, authoritative scientific publications and publications in medicine and related sciences is expanding.

As part of the implementation of the State Program for the Development of Healthcare of the Republic of Kazakhstan "Salamattykazakstan" for 2011-2015 " MHC RK In 2012, KMU opened a laboratory for collective use of gene-molecular research in the North-West region of the Republic of Kazakhstan.

In KMU, in accordance with the state license No. KZ78LAA00009866 dated August 14, 2017, instruction is provided in Kazakh, Russian and English at 54 departments and courses at undergraduate and postgraduate levels of training in 7 specialties of undergraduate education, in 6 specialties of magistracy, in 4 specialties of doctoral studies, 30 residency specialties.

The staff of the university is represented by highly qualified teachers, including 70 doctors of science, 7 doctors of Phd and 265 candidates of science. Twenty university professors are correspondents of the National Academy of Sciences, the Academy of Medical Sciences, the Academy of Military Sciences, the National Academy of Natural Sciences of the Republic of Kazakhstan, the Russian Academy of Natural Sciences, the International Academy of

Informatization, the Eurasian International Academy of Sciences.

The quality of education and scientific research is ensured by a high level of infrastructure: 7 educational buildings with classrooms equipped with interactive equipment; a scientific library with reading rooms and an electronic library room, the collection of which currently totals 598,441 copies, as well as 268,081 copies in the state language; a research center and a collective use laboratory, a sanitary-hygienic laboratory, as well as 13 educational laboratories (histological, pathophysiological, physiological, biochemical, microbiological, biological, biophysical, toxicological, pharmaceutical, dental laboratory for removable prosthetics, dental laboratory for fixed prosthetics, food hygiene laboratory); 6 dormitories, 57 clinical bases, Medical center and dental clinic, student sports camps and recreation areas.

As part of the integration into the European educational space in the context of the Bologna process, on September 17, 2010 KMU signed the Magna Carta of Universities in Bologna (Italy). In 2011, in the directory of medical schools "Avicenna" of the World Health Organization (WorldDirectoryofMedicalSchools, WHO).

KMU is a member of the Association of Medical Education in Europe (AMEE) of the Association for the Study of Medical Education in Europe (ASME), the Association of Asian Medical Education (AMEA), the Organization for the Protection of PhD in Biomedicine and Health in the European System (ORPhEUS), the Organization for Academic Mobility Pacific and Southeast Region (UMAP), European University Association (EUA).

The University carries out active international cooperation in the field of medical education, science and practice with medical universities and research centers of the countries of near and far abroad. KMU partners are universities such as: University of Albany (USA), University of Poitiers (France), University of Gothenburg (Sweden), University of Madrid (Spain), University of Lund (Sweden), University of Maastricht (Holland), University of Leicester (United Kingdom), University of Porto (Portugal), University of St. George (London, UK), Caroline Institute (Sweden), Mazarik University (Czech Republic), Aristotle University (Greece), National University of Malaysia (Malaysia).

In 2015, the university joined the European Association of Universities and became the first grant applicant for the Erasmus + project to expand opportunities in higher education among medical universities in Kazakhstan.

International projects Erasmus +:

- 1. "Training to avoid medical errors" (TAME)
- 2. «Central Asian and European universities in the promotion of European education» (WELCOME)
- 3. «Strengthening network education, research and innovation in Environmental Health in Asia» (TUTORIAL)
 - 4. «Transition to university autonomy in Kazakhstan» (TRUNAK)
 - 5. «Development of the innovative potential of higher education in the field of nursing through health care reform» (ProInCa)
 - 6. CreditMobility program with the University of Poitiers, France
 - 7. CreditMobility with University of Porto, Portugal
 - 8. CreditMobility with Lund University, Sweden
 - 9. CreditMobility program with the University of Plovdiv, Bulgaria

In the framework of developing a strategic partnership, in 2016 a memorandum of cooperation was signed with Lund University, Sweden. More than 1000 students and university employees took part in international programs of academic mobility.

Over 300 students take part in international scientific conferences and research annually. So, on the initiative of the university, since 2012, the Central Asian International Conference on Medical Education has been held, the main purpose of which is the exchange of experience on improving medical education in Central Asia.

The university participates in the implementation of republican programs and projects of scientific research in the field of health care, international multicenter studies SMART, METALL, UTIAP. Over the past three years, the number of publications in publications indexed in the

authoritative scientific information databases ThomsonReuters and Scopus has increased 6 times. In addition, more than 30 grant financing projects of the Ministry of Education and Science of the Republic of Kazakhstan were implemented. Since 2004 To date, more than 50 scientific and technical programs and projects in the field of healthcare and medical education have been completed.

The Medical Center and Dental Clinic created on the basis of the university are equipped with modern diagnostic and treatment equipment to provide medical care to the population of the region at the level of national and international standards. The passage of high-quality and professional practice of students is carried out at 492 bases in the Republic of Kazakhstan and abroad.

The university makes a significant contribution to the implementation of educational work and youth policy at the university, aimed primarily at the formation of a patriotic spirit, an active lifestyle, as well as a healthy lifestyle. On the basis of the university there are the student republic Samruk KMU, 19 amateur groups and clubs, 24 sports sections, the Medical Youth Association of Kazakhstan "KazMSA". Oriental dance ensemble "Karakoz" is awarded the title of folk ensemble.

Since 2017, KMU became a member of the Eurasian project on the introduction of entrepreneurial education in universities of Kazakhstan (ERG). Within the framework of this project, the teaching staff on the development of entrepreneurship at the university was trained.

Accreditation Committee for Simulation Training of the Medical Education Association of Europe (AMEE) in 2017. recognized the university's simulation program and awarded the ASPIRE Excellencesimulation-basedhealthcareeducation award.

The effectiveness of the university is confirmed by the reports of the commission on the evaluation of the university in the 2016-2017 academic year, the successful passage of specialized accreditation:

- In 2017, university certification according to standards MC ИСО 9001:2015 и МС ИСО 50001:2011 "Energy Management" (Certification Association "Russian Register", Russia);
- accreditation in the field of healthcare for compliance with accreditation standards for medical organizations providing inpatient care (2016);
- accreditation and supervisory audit of the Scientific Research Sanitary and Hygienic Laboratory Scientific and Research Center of CMU for compliance with the requirements of GOST ISO / IEC 17025 "General requirements for testing and calibration laboratories."
- certification of compliance with the standard of good clinical practice (GCP) by the Pharmacy Committee of the Ministry of Health of the Republic of Kazakhstan.
 - specialized accreditation of 36 specialties in the national agency IQAA.

In 2014, the CMU successfully passed institutional accreditation and specialized accreditation of 15 educational programs, in 2016 10 educational programs were successfully accredited, and in 2017 11 educational programs were accredited.

In 2017, the university was marked by a high national rating and took 2nd place in the General Institutional Rating of Medical Universities of the Republic of Kazakhstan (IQAA), 1st place in the rating of educational programs in the specialty "General Medicine" (IQAA), 2nd place in the areas of programs "Master" specialty "Medicine" (IQAA).

In the same year, received 1 prize at the competition "Meikaton" among student innovation projects of the Republic of Kazakhstan.

The recognition, relevance and competitiveness of graduates in the labor market is confirmed by a high percentage of employment of 97%. More than 35 thousand highly qualified doctors successfully work in all regions of Kazakhstan, as well as in countries near and far abroad.

University graduates in different years headed the country's medical service: the Minister of Health of the Republic of Kazakhstan (1971-1982), academician of the Russian Academy of Medical Sciences and the National Academy of Sciences of the Republic of Kazakhstan, laureate of the State Prize of the Republic of Kazakhstan, professor Toregeldy Sharmanov; Minister of Health of the Republic of Kazakhstan (2006-2008), laureate of the State Prize of the Republic of Kazakhstan, Doctor of Medical Sciences Anatoly G. Dernovoi, Minister of Health of the Republic of Kazakhstan (2010-2014), Doctor of Medical Sciences Anatoly Salidat Kairbekova.

(IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

Accreditation has not previously been conducted according to IAAR standards.

(V) DESCRIPTION OF THE VISIT OF THE EXTERNAL EXPERT COMMISSION

On May 2, 2018, a preliminary meeting of members of the IAAR External Expert Commission (EEC) was held. During the organizational meeting, the visit program was clarified, the responsibilities of EEC members were distributed. A brief review of reports on specialized self-assessment was carried out, additional information was identified that must be requested from the university for full awareness of EEC members during specialized accreditation.

The following methods were used to obtain objective information on evaluating the activities of the university by EEC members: visual inspection, observation, interviewing employees of various structural divisions, teachers, students, graduates and employers, questioning of faculty and residents. The visit of the external expert commission to the university was organized in accordance with the program agreed with the chairman of the EEC and approved by the rector of the university. EEC work was carried out from May 2 to May 4, 2018.

In order to obtain objective information about the quality of educational programs and the entire infrastructure of the university, to clarify the content of self-assessment reports, meetings were held: with the university rector – Dosmagambetova Raushan Sultanovna, vice-rector for educational and methodical work - Viktor Riklefs, vice-rector for strategic development, science and international cooperation - Turmukhambetova Anar Akylbekovna, Vice-Rector for Clinical Work and Continuing Professional Development - Kosherova Bakhyt Nurgalievna, pr Organizational and economic activity director - Teleuov Murat Koyshibaevich Meetings were also held with the heads of the departments of pharmaceutical disciplines and chemistry - Irina V. Loseva, therapeutic disciplines - Lyazat Kataevna Ibraeva, Nurkasi Tolebergenovich Abatov, curators of educational programs "Gastroenterology, including Pediatric" - Laryushina Elena Mikhailovna and Allerg, including the nursery "- by Merkuert Arstanvna Gazalieva, with the heads of the accredited public health department, Dean of the Department of Public Health, Biology and Pharmacy - Serik Ba htiyar, the dean of the faculty of residency and further education - Asenova Lyazzat Khasenovna, teachers of the departments of residency and doctoral studies, residents and doctoral students, graduates of residency and doctoral studies, as well as employers.

In the course of the conversation with the rector, vice-rectors, members of the Academic Council, experts, the necessary information was received, supplementing the self-assessment reports. EEC is familiarized with the organizational structure and strategic development plan of the university, questions were asked about the implementation of accredited educational programs and solutions, suggestions were made for continuous improvement. The importance of international cooperation for the development of academic mobility, the exchange of the best technologies in the training of residents was emphasized.

The next stage of the EEC's work was an interview with the faculty, residency students, graduates, employers. Each interview was attended by a sufficient number of people to create an idea about the practical implementation of the educational program and its effectiveness. In particular, residents expressed an opinion about teachers, the organization of practical classes in an interactive form, the availability of teaching materials, access to clinic resources, patient supervision, etc..

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

In total, 151 people attended the meetings.

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

Category of participants	amount
Rector	1
Vice Rector	5
Deans	7
Heads of structural divisions	15
Department Heads	9
Teachers of the departments	78
Residents	15
Graduates	8
Employers	13
Total	151

During the work of the EEC, a visual inspection of the university's infrastructure was carried out: classrooms, computer classes, a library, a reading room, a sports hall, medical facilities, nutrition points, and a center of practical skills.

During a visit to the university's library, EEC members familiarized themselves with work and library resources, including electronic ones, and rules for entering international databases. The work of the office registrar was demonstrated. Thus, the EEC received evidence of compliance with IAAR accreditation standards related to the mission, the end results of the training, educational program, management and administration, and educational resources.

To conduct educational and professional practice, the university concluded agreements with the leaders of medical organizations, established close ties with the basic medical organizations. Social partnership in the field of medical education aims to bring the level of training to the needs of employers.

When visiting practical bases, the experts got acquainted with the material and technical base of medical organizations, visited the administrative building, specialized departments in which residents undergo practical training. Head doctors, chief and senior nurses, and department heads met with members of the EEC. It is noteworthy that medical organizations not only provide jobs for the duration of training, but also actively participate in adjusting the content of educational programs, as well as in assessing the knowledge, skills and abilities of residents. The feedback from the heads of medical organizations about residents and graduates of the university is positive.

May 03, 2018 according to the EEC work plan, in order to validate these self-assessment reports, practical classes were attended at the departments, familiarization with clinical bases, studying the possibilities of developing practical, communicative skills of students.

EEC members divided into subgroups by specialty and visited specialized departments.

The practical training bases of accredited programs were visited.

In the specialty "Infectious Diseases, including Children", an external expert, Doctor of Medical Sciences, Professor Sholpan Adlgazyevna Kulzhanova, and Director of the Institute of Bibliography, Gulmira Kakimovna Bekzatova, visited the Department of Epidemiology and Infectious Diseases, located at the base of the regional infectious diseases hospital (Karaganda, Okhotskaya, 2A), which consists of from consultative diagnostic, laboratory, medical stages of helping patients of different ages.

A visit to the Department of Epidemiology and Infectious Diseases NC JSC KMU Karaganda Medical University), located at the base of the hospital, began with an introduction to the faculty:

Kim Antonina Arkadevna - responsible teacher for the discipline "Infectious diseases with dermatovenereology";

Alshynbekova Gulsharbat Kanagatovna - responsible teacher for the discipline "Children's infectious diseases";

Begaydarova Rozaliya Khasanovna - professor of the department, doctor of medical sciences, academician of the RAE;

Starikov Yuri Grigorievich - professor of the department;

Devdariani Khatuna Georgievna - associate professor of the department;

Zhunusov Erzhan Seypolovich - PhD doctor, associate professor of the department;

Sarsekeeva Nazgul Yesentaevna - PhD doctor, associate professor of the department;

Kolmogorova Ekaterina Leonidovna - assistant professor of the department;

Nasakaeva Gulmira Ermekbaevna - master, assistant professor of the department.

The Regional Infectious Diseases Hospital serves the population of the Karaganda region, providing specialized care to patients arriving on a planned and emergency basis.

A visual inspection of the infrastructure of the Regional Infectious Diseases Hospital and the department for the organization of the educational process was carried out: the total area allocated for the educational process is 186.7 m2 and a conference room with an area of 255.5 m2 for 200 seats, training rooms that meet sanitary standards and fire safety and modern requirements.

The department has at its disposal personal computers and a laptEP with corporate Internet connection and Outlook mail, ID telephony, multimedia projectors, and multifunction devices. All study rooms are materially and technically equipped (tables, chairs, cabinets, boards, flip charts).

On a clinical basis, all necessary working conditions have been created for high-quality training, taking into account the residents' own needs, including with regard to health.

The Regional Infectious Diseases Hospital has an information system that provides electronic document management: Integrated Medical Information System (for registration and management of patients based on the Guaranteed Volume of Free Medical Assistance) and automation of staff jobs. During the visit, experts visited the departments of the Hospital and got acquainted with technologically equipped clinical and biochemical laboratories, X-ray and ultrasound rooms.

Conversations were held with the deputy director for quality control of medical services Zhantakbaeva Botagoz Melisovna, the head of the laboratory, the head of the laboratory Gopfauf Olga Viktorovna, with the functional diagnostics doctor Shashkova Nagima Satybaldievna, head. the intensive care unit of intensive care Saramanova Ainagul Satybaldievna, head of the department of intestinal infectious diseases in young children Kustova Zhanna Antanasovna, head. Department of airborne droplets and neuroinfections Stupina Elena Aleksandrovna. Based on the results of the conversation, a close relationship was found between the staff of the department of NC JSC KMU and Regional Infectious Diseases of Karaganda.

Experienced hospital doctors with at least 3 years of experience in the specialty, the highest qualification category, work as a clinical mentor (G. Kishenova, head of department 1, infectious disease specialist of the highest category, work experience of more than 15 years; A. Saramanova, department head Intensive Care Resuscitation, infectious diseases specialist-resuscitator of the highest category, work experience more than 20 years; Kustova Zh., Head of the department of intestinal infectious diseases in young children, doctor of the highest category, work experience more than 20 years), under con rolem which held SRRP (work at the bedside, night / day duty, filling out medical records). Mentors are actively involved in the implementation of the Training Program, preparation for passing an independent assessment of the development of professional competencies. On the basis of the Hospital, the staff of the Department of Epidemiology and Infectious Diseases constantly conducts research work based on scientific and technical progress.

The teaching staff of the department carries out the educational process at the level of undergraduate, internship, postgraduate education - residency, master's and doctoral programs; holds master classes for practicing doctors at the university, medical institutions of Karaganda and the region, including visiting master classes, scientific and practical conferences on topical issues of infectious diseases. Seminars in the Regional Office of the z / o of the Karaganda region in the framework of joint work with practical healthcare online and selector mode (annually according to plan for a year).

On the basis of the Hospital, there is the possibility of direct training of residents in laboratory (clinical, biochemical and bacteriological) and instrumental studies (radiography, ultrasound) in patients with infectious diseases. EEC experts attended classes for 1st year residents of the specialty 6R111300 - "Infectious Diseases, including Children", 8-001 inf and 8-002 inf groups.

All resident students attended the lesson: Abil A., Eshtaev D., Zhandarbek P., Sursenbaeva J., Abraeva J., Baltabaeva D., Ibragimov A., Sarsembekova G. Residents of the 2nd year according to

the schedule passed the module "Children's Infectious Diseases at the Polyclinic" from 11/26/2018 to 01/18/19, and "Infectious Diseases at the Polyclinic" from 02/11/2019 to 04/12/2019, are currently on discipline "Epidemiology" (from 04/15/19 to 03/03/19).

- The experts familiarized themselves with the educational and methodical documentation of the Department of Specialty "Infectious Diseases, including Children's", and the portfolio of residents.
- The first-year residents were interviewed about practical training, about the skills that they acquire while studying at the department, about the use of innovative technologies, the assessment of practical and theoretical sections of classes, about midterm control, intermediate and final certification; and about accessibility: the use of the center of practical skills (CPS) for practicing practical skills of students in patients with infectious pathology (on the example of a clinical case and on mannequins); work directly with patients in the hospital, clinic, in the laboratories of the Hospital, in the X-ray room and ultrasound;
- electronic document management programs for hospitals, clinics in the Information System for the reception and management of patients;
- library stock and electronic resources in educational, research processes.

During the interviewing of experts, the residents were interested in social issues, namely, household ones (the possibility of living in a dormitory), material assistance from the university.

In October 2018, according to the schedule of residents' rotation on clinical bases in accordance with the level of medical care, two first-year residents worked in the Central District Hospital of the Shielinsky District, Kyzylorda Oblast for 2 weeks (P. Zhandarbek, Zh. Sarsenbaeva).

As a result of interviewing the department staff and residents, satisfying answers were received, wishes and suggestions were discussed.

At the department from 2015 to 2018, an active method of teaching d-PBL was introduced by participants of the international educational program TAME (training to avoid medical errors) at KSMU - prof. Alshynbekova G.K. and Dyusembaeva A.E., who underwent external and internal trainings (tutors). Developed our own case "Diarrhea", based on the history of a real virtual patient, with embedded medical errors in order to avoid the most common errors in the diagnostic and therapeutic processes in a safe environment, which is used in training with residents as an innovative technology. This case was introduced for residents of infectious disease specialists and pediatricians as part of academic mobility at the Department of Infectious Diseases and Dermatovenereology of the UKMA, Professor Alshynbekova G.K. Currently, the process of developing a case on the subject of "Meningitis" is ongoing, it is planned to bring the number of cases to 10 according to the main relevant nosologies of pediatric infectology.

Every year, the departments worked at the universities of the Republic of Kazakhstan through academic mobility (Ye. S. Zhunusov, work at NC JSC KMU at the Department of Infectious Diseases May, 2017; Beisenova G.R., SKMA at the Department of Infectious Diseases and Dermatovenereology, June 2018, Alshynbekova G.K., SKMA at the Department of Infectious Diseases and Dermatovenereology, October 2018) and neighboring countries (Devdariani H.G., Dyusembaeva A.E., TashPI, Department of Infectious Diseases, April 2017, Nasakaeva G.E., TashPI, Department of Infectious Diseases, May 2018).

Comfortable conditions were created for the work of the EEC, access to all was organized necessary information resources. Commission marked high level corporate culture of university employees, a high degree of openness team in providing information to members of the EEC.

In the specialty "Pediatrics", experts visited the "Regional Children's Clinical Hospital" (Yerzhanova, 8), which includes a 24-hour hospital with 290 beds and a hospital-replacement care 50 beds. It has in its composition, 10 medical children's specialized departments in 17 bed profiles: gastroenterological - 12 beds, hematological-20, pulmonological - 25, nephrological -30, allergological-10, endocrinological-22, resuscitation and intensive care 10-, neurological-15, department for nursing premature babies-12, ENT department-40, department of pediatric surgery-64, rehabilitation treatment and medical rehabilitation of the neurological profile - 15 beds, pediatric (somatic) - 15 beds, day hospital for 50 beds, surgeon Of pediatric and pediatric profiles, the hospital

has a specialized polyclinic, where pediatric specialists - surgeon, orthopedist, urologist, ophthalmologist, ENT doctor, neurologist, cardiologist, gastroenterologist, allergist, endocrinologist, nephrologist, and audiologist are receiving. In DBK are located: pulmonological, cardiology, allergology departments, ICU. There are equipped training rooms at the bases, where all the training documentation is stored, employees work, and cathedral meetings are held monthly.

Conversations were held with the Director of the Hospital A.N. Bidaibaev and deputy director for medical work Derkach N.G. During the conversation, it was revealed that the hospital administration works closely with NC JSC KMU. Familiarized with the teachers of the Department of Children's Diseases, teaching in the residency specializing in Pediatrics, 6R114200: head of the department, prof. Skosarev I.A., Professor Abeuova B.A., prof. Kenzhebaeva K.A., prof. Eremicheva G.G., prof. Kuzgibekova A.B., associate prof. Zhumakanova K.S.

In order to obtain objective information about the quality of the educational program and the entire infrastructure of the department, clinical bases, clarify the contents of the self-assessment report, they visited the Perinatal Center of Karaganda in the specialty "Neonatology". A conversation was held with the Director of the perinatal center of Karaganda, Medeubaeva K.A.ona indicated that the leadership works in close contact with NC JSC KMU. Experts familiarized themselves with the organization of the educational process in the residency in the specialty 6R114300 - Neonatology. On the specialty "Pediatrics" - 1 resident of the 1st year. On the specialty "Neonatology" - 8 residents of the 1st year, 1 - resident of the 2nd year.

We got acquainted with the educational and methodical documentation of the departments in the specialties "Pediatrics", "Neonatology", the portfolio of residents. They obtained evidence of the resident's active participation in the development of practical skills, access to operating equipment, a sufficient number of patients per resident, and well-equipped training rooms. The methodical work is shown: a modular educational program for the entire path of education in pediatrics, a modular curriculum, thematic lesson plans, syllabus. Familiarized with the Calculation of the academic workload in the residency for 2018-2019, Magazine for workouts, Portfolio of a resident 2 years of study A. Aspandiyarova; acquainted with the publications of residents for the 2017-2018, 2018-2019 academic years.

A conversation was conducted with a resident in the specialty "Pediatrics" of Traks O.V. 1 year of study, feedback was received on the organization of the educational process in the residency, the satisfaction of the resident in clinical training at the "patient's bed" was monitored. Familiarized with the work of residents in Moodle. At the time of the visit to the department, a practical lesson was held on the topic "Diffuse diseases of the connective tissue: differential diagnosis, clinic, treatment according to the Clinical protocols of the Ministry of Health of the Republic of Kazakhstan, prevention" was conducted by the professor of the Department of Children's Diseases No. 1, candidate of medical sciences, Galina Eremicheva Georgievna. The lesson was held with a resident of 1 year of study in the specialty 6R114200 Pediatrics Traks OV

A conversation was held with residents on the organization of the educational process, the satisfaction of residents with the conditions and results of training was revealed. Familiarized with the Portfolio of 8 residents of "Neonatologists" on the example of resident Borissevich M, 1 year of study. We attended a practical lesson on the topic "Hemolytic disease of the fetus and newborn. Protocol", which was conducted by Professor of the Department of Children's Diseases No. 1, MD, Kenzhebaeva Kulzhikesh Asylkhanovna. The lesson was held with residents of 1 year of study in the specialty 6R114300 Neonatology.

The degree of satisfaction with the level of preparedness of residents actively participating in the treatment process was determined: monitoring of newborns, diagnosis of physiological and pathological conditions, conducting a diagnostic search to verify the diagnosis of children during the neonatal period, participation of residents in the Commission for the Study of Deaths, in night shifts according to the schedule, approved by the head physician of the Center. There were no comments and complaints for the entire period to residents and teachers. There is cooperation in educational, scientific and clinical activities. In the specialty "Oncology", an external expert visited the Department of Oncology and Radiation Diagnostics, located at the clinical base "Regional Oncology Dispensary" in Karaganda at the address: st. Krivoguz, 189. Since 1972, the Oncology Center has

been the clinical base of the Department of Oncology of the "Medical University of Karaganda." Oncological assistance to the population of the region is represented by a bed fund of 330 beds with a dispensary department and a polyclinic for 173 visits per shift of 74,000 visits in 2018.

There are 4 training rooms at the Oncology Dispensary Base, an auditorium for a lecture, in the amount of 50 seats, in addition, for the educational process, assistant, assistant professors, and professors' offices are used. The Department of Radiation Diagnostics has MRI, CT, 3 X-ray rooms, a mammography room and 3 rooms for ultrasound diagnostics, which are used to diagnose and treat manipulations of trepan-biopsy of tumors. In addition to instrumental studies, the endoscopy department also performs stenting for esophageal stenosis, cicatricial strictures of the anastomosis, and chemoembolization of the blood vessels of the liver.

Regional Oncology Dispensary has an information system that provides electronic document management: Information System and automation of workplaces of staff. All employees of the Department of Oncology and Radiation Diagnostics have access to the Information System.

A visit to the Department of Oncology and Radiation Diagnostics of the "Medical University of Karaganda", located at the base, began with an introduction to the faculty:

Kabildina Naylya Amirbekovna - Candidate of Medical Sciences, Associate Professor, Oncologist and Surgeon of the highest category.

Musulmanbekov Kani Zhumkenovich - academician of the Republic of Kazakhstan doctor of medical sciences, professor, surgeon oncologist, laureate of the state prize of the Republic of Kazakhstan. Curator of residents - oncologists.

Sirota Valentina Bronislavovna— doctor of medical sciences, professor, oncologist-surgeon of the highest category, laureate of the state prize of the Republic of Kazakhstan.

Bukenov Akat Mukhamedievich — doctor of medical sciences, professor, oncologist-surgeon of the highest category, responsible for residency in the specialty "Oncology". Responsible for the residency program in the specialty "Oncology" and curator of residents.

Turgunov Meiram Bayzrakhmanovich - candidate of medical sciences, associate professor, surgeon oncologist.

Sharipov Amangeldy Zhapargalievich - candidate of medical sciences, is a qualified oncologist surgeon.

Kruk Evgenia Vladimirovna - candidate of medical sciences, doctor of radiation oncologist of the first category. Responsible for the residency program in the specialty "Radiation therapy" and the curator of residents.

Beisenaeva Anel Rysbekovna –PhD, associate professor, oncologist, obstetrician-gynecologist of the first qualification category.

Fomenko Yuri Mikhailovich - assistant of the department, master in the specialty "Medicine". Poluektova Yana Leonovna - assistant of the department, master of medical sciences.

On the basis of the dispensary, the department staff conducts scientific work. Professor Musulmanbekov K., prof. Bukenov A.M. are the supervisors of PhD doctoral student B. Orazbaev on the initiative topic: "The results of treatment of the thoracic esophagus depending on the prognosis factors", on the topic of the dissertation there is intellectual property "Improved endoscopic gastroscopy for esophageal stenosis of 3-4 degrees" No. 1797 dated 06/01/18. Invention patent No. 33278 dated April 24. 17g. "A method for plasty of the esophagus for cancer with a whole stomach during resection of the thoracic esophagus" ed., Musulmanbekov K., Shauenov E.S., Orazbaev B.A. Published 3 articles in print, of which in the journal "OpenAccesMacedoniyaofMedicalScince -2019" No. 7 (1) p. 82-87. Auth .: Bukenov A.M., Musulmanbekov K., Orazbaev B.A.

The department is actively implementing a program of academic mobility, so the head. Associate Professor, Candidate of Medical Sciences. Kabildina N.A. from 02/19/18 to 02/23/18 was at the Department of Oncology MUA Astana. Associate Professor, PhD Beisenaeva A.R. from 05/20/19 - 05/30/19 plans to leave for academic mobility in the "Medical University of Semey" to the Department of Clinical and Radiation Oncology.

Graduates of residency in the specialty "Oncology" were 100% employed. Tungushbaeva A.S. - Clinic №5 of Karaganda, Vatulin N.N. - Polyclinic Temirtau, Rakhimzhanova F.S. - Central District Hospital Shetsky R., Imasheva B.S., Toktekina G.T., Apsalyamova Sh.R - Regional Oncology

Dispensary, chemotherapist, Sultangazin S. - Oncology Dispensary, Kyzylorda, Bayanov E .E - polyclinic №4, Karaganda, Belyakova N.N- Oncology center in Kostanay, Taukelov A.- Oncology center in Kokshetau. Resident Orazbaev B.A. - Regional Oncology Dispensary.

Freedom in the formation and implementation of the Teaching Process for residency in the specialty "Oncology" is achieved through a component of choice, the disciplines of which are offered by the departments based on certain final competencies, as well as on the basis of the analysis of the current state of medical science and technology. The Department of Oncology and Radiation Diagnostics independently determines the forms of class behavior, uses various pedagogical methods and techniques, develops methodological materials, offers forms of monitoring and evaluation of educational achievements. Active learning methods - CBL, TBL, RBL are widely introduced into the educational process. One of the ways to build communicative competence is interdisciplinary training, the basis of which is thematic interdisciplinary integration. This allows residents to build communication models that are integrated on previously acquired knowledge, skills to form, organize and integrate new communications between all interested parties in the Learning Process.

Analysis of the assessment of the scientific and clinical work of residents is assessed by semiannual and annual reports, which are discussed by the curator, responsible for the specialty and the head of the department.

One of the forms of performing CPP is the daily management of patients with oncopathology, outpatient admission of specialized patients, which are reflected in the Learning Process and contribute to the clinical training of residents in the specialty "Oncology".

The expert got acquainted with the educational and methodical documentation of the department

specialties "Oncology", a portfolio of residents. An evidence base was obtained on the availability of syllabuses in all disciplines, a schedule for receiving training, consultations at the Center for Practical Skills.

Currently, 18 residents are studying at the Department of Oncology and Radiation Diagnostics: 12 of them are studying in the 1st year and 6 in the second.

Interviews with residents of oncologists 1 and 2 years of training on practical training, on the skills that they acquire during training, on the use of innovative technologies in the educational and clinical process were interviewed.

During the interviewing of experts, the residents were interested in social issues, namely, household ones (the possibility of living in a dormitory), material assistance from the university.

In the specialty "Nephrology, including children's," the expert visited the Department of Nephrology with 40 beds, the hemodialysis department of the regional clinical hospital (29, Karaganda, Tereshkova), where there are 29 hemodialysis machines, and qualified nephrology assistance is provided to the population, including hemodialysis assistance to patients with acute and chronic renal failure.

The Regional Clinical Hospital has an information system that provides electronic document management and automation of staff jobs - the Information System. The Department of Internal Medicine No. 3 is located on the basis of the design bureau, whose employees train both students and residents.

For the convenience of patients in the hospital structure, it is possible to conduct a wide range of laboratory and instrumental studies.

Acquaintance with the allergological center began with acquaintance with the department staff. In the center we were met by 2 registrars: Kharlamova Anna Vladimirovna and Kezikbaeva Asem Kabylovna.

Employees of the Department of Nephrology:

Ibraeva Lyazat Kataevna - Head of the Department of Immunology and Allergology;

Bacheva Irina Viktorovna - PhD doctor, associate professor;

Sarieva Saltanat Sabyrovna - clinical mentor, nephrologist of the highest category, head of the hemodialysis department of the Regional Clinical Hospital;

Baesheva Tatyana Arystanovna - Candidate of Medical Sciences, Associate Professor.

An EEC expert attended a lesson held by Alexei Fedorovich Gabdrautov, a resident of 2 years

of study, in the specialty 6R111000 - "Nephrology, including children's", as well as 1st year resident Ivan Alexandrovich Rebrik.

The expert got acquainted with the educational and methodical documentation of the department on the specialty "Nephrology, including children", the portfolio of residents. As a result of visiting the department, evidence of active participation of residents in the preparation of the Learning Process, participation in conferences, research, practical skills, access to training in manipulations, a sufficient number of patients per resident was obtained.

Residents demonstrated a high level of knowledge during the survey, have access to clinical protocols, a calculator to calculate the necessary indicators. Equipping the Regional Clinical Hospital at a high level, which allows residents to master key and professional competencies in the field of nephrology.

During the visit, experts noted the strengths of the training process for residents of the specialty "Nephrology, including children." So, the institute of mentoring was introduced (1 mentor from among the practitioners of practical health care), a schedule of rotation of residents by clinical bases in accordance with the level of medical care is presented.

The base of practical training of the accredited program in the specialty "General Surgery" was visited. The expert visited the clinic of a medical university (KMU - Karaganda, 3 stoker room, building 3), which is a medical complex that combines an advisory diagnostic, laboratory, medical and preventive stages of patient care, the project of which was implemented as part of the transfer of the city clinic to the trust management of the "Medical University of Karaganda".

The total area of the KMU is 3800 m2. The total number of beds is 100 beds, of which: 60 - surgical, 40 - therapeutic.

KMU includes the following units::

- -Surgical unit: general surgery, urology, thoracic surgery, Otolaryngological surgery.
- -Therapeutic block: departments of therapy and neurology
- -Resuscitation unit
- -Department of Premature Rest
- -Traumatology Center
- -Diagnostic unit
- Administrative block

Operating rooms are equipped with KarlStortz video endoscopic complexes for laparoscopic surgery in surgery, urology, gynecology; equipped with electrosurgical high-frequency devices with argon-enhanced coagulation FOTEK, a complex of ultrasonic generator SONOSURG, generator electroligating LIGASURE.

Karaganda Medical University has an information system that provides electronic document management and automation of staff jobs. The Karaganda Medical University has several software: Information System, Laboratory Information System.

The Department of Surgical Diseases No. 3 is located on the basis of Karaganda Medical University.

The presence of the Department of Surgical Diseases No. 3 on the basis of Karaganda Medical University allows improving the training of specialist surgeons, conducting research work with students in internships, postgraduate education, organizing master classes for practicing doctors, scientific and practical conferences, and round tables on topical issues of surgery.

The structure of Karaganda Medical University has the ability to conduct a wide range of laboratory and instrumental studies (radiography, ultrasound, FibroGastroDuodenoScopy, colonoscopy, bronchoscopy).

Acquaintance with Karaganda Medical University began with acquaintance with the department staff. I was met at Karaganda Medical University by Abatov Nurkashi Tulepbergenovich - chief surgeon of Karaganda Medical University, head of the Department of Surgical Diseases No. 3 of Karaganda Medical University.

Surgical Unit Staff:

1) Abatov Nurkashi Tulepbergenovich - candidate of medical sciences, FULL professor, chief

- surgeon of KMU, head of the department of surgical diseases No. 3 NC JSC KMU
- 2) Khasenov Zhasulan Dalelbekovich surgeon of the highest category, head of the surgical unit, clinical mentor of the Department of Surgical Diseases No. 3 NC JSC KMU
- 3) TemirbaevAmanzholAldanovich thoracic surgeon of the highest category, assistant at the Department of Surgical Diseases No. 3 NC JSC KMU
- 4) Badyrov Ruslan Muratovich surgeon, doctor PhD, associate professor of the Department of Surgical Diseases No. 3 NC JSC KMU
- 5) Asamidanov Yerkebulan Margulanovich urologist, doctor PhD, associate professor of the Department of Surgical Diseases No. 3 NC JSC KMU
- 6) Leonid Viktorovich Sevastyanov category 2 urologist, 2nd year undergraduate student in the specialty "Medicine"
- 7) YesniyazovDiasKairatovich ENT surgeon of the 2nd category, doctoral candidate of the 1st year of study in the specialty "Medicine"

An EEC expert got acquainted with the departments of NC JSC KMU, conducted a visual inspection of the department's infrastructure: surgical department, classrooms, operating unit, resuscitation and intensive care unit, a room reserved for residents and self-study. High-level equipment that allows residents to master key and professional competencies in the field of anesthesiology and intensive care.

During the visit, the educational and methodological complex of the discipline of the educational program of the specialty 6R112700 "General Surgery", a portfolio of residents, was studied. Residents of 1 year of study were interviewed: Duysenov Galymzhan Nalibekovich, Shokan Rətbek Kairatyly, Troshin Vadim Viktorovich.

As a result of visiting the department, evidence was obtained of the active participation of the resident in the development of practical skills, access to training in manipulations, a sufficient number of patients per resident, and well-equipped training rooms.

(VI)ACCORDANCE WITH THE SPECIALIZED ACCREDITATION STANDARDS

6.1 Standard "Mission and Management"

The evidence part

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

The mission of the educational programs (EP) of the residency is carried out in accordance with the mission of the NJST "Medical University of Karaganda" (NJST "MUK"). It includes training professionals who meet the requirements of the national health system and international standards through the introduction of innovations into education, science and practice.

Objectives, measures to achieve these objectives and target indicators that contribute to improving the system of residents' training in the NJSC MUK are reflected in the priority trends of the MUK Strategic Plan for 2017–2021. They are implemented by improving educational programs, expanding academic mobility, developing educational technologies and perfecting the assessment of students' educational achievements, widely involving students in the professional environment and enhancing practical training.

The official source of information about the University is the <u>www.kgmu.kz</u> website, which is open, publicly available for prompt and objective informing the society about the activities of the University.

The University attracts faculty members / courses, employers, students to drawing up the development plan for the EP. Employers annually formulate their needs for specialists, requirements

for their preparation, make their proposals for change and are actively involved in the process of adjusting the working curriculum on their specialty to the needs of practical public health.

When forming the development plan of the EP, the transparency of the processes is supported, while information on the content of the EP is presented to stakeholders.

Specialty EPs are publicly discussed with representatives of all interested parties, and taking into account their identified deficiencies, comments and suggestions, the RPs are corrected and receive amendments.

This organization conducts the procedure for approval, periodic review (revision) and monitoring of educational programs and documents regulating this process. The University has documented all the processes governing the implementation of the EP. Each employee knows his duties, functions and rights.

The availability and effective functioning of the information-and-feedback system aimed at students, employees and stakeholders is constantly ensured, the functioning of the quality control of the EP system is demonstrated, and the external and internal environment is analyzed. The degree of satisfaction of teachers and residents is determined during sociological monitoring. Monitoring is organized and carried out in accordance with the established requirements. Surveys and questionings are conducted among residents, graduates, employers and stuff in order to identify their views on the quality of the professional activities of teachers, the quality of management activities and other important issues of the educational process.

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

Education in residency is carried out on a full-time basis, the period of study is 2-3 years depending on the specialty.

The post-graduate educational program of residency in specialties implemented at the University is based on regulatory documents, SES RK - 2015, standard programs of specialties approved by the Ministry of Health of the RK. Autonomy in the preparation of the educational program is achieved through a component of choice.

The learning outcomes of residents in their chosen specialty are formed at the level of the entire educational program, at the level of the module and a separate discipline.

The need for graduates of the residency is confirmed by the receipt of applications for specialists from medical institutions of Karaganda and other regions.

To assess the final results of studies at the University, surveys and questionings on the clinical competence of residency graduates are conducted among the medical institutions employees and other categories of stakeholders.

The analytical part

According to the "Mission and Management" standard, we would like to note that the success of the EP implementation is determined mainly on the basis of a systematic, purposeful and effective implementation of the EP development plan, which, accordingly, should be completely transparent and accessible to all interested parties.

Constant development and adjustment of educational programs taking into account the needs of stakeholders and students is a continuous process. We perform the development of the EP consistently with national development priorities and the development strategy of the University.

The strengths include:

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

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

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strong – 16
satisfactory – 3
suggest improvements - 0
unsatisfactory - 0
Recommendations: absent.
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6.2 Standard "Educational Program"

The evidence part

The University defines the content and scope of academic disciplines well enough.

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

The organization of education process in the formation and updating of educational programs takes into account the views of students and the interests of employers. Working curriculum (WC) and working training programs are developed in accordance with the model curriculum. The WC is is based on the SES and takes into account the opinion of teachers and employers. The standard curriculum includes a list of mandatory disciplines with an indication of the number of hours, regulates the ratio of basic, major disciplines and components of choice, determines the scope of the discipline.

Training is conducted in three languages: Kazakh, Russian and English.

Individual assistance and counseling for students on the educational process are traced, and conditions are created for the effective development of EP. The educational process takes into account the individual characteristics of students, provides support for the implementation of the EP and maintains a system for monitoring their achievements.

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

Students can get advice from teachers, as well as write to the rector's blog, which is available on the University website, and get a detailed answer.

The analytical part

The Standard "Educational program" was developed in accordance with the mission, goals and expected results of the resident-students. The implementation of the EP allows to provide sufficient material and technical base, human resources, active cooperation with medical health care organizations. According to the standard, it is possible to note the compliance of the qualitative and quantitative composition of teachers for the implementation of EP, the high level of teacher qualification and the feedback from the managers of practical bases on the adequate level of training. The increase in hours for the development of practical skills will strengthen the EP.

Strengths / Best Practices

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

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

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strong – 21
satisfactory – 5
suggest improvements – 0
unsatisfactory - 0
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Recommendations of EEC:

1. To envisage the use of the experience of foreign partner universities in the development of EP.

6.3 Standard "Resident assessment"

The evidence part

In order to assess the educational achievements of residents, the KMU has developed criteria, regulations and procedures in accordance with the goals and objectives set for the implementation of educational programs in accordance with legislative, regulatory and internal documents:

- 1. The Law of the Republic of Kazakhstan "On Education" of 27.07.2007, No. 319-111.
- 2. Decree of the Government of the Republic of Kazakhstan dated May 17, 2013 No. 499 "Standard rules for the activities of organizations implementing higher professional education programs"
 - 3. SES RK-2015 on residency

- 4. Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 125 dated March 18, 2008 "Standard rules for conducting ongoing monitoring of progress, interim and final attestation of students".
- 5. Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 152 of April 20, 2011 "On Approval of the Rules for Organizing the Educational Process on the Credit Technology of Education".
- 6. Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 198 dated April 2, 2014 "On approval of the Rules for the organization of the educational process on credit technology of education".
- 7. Regulations on the rating system for assessing student performance approved on December 15, 2017. by the decision of the Academic Council of KSMU protocol No. 5
- 8. Order of the Ministry of Health of the Republic of Kazakhstan dated November 12, 2009 No. 699. "On approval of qualification characteristics of medical and pharmaceutical specialties".
- 9. Order of the Ministry of Health of the Republic of Kazakhstan No. 28 "On approval of the Regulation on residency" dated January 30, 2008
- 10. "Regulations on the residency of KSMU", approved by the Rector of KSMU from 01/25/2018 (https://portal.kgmu.kz)
 - 11. "Academic policy of KSMU", approved by the Rector of KSMU on 12/14/2018:
- 12. The provision "On the rating system for assessing student performance" (https://portal.kgmu.kz);

Evaluation of educational achievements in the intermediate (mid-term) and final forms of control of students of the residency in the KMU is carried out according to a ball-letter system on the basis of the "Model rules for the ongoing monitoring of progress, intermediate and final state certification of students in higher educational institutions", approved by order of the Ministry of Education and Science of the Republic of Kazakhstan dated March 18, 2008 No. 125, as well as in accordance with the Regulations the Regulation on the rating system for assessing the progress of students approved 15 abrya 2017. by the decision of the Academic Council of KSMU protocol No. 5.

Current control of residents' knowledge is carried out through an oral survey, interviews, clinical analysis of the patient, analysis of situational tasks. Intermediate (landmark) control is carried out by oral survey.

The final control of the discipline / module is carried out after the completion of the academic discipline / module. The decision of the Academic Council of the NJSC "KMU" form of final control in all specialties of the residency is an exam conducted in the form of computer testing in the AIS "Plato".

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

After completing the exam for each discipline / module, the student is given a final grade (final control). The examination examination sheet is created by the teacher in "Plato" in the "Journal" section, then printed in the department of the registrar office, which is engaged in accounting and accumulating the number of hours for all students during the entire training period. Subsequently, the consolidated statement of DAR accounting is transmitted by the registrar office to the dean's office of the school of professional development and residency, which is taken into account during the interim attestation.

A resident who does not agree with the result of the theoretical exam shall appeal no later than the next business day after it has been held.

The form and procedure for conducting final control for each academic discipline / module is established no later than one month from the beginning of the academic period (academic year) by the Academic Council of the University.

The final certification of students at the university is carried out in the time provided for by the academic calendar and working curricula of specialties in the form of passing a comprehensive exam, which is held in the form of passing an independent examination, conducted according to test tasks of the Center for Medical Care and passing practical skills on the OSCE technology on models. During the FSC, the graduate must demonstrate possession of the competencies acquired during the preparation of this educational program in accordance with the chosen type of activity.

The reliability and validity of students' knowledge assessment methods is carried out in the form of studying and analyzing a measuring and measuring fund (tickets, situational tasks, tests.).

All KCs undergo an internal examination at the department, are annually reviewed and approved at the meeting of the department. The documents developed by the departments and the dean's office are discussed at the meetings of the AC of the EP,AS NJSC "KMU", approved depending on the authority and the form of documentation by the Vice-Rector of EMW and the Vice-Rector of the CW and the SPW, the Rector of the University.

Policies and procedures for assessing students' achievements are presented in the "Regulations on the rating system for assessing student performance" (Approved and recommended for publication by the Academic Council of KSMU. Minutes No. 5 dated December 15, 2017), which is presented in the public domain on the website of KMU.

According to the Academic Policy (the regulation "On the rating system for evaluating students' educational achievements "developed in accordance with the Order of the MES of RK No. 125 dated March 18, 2008, Typical rules for conducting ongoing monitoring of progress, intermediate and final attestation of students in higher educational institutions") for examinations, are submitted from among professors, associate professors and teachers with a scientific or academic degree, from among employers, highly qualified specialists with practical health care injuries corresponding to the profile of produced residents.

External examiners participate in a comprehensive exam (FSC), in addition, representatives from practical health care are invited to assess the practical skills learned by the residency students during their residency training.

The analytical part

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

Forms of formative and summative controls are transparent and available to interested parties of the educational program.

Strengths / Best Practices

- A mechanism has been developed to monitor the effectiveness of the implementation of the EP.
- Formation of the teaching staff is carried out in strict accordance with the qualification requirements for the licensing of educational activities.

- Effectiveness indicators for EPs are developed taking into account the requirements of practical public health. Involving external examiners from among practical healthcare professionals when conducting total control of residents' knowledge and skills.
- Use of the Platon educational portal for constructive and fair feedback from residents based on the results of an assessment of their knowledge and skills.
 - Individually-oriented organization of the educational process.
 - University's corporate information portal www.kgmu.kz.
 - Well-equipped Center of practical skills.

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

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strong – 6
satisfactory – 3
suggest improvements – 1
unsatisfactory - 0
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Recommendations of EEC:

1. To improve the process of ensuring the quality of evaluation practice in determining the reliability and validity of assessment methods

6.4 Standard "Residents"

The evidence part

According to the Model Rules for Admission to Education in Educational Organizations Implementing Professional Postgraduate Education Curricula, approved by the Government of the Republic of Kazakhstan dated January 19, 2012 No. 109, a contingent of students of higher education institutions and scientific organizations is formed by placing a state educational order, as well as payment training at the expense of own funds of citizens and other sources In the MOOK, the students are admitted to the residency on the basis of the developed internal document "The policy of admission of applicants to the Karaganda State Medical University", which is reviewed annually. The formation of a contingent of residents is carried out on the basis of the state educational order. Admission of persons to the residency is carried out on a competitive basis according to the results of entrance examinations in accordance with the specialties of the university. The residency accepts persons who have mastered professional study programs of higher education with a specific list of documents.

Entrance exams to residency are held in the form of testing. Test tasks are compiled according to the entrance examination program for the relevant specialty, which does not include questions on the biomedical sciences. To determine the specific abilities of applicants in order to improve the result of the learning process for the chosen specialty, the clinical examination in the form of OSKE for 5 common stations and 3 stations by specialty.

The number of accepted students of the residency corresponds to the possibilities of clinical and practical training, the maximum allowable load on managers, as well as the material and technical capabilities of the organization.

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

On the basis of the current Law of the Republic of Kazakhstan "On Education", Model Rules for Admission to Education in Educational Organizations Implementing Professional Postgraduate Educational Programs citizens are accepted from among persons with disabilities in groups II and III, disabled from childhood, orphans left without parental care, and aul (rural) youth.

All information on contingent formation is posted on the university website. Applicants can

familiarize themselves with the conditions of admission and selection to the residency on the website of the university.

According to the Policy for the admission of applicants of the NJSC "MUK", an appeal commission is created in order to ensure compliance with uniform requirements and resolve disputed issues at the university. Appeals commissions are created to review applications from individuals who do not agree with the results of entrance exams.

Residency students are actively involved in the formation and implementation of the Policy in the field of quality assurance of the educational program, in implementing the development of a culture of quality and values of MOOK, development and adoption of documents regulating educational, methodical, scientific, educational processes and ensuring high performance of the team.

The university provides residents with support focused on social, financial and personal needs, allocates appropriate resources for social and personal support. Needy residents are provided with a hostel, financial assistance

In order to ensure the socio-psychological conditions of the individual, providing comprehensive socio-psychological support for students during the entire period of study at the university, there is a support service for residents of the youth policy department, as well as a psychologist's office at the MUK medical center.

The guarantee of confidentiality regarding counseling and support is reflected in the Code of Conduct.

Residency students are regularly invited to meetings of the deliberative bodies and participate in the discussion of issues in the context of this specialty. Suggestions and recommendations, students must be taken into account by members of the deliberative bodies and are taken into account when forming the final decision of the meeting.

Analytical part

According to the Residents standard it can be noted that the selection and admission to the residency is carried out in accordance with regulatory documents. The base of test tasks includes questions on clinical competencies, however, without taking into account knowledge of the biomedical sciences in connection with the fact that it is not spelled out in the policy of organizing the admission of applicants to the residency. Information about the conditions of admission is in the public domain. Residents are provided with appropriate working conditions.

Residents are given the opportunity to participate in deliberative bodies in the evaluation of the training program

Strengths / Best Practices

- Development and implementation of a clinical exam for admission of residents as a selection procedure to identify the specific abilities of applicants in the field of the chosen specialty.
- Reception of the number of residents taking into account the capabilities of the clinical base, the potential of faculty, material and technical equipment of the department.
 - Ability to obtain social and psychological support

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

Strong – 15 satisfactory - 13 suggest improvements- 0 unsatisfactory-0

Recommendations EEC: no.

6.5 Standard "Teachers"

The evidence part

In the educational process of the residency are attracted persons who have a doctor's degree or candidate of science, an academic degree of doctor PhD, doctors of the highest category who have successfully mastered new educational technologies.

The presence of basic education in accordance with the planned pedagogical activity, the presence of scientific and pedagogical experience, academic degree, academic rank are obligatory for teaching staff who train residents. These requirements are reflected in the job descriptions approved by the rector of NAO MUK.

The university provides a balance between teaching, research and the provision of medical care by attracted teachers. Scientific work is an integral part of the teaching staff of the university and a prerequisite for the training of residents in all accredited specialties. Teachers who prepare residents take part in scientific research and the development of clinical protocols for the diagnosis and treatment of RCHDs of the Ministry of Health of the Republic of Kazakhstan.

The faculty of the university regularly improve their pedagogical skills free of charge. Control over the advanced training of teaching staff is carried out by HRMD, as well as by the personnel department. The advanced training plan includes all types of internships, PC courses, etc. Upon completion of the passage of advanced training, certificates of completion of the PPK course are provided.

The University has developed mechanisms and criteria for systematic assessment of the quality of teaching: these are intra-departmental control in the departments, open classes, class visits, resident questionnaires, etc. The results of open classes are discussed at the meetings of the department

The university conducts personnel policy in such a way that the profile of the teaching staff strictly corresponds to the range and balance of pedagogical skills, which is achieved by continuously monitoring and regulating the ratio of teaching staff teaching basic and clinical disciplines. Curators are appointed from among the faculty members who have a doctoral degree, a candidate of medical sciences, as well as the highest qualification category, who are actively engaged in scientific and practical activities in the industry.

The teaching staff of the NJSC "MUK" contributes to the achievement of the mission and goals of the university, the qualification of the teaching staff corresponds to the level of their positions and ensures the implementation of educational programs. PPP qualification confirmed by the relevant academic degree, academic title, work experience, the teaching staff of clinical departments - by the presence of a qualification category of a specialist and the confidence of colleagues, membership in associations.

Analytical part

According to the standard "Teachers", one can note the high level of professionalism of the teaching staff who implement residency educational programs. There is a systematic advanced training.

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

Strengths / Best Practices

- Selection and placement of teaching staff is carried out taking into account qualifications and professional growth. The analysis of the quantitative and qualitative composition of teachers meets the qualification requirements and goals of the educational program.
 - The introduction of the institution of mentoring
 - The rights and obligations of mentors are governed by job descriptions

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

strong-5

satisfactory –0 suggest improvements-0 unsatisfactory-0

Recommendations EEC:

1. On an ongoing basis to carry out the training of practical health care professionals involved in the educational process, pedagogical competencies.

6.6 Standard «The Educational Resources»

The evidence part

The university has classrooms teachers 'offices, a simulation center-1, a library with a reading room, a gymnasium, a medical center, a computer technology office, a residents service center, which are equipped with the necessary equipment to ensure the quality of education. In order to effectively implement educational programs, the university management strengthens and modernizes material and technical resources. According to the results of the assessment of the degree of deterioration of buildings, the results of the inventory, the obsolescence of technology, etc., measures are being taken to maintain resources at the level of the requirements for educational institutions. All classrooms and classrooms are equipped in accordance with the ongoing education program, with qualification requirements, in accordance with sanitary and fire safety standards. A safety log is kept. The provision of residents with computer and information resources is sufficient to conduct a high-quality educational process; it meets licensing and certification requirements. The site of the university operates in Kazakh and Russian languages, offers full information about the university, answers to questions.

The implementation of the EP takes into account the individual needs and capabilities of the resident students. Each student is given the opportunity to develEP practical skills and abilities in the offices of the center of practical skills, clinical bases.

The university organizes free access to educational online resources, introduces information technologies, and monitors the use and development of teaching staff with innovative learning technologies.

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

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

The library book of the library is 87817/601621 copies, including:

- 1) in Kazakh language 11161/269613 copies.
- 2) in Russian 52074/285068 copies.

Analytical part

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

Educational equipment and computer technology meet safety requirements during operation.

Strengths / Best Practices

- Training equipment and software used for the development of the EP are sufficient and meet the safety requirements during operation.
- The University creates a learning environment that promotes the formation of basic and professional competencies and takes into account the individual needs and capabilities of residents
- The University creates conditions for the development of practical skills and competencies of residents in the studied disciplines
 - The University conducts an assessment of material and technical resources and information

support of the EP.

- The University has the required number of classrooms equipped with modern technical training facilities that meet sanitary and epidemiological standards and requirements.
 - The University has the required number of computers, textbooks, multimedia equipment.
 - Free access to educational online resources.
- The administration of the EP demonstrated the reflection of information on the web resource.

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

Strong - 11 Satisfactory - 10 suggest improvements-0 unsatisfactory-0

Recommendations of EEC: In the training program for residents to provide training hours for research.

6.7 Standard "Evaluation of educational programs"

The evidence part

Evaluation of educational programs is carried out taking into account the mission of post graduate education (residency) in accordance with the mission of the University and consists in the quality training of competitive residency graduates who are able to continue their lifelong learning in the conditions of dynamically developing modern medicine and carry out their professional activities on the basis of modern innovative intellectual technologies in conjunction with the solution of socially important tasks of practical health care, as well as those with active citizenship, satisfying the needs and expectations of society and the state.

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

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

Monitoring of the educational process includes the monthly holding of department meetings where the implementation of the curriculum, the results of the quality control of the educational process (discussion of practical exercises, lectures, etc.) are discussed.

Monitoring of progress and attendance carried out by the department according to the schedule of classes with the recording of data in the journal; in the absence of students in the classroom informed dean. Monitoring and control of the dean's office is carried out on the basis of the results of the mid-term control, interim certification and final state certification.

Monitoring and control of the achievement of the final learning outcomes is carried out by the departments and the dean of the faculty of residency and additional education with final certification.

When developing a new educational program and submitting an application to the authorized body, the security and level of qualification of teaching staff in this specialty is taken into account. The annual report of the Chairman of the IGA on the results of the Final Attestation of the graduates of the residency is heard on the "MUK" NCJSC.

The departments analyze feedback from the EP from residents on various aspects of the activity. In the process of assessing the EP in the field of "Infectious diseases, including children", "Pediatrics", "Neonatology", "Oncology", "General Surgery", "Nephrology, including children",

"Neuropathology, including children" interested parties are involved - faculty staff and residents.

For feedback with teachers and residents, the rector's blog is used, where students and university staff receive answers to their questions about the conditions for the implementation of EP. Resident representatives are members of ACAP, where they participate in discussions on the implementation of the EP.

The results of the feedback are analyzed, discussed at the meetings of the departments, AC EP,EANAO "MUK". Feedback results are taken into account when planning improvement work. In general, the use of feedback contributes to a better understanding of the current needs of students and teachers, and is systemic when making changes to the EP.

The main tool for the involvement of students in the assessment of the EP is the questioning "Residents' satisfaction with the educational program", "The teacher through the eyes of the resident". An example of effective use of feedback is the systematic questioning of residents in the departments after each discipline.

The results of the survey of students in the field of "Infectious diseases, including children", "Pediatrics", "Neonatology", "Oncology", "General Surgery", "Nephrology, including children", "Neuropathology, including children" in identifying satisfaction with the quality of the educational process showed that the interviewed residents are satisfied with the quality of the educational process at the university.

At the university, international standards and innovative technologies are being introduced into educational processes, which has a positive effect on satisfaction indicators. 100% of respondents are satisfied with the content of EP, teaching methods, organization of the educational process, which confirms the successful implementation of EP in high school.

The increase in the level of satisfaction of residents is due to the targeted improvement of the processes of educational and methodical, library and administrative support and services for students, the widespread introduction of innovative technologies and information and communication systems into the educational process. Library support at the university meets modern international requirements.

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

Of the methodological abilities of teachers, which are integral components of the success of the educational process, students most highly appreciate the clear and accessible presentation of the material, focus on the use of the material being studied in future professional and social activities, which confirms the methodological mastery of the teacher and the students' interest in this issue.

Of the individual qualities of a teacher as a person, the highest marks are given to the manifestation of the qualities of a demanding mentor, goodwill and tact towards students, and a display of respectful attitude. In this issue, the majority of residents characterize the teachers clearly positively, which demonstrates the presence and maintenance of the university's corporate culture.

Satisfaction with the competence of teachers and the quality of teaching is an important indicator for the sustainable development of the university. "MUK" NCJSC to maintain this indicator at a high level seeks to the constant qualitative improvement of the faculty of the university, the improvement of the credit technology of teaching students and the entire educational process as a whole.

Analytical part

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

Strengths / Best Practices

The strengths include:

• The university has developed a system of monitoring and evaluation of the educational program, based on a multi-level approach;

- for the implementation of the component of choice, the process of forming the component of the choice of EP is regulated;
- Evaluation of educational programs in the specialties "Infectious diseases, including children's", "Pediatrics", "Neonatology", "Oncology", "General Surgery", "Nephrology, including children's" according to the internal system of education quality control and involvement of residents and employers in the evaluation of the university.
 - Dynamic evaluation of clinical sites is underway.
 - Improving the EP through resident feedback

Conclusions of EEC on the criteria: (strong / satisfactory / suggest improvements / unsatisfactory)
strong - 7
satisfactory - 6
suggest improvements-0
unsatisfactory -0

Recommendations of EEC: For monitoring and evaluation of the EP residency to actively involve the main stakeholders.

6.8 Standard «management and administration»

The evidence part

Formation of the contingent of the residency of NAO "MUK" is carried out in accordance with the SES RK-2015. Residency in the specialties "Infectious diseases, including children's", "Pediatrics", "Neonatology", "Oncology", "General surgery", "Nephrology, including children's", "Neuropathology, including children's", is implemented by placing a state order for the training of medical personnel and taking into account the possibilities of clinical, practical training, the maximum permissible load on curators, provision of educational, methodological and scientific literature, capacity of clinical bases, as well as material and technical resources of the University.

The procedure for admission of citizens to the residency at the University is established by the "Standard rules for admission to education in the organization of education, implementing professional training programs of postgraduate education", approved by the Government of the Republic of Kazakhstan from 19.01.2012, № 109 and the internal regulatory document "Policy of admission of students to KSMU" (OI/05), approved by the order of the rector, Protocol №9 from 15.05.2017, which are revised depending on changes and additions to the above legal document.

Evaluation of educational achievements of residents at the University is carried out using the criteria and regulations developed in accordance with the goals and objectives for the implementation of EP and assigned qualifications within the current rating system and control of the educational process in accordance with the Directive, regulatory and internal documents. Studying academic performance, on the basis of the rating of residents is assessed OP.

The General resident assessment policy, including the timing of the assessment, evaluation criteria, methods and modalities, is reflected in the syllabus of each module or discipline. The system of control of educational achievements of students is carried out according to the Order of MES №125 "Standard rules of the current control of progress of intermediate and final certification of students in higher education", "Academic policy of NAO "MUK", "Regulations on residency of NAO "MUK" (http://portal.kgmu.kz) and includes various forms: basic control, ongoing control, final control and IGA.

Responsible for the policy of assessing the knowledge and skills of residents are the relevant officials at various stages of training (teaching staff of departments, clinical mentors, Dean's office of Sprir, Vice-rector for clinical work and continuous professional development).

To monitor the implementation of the EP and control the achievement of the final goals of training in NAO "MUK" developed key and professional competence of the residency graduate. The MOS spelled out key competencies.

Educational achievements of residents are evaluated using various forms of control and certification, determined by the "Regulations on the rating assessment of student performance". Assessment of knowledge is carried out according to the point-rating alphabetic system. The examination system in residency consists of forms of basic, current and final controls. After completion of the exam for each discipline the student is exposed to the final grade on the discipline. The examination sheet is transmitted to the Registrar's office. To retake the exam from the assessment of "unsatisfactory" to positive, the student again attends all types of training sessions provided by the IPUD, receives admission and passes the final control. Preparation and retaking of the final control is carried out outside the regular time during the summer holidays.

Analytical part

Periodic evaluation of the University management is carried out at meetings of collegiate and Advisory bodies through internal audit and self-assessment.

One of the important strategic directions of the University is to improve the efficiency of the management system, which is defined in order to ensure the effective functioning of quality management. Measures to achieve indicators of direct results: analysis of the QMS of the University and the report on the Academic Council, external audit, internal audit of structural units of the University.

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

Strengths/best practices

Continuous organizational, coordination and administrative work aimed at achieving the mission of the educational program; transparency of management and decision-making; defined responsibility of academic management in relation to the development and management of the educational program; sustainable financial condition of the University; extensive cooperation with partners in the health sector. The structure of academic leadership ensures the quality and efficiency of the University in order to ensure the training of highly qualified resident specialists, organization and control of educational, social and educational work of the University, the effectiveness of the structural units.

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

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

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

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

Strong positions – 12 satisfactory – 1 suggest improvements – 0 unsatisfactory - 0 Recommendations: no.

6.9 Standard "Continuous improvement»

The evidence part

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

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

satisfaction.

The development of the University is based on the principles of improving the QMS, the introduction of new technologies in the educational process, improving the quality of training of residents in order to respond flexibly to market requirements. The management of the University seeks to prevent problems and their causes by improving the system of internal control and risk management.

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

To ensure a comprehensive and in-depth analysis, the annual work plan of the University INCLUDES the rector's report on the work done, which contains an analysis by the management. The rector's report reflects the results of the implementation of the action plan, the results of the University's processes, recommendations and proposals for the past period and tasks for the new period.

The work allows for continuous improvement in different areas of activity of the University. Based on the results of the analysis by the management, decisions are made to improve and improve the educational management, the rationale for making changes to the quality management system of EP, including the updating of educational documentation.

An important area of work of the departments is the formation of sustainable partnerships with independent experts invited to the exams from practical health care.

Also, a feature of the analysis of the formation of competencies of students of residency at the University is the evaluation of the portfolio.

At the University students of all levels, including residency, have the opportunity to freely Express their opinion on all issues of quality of training, compliance of material and technical base, conditions of clinical practice, etc. For feedback from students and staff at the University there is a blog of the rector on the website of the University.

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

Strengths of the University according to the standard 9 "Continuous improvement" processes of continuous improvement of the educational program of residency in specialties are realized on the basis of: professional development of PPP every 5 years, including on pedagogical competences; participation of PPP at training events (seminars, master classes, conferences); understanding of own experience on introduction of pedagogical technologies in educational process; exchange of experience on introduction of pedagogical technologies in educational process with colleagues of other organizations of education and science implementing programs of residency; monitoring, evaluation and review processes for the management of the OP.

University management conducts annual analysis of activities in accordance with the documented procedure (DP KSMU 5.6-01/03) "Analysis of the effectiveness of QMS", the implementation plan of BP KSMU (DP KSMU 5.6.-03/01), monitoring the implementation of the Operational plan of NAO "MUK", the Strategic development plan.

Analytical part

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

Due to changes in the educational environment of the world, legislative acts, NPA and rationalization, the requirements for the design and content of educational programs are periodically reviewed. Annually updated Regulations on residency, Regulations on the rating system for assessing the performance of students, Process maps, Instructions, Documented procedures, management Structure, further in order to bring to the attention of University staff updated regulatory documents are posted on the corporate website of the University, as well as sent to the corporate mail units.

Strengths/best practices

The University has a Strategic development plan for the implementation of educational

programs, ensuring timely response to changing conditions

- The University has been monitoring the implementation of ODA through the actualization of UMKC, in the framework of the WCC and analysis of current progress and boundary control;
 - Educational services provided by the University are in demand
 - The University has a competitive position in the market.

Strategic partnership with practical health care to develEP the competence of the resident model in the field, development and implementation of educational programs.

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

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

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

Strong positions – 6
satisfactory – 7
suggest improvements – 0
unsatisfactory - 0

Recommendations: no.

(VII)REVIEW STRENGTHS/ GOOD PRACTICES FOR EACH STANDARD

7.1 mission and leadership Standard»

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

7.2 Standard "Educational program»

The EP guide shows the presence in the content of training courses the professional context; The manual of the EP demonstrates an effective balance between theoretical and practice-oriented disciplines;

- Disciplines cover all issues, problems in the teaching area;
- The structure of the EP provides for various activities, the content of which contributes to the development of basic and professional competencies of students, taking into account their personal characteristics;
- EP guide provides equal opportunities for students, including regardless of the language of instruction
- Management of the EP ensures the availability and effective functioning of a system of individual assistance and counseling students on the educational process
 - Management creates the conditions for effective development of OP
- The EP guide demonstrates the use of the benefits, individual characteristics, needs and cultural experience of students in the implementation of the OP
 - EP guide demonstrates individual support of students in the implementation of OP
- The management of the EP monitors the satisfaction of residents, heads of medical organizations and employers.

• 7.3 Standard "Assessment of resident»

- A mechanism has been developed to monitor the effectiveness of EP implementation
- Formation of the teaching staff is carried out in strict accordance with the qualification requirements for the licensing of educational activities

- EP performance indicators are designed to meet the requirements of practical health care. Involvement of external examiners from among the specialists of practical health care during the summative control of knowledge and skills of residents.
- Use of educational portal "Platon" for constructive and fair feedback of residents based on the results of assessment of their knowledge and skills.
 - Individually-oriented organization of the educational process.
 - Corporate information portal of the University www.kgmu.kz ahhh!
 - A well-equipped practical skills Centre.

7.4 Standard «Residents»

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

7.5 Standard «Teachers»

Selection and placement of teaching staff is carried out taking into account the qualifications and professional growth. Analysis of the quantitative and qualitative composition of teachers meets the qualification requirements, the objectives of the educational program.

- Introduction of mentoring
- The rights and duties of mentors are regulated by job descriptions

7.6 Standard "Educational resources»

Training equipment and software used for the development of EP are sufficient and meet the requirements of safety in operation.

- The University creates a learning environment that promotes the formation of basic and professional competencies and takes into account the individual needs and capabilities of residents
- The University creates conditions for the development of practical skills and competencies of residents in the studied disciplines
- The University assesses the material and technical resources and information support of the OP.
- The University has the necessary number of classrooms equipped with modern technical means of education that meet sanitary and epidemiological norms and requirements.
- The University has the necessary number of computers, educational literature, multimedia equipment.
 - Free access to educational Internet resources.
- The guidebook of the EP has demonstrated the reflection of information characterizing the EP on the web resource.

7.7 Standard "Evaluation of educational programs"

- The University has formed a system of monitoring and evaluation of the educational program, based on a multi-level approach;
- to implement the component of choice regulated process of formation of component selection EP:
- evaluation of EP on specialties "Infectious diseases, including children", "Pediatrics", "Neonatology", "Oncology", "General surgery", "Nephrology, including children", "Neuropathology, including children", including children" is carried out according to the intra-University system of quality control of education and involvement in the evaluation of the University residents and employers.
 - Dynamic assessment of clinical sites.
 - Improving EP by feedback from residents

7.8 Standard "Management and administration»

Continuous organizational, coordination and administrative work aimed at achieving the mission of the educational program; transparency of management and decision-making; defined responsibility of academic management in relation to the development and management of the educational program; sustainable financial condition of the University; extensive cooperation with partners in the health sector. The structure of academic leadership ensures the quality and efficiency of the University in order to ensure the training of highly qualified resident specialists, organization and control of educational, social and educational work of the University, the effectiveness of the structural units.

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

7.9 Standard "Continuous improvement»

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

- The University has been monitoring the implementation of ODA through the actualization of UMKC, in the framework of the WCC and analysis of current progress and boundary control;
 - - Educational services provided by the University are in demand
 - The University has a competitive position in the market.

Strategic partnership with practical health care to develEP the competence of the resident model in the field, development and implementation of educational programs.

(VIII) REVIEW RECOMMENDATIONS FOR IMPROVING QUALITY

Improvement area.

8.3 Standard "Assessment of resident»:

To improve the quality assurance process of evaluation practices in terms of determining the reliability and validity of evaluation methods

8.2 Standard "Educational program»

Recommendations VTEK:

Provide for the use of the experience of foreign partner Universities in the development of OP.

8.3 the Standard "Assessment of resident»

Improvement area:

1. To improve the quality assurance process of evaluation practices in terms of determining the reliability and validity of evaluation methods

8.5 Teachers Standard»

Recommendations VTEK:

1. On an ongoing basis to provide training to the health care professionals participating in educational process of pedagogical competencies.

8.6. Standard "Educational resources»

Recommendations of the EEC: in the training program of residents to provide training hours for research.

8.7. Standard "Evaluation of educational programs»

VTEK recommendations: To monitor and evaluate the residency EP, actively involve key stakeholders.

Annex 1. Estimated table PARAMETERS "SPECIALIZED PROFILE»

+	CRITERIA FOR EVALUATION		Education Position		Organization	
		Comments	strong	satisfactory	suggests improvement	unsatisfactory
11.	"MISSION AND FINAL RESULTS OF TRAINING"					
11.1	Mission definition		V	\		
11.1.1	The medical education organization should determine the mission of the residency program and inform the public and the health sector about the stated mission.		+	V.		
11.1.2	The medical education organization should determine the mission based on the consideration of the needs of public health, the needs of the medical care system and, accordingly, other aspects of social responsibility.		+			
11.1.3	A medical educational organization should determine a training program containing both theoretical and practical components, strengthening practice and the result of such training should be a doctor who is competent and able to carry out appropriate and appropriate clinical practice in a particular field of medicine, able to work at a high professional level, work independently and independently, as well as in a team, if necessary, who is committed and ready for lifelong learning and participation in continuous education. vnom medical education and continuing professional development.		+			
11.1.4	The medical education institution should provide improved patient care that is appropriate, effective, compassionate and safe in resolving health problems and promoting health, including a patient-oriented and holistic approach.		+		/	
11.1.5	The medical education organization must ensure that residents (students) have appropriate working conditions to support their own health.	1	+			
11.1.6	The medical education organization should promote the introduction of appropriate innovations in the learning process, allowing the development of wider and special competencies than those that are defined as basic competencies.		+			
11.1.7	Medical education organization should encourage residents to become scientists / researchers in their chosen field of medicine, including deeper and / or wider participation in the development of the discipline, including in the academic development and improvement of education and research in medicine.			+		

11.1.8	Medical education organization should assist residents in their becoming active participants in addressing the social			+		
	determinants of health.					
11.2	PROFESSIONALISM AND PROFESSIONAL					
11,2	AUTONOMY					
11.2.1	The medical education organization should include		+			
11.2.1	professionalism in the education and training of residents					
	and promote the professional autonomy necessary for a					
	specialist to act in the best interests of the patient and					
	society.					
11.2.2	The medical education organization should be guaranteed			+		
	adequate independence from the government and other					
	bodies in decision-making in such key areas as the					
	development of an educational program (see 12.1 and 12.6),	7				
	evaluation (see 13.1), selection and reception of residents					
	(see 14.1 and 14.2), selection / selection of teachers (see					
	15.1) and conditions of employment and allocation of					
	resources (see 18.3).			7		
11.2.3	The medical education organization should guarantee		+			
	academic freedom, which will include appropriate freedom					
	of expression, freedom of inquiry and publication.					
11.3	FINAL RESULTS OF TRAINING					
11.3.1	The medical education organization should determine the		+			
	final learning outcomes that residents should achieve as a					YA .
	result of the training program in relation to: their	- 1				
	achievements at the postgraduate level in knowledge, skills					OF 1
	and thinking; an appropriate basis for their future careers in					
	the chosen field of medicine; future roles in the health					VA.
	system; commitment and skills in lifelong learning; the					
	needs and problems of public health, the needs of the					
	healthcare system and other aspects of social	-	,	8		C
	responsibility; professional behavior.					
11.3.2	The medical education organization must determine the end		+		1	
	results of training in general and specific for the discipline /					
	specialty components that students must achieve upon			_/2		
11.2.2	completion of the program.					
11.3.3	The medical education organization should determine the		+			
	end results of training regarding appropriate behavior and					
	attitudes towards patients and their relatives, fellow interns,					
11 2 4	teachers, and other health workers.					-
11.3.4	The medical education organization must guarantee the		+			
	appropriate professional behavior and attitude of residents by colleagues and other medical personnel, patients and					
	their relatives, and also compliance with the Code of Honor.					
11.3.5	The medical education organization must inform the public		+			
11.3.3	about the established end results of the residency program in					
	the relevant specialties.					
11.3.6	The medical education organization should ensure					
11.3.0	continuity between the end results of training programs		+			
	in basic and postgraduate medical education.					
11.4	PARTICIPATION IN THE FORMULATION OF THE					
11.4	MISSION AND FINAL RESULTS					

11.4.1	The medical education organization should determine the		+			
	mission and determine the end results of the training					
	program in collaboration with key stakeholders.					
11.4.2	The medical education organization should formulate the		+			
11.1.2	mission and determine the final results of the training		'			
	program, taking into account proposals from other interested					
	parties, which are representatives of other medical					
	specialties, patients, society, organizations and authorized					
	health authorities, professional organizations and medical					
	scientific societies.					
	TOTAL:	19	16	3	0	0
12.	STANDARD "EDUCATIONAL PROGRAM"					
12.1	FRAMEWORK FOR THE POST-NURSING					
	NURSING MEDICAL EDUCATION PROGRAM					
12.1.1	The medical education organization should determine the		+			
	educational framework parameters based on the established					
	end results of training for this program and the qualifications					
	of a resident graduate, develEP them in accordance with the			70		
	required results of the existing basic medical education and					
	organize systematic and transparent training.					
12.1.2	The medical education organization must ensure that the		+			
12.1.2	content of the residency program is in accordance with the		+			
		D. 1				
	requirements of the State Standard of the Republic of	~~				
	Kazakhstan and ensure the breadth of training of specialists	- 1				10
	in accordance with the name of the program and the					29
	necessary depth of training in the field determined by the					97
10.1.0	specialty.					
12.1.3	The medical education organization should use practice-		+			YA.
	oriented training, ensuring personal participation of					
	residents in the provision of medical care and responsibility	-07				
	for caring for patients.					
12.1.4	The medical education institution should use appropriate			+		
	teaching and learning methods and guarantee the integration					
	of components in practice and theory, which include					
	didactic classes and experience in assisting the patient, as			- /0		
	well as independent and active training.					
12.1.5	The medical education organization must ensure that		+			
	training is conducted in accordance with the principles of					
	equality.					
12.1.6	The medical education organization should use a student-		+			
	oriented approach to learning, which stimulates, prepares					
	and supports students to take responsibility for their own					
	learning process and demonstrate in their practice.					
12.1.7	The medical education institution should guide the resident			+		
12.1./	through mentoring, regular evaluation and feedback, inform			'		
	the program about the rights and obligations of residents,					
	and include ethical obligations in the program.					
12.1.8	Medical education organization should increase the degree					
12.1.8	1		+			
	of independence and responsibility of residents in relation to					
10.10	their knowledge, skills and development of experience.			+.		
12.1.9	Medical education organizations should recognize gender,			+		
	cultural and religious characteristics and prepare residents					

	for appropriate relationships with patients.					
12.2	SCIENTIFIC METHOD					
12.2.1	The medical education institution should introduce the		+			
	scientific foundations and methodology of medical research,					
	including clinical research and clinical epidemiology.					
12.2.2	The medical educational institution must ensure that the		+			
	resident is able to use scientific evidence, studies and knows					
	the basics of evidence-based medicine through wide access					
	to relevant clinical / practical experience on the basis of					
	the appropriate profile in the selected field of medicine.					
12.2.3	The medical education organization should include teaching		+			
	and training to critically evaluate literature, articles and					
	scientific data, and the application of scientific					
	developments.					
12.2.4	The medical education organization should include teaching		+			
	and training to critically evaluate literature, articles and					
	scientific data, and the application of scientific					
	developments.			1		
12.3	PROGRAM CONTENT					
12.3.1	The medical education organization should include in the		+			
	training program the clinical work and the corresponding					
	theory or practice of basic biomedical, clinical, behavioral	_				
	and social sciences, preventive medicine, clinical decision-					
	making, communication skills, medical ethics, public health,					YA .
	medical law and forensic science, administrative disciplines,	- 1				
	patient safety, responsibility for one's own health,					0
	knowledge of complementary and alternative medicine.					
12.3.2	The medical education organization should organize		+			SO.
	educational programs with due attention to patient safety					
	and autonomy.					
12.3.3	The medical education organization should ensure the		+	8		
	development of knowledge, skills and professional attitudes					
	corresponding to various roles of the doctor, such as a					
	practicing doctor or medical expert, communicator,				- 7	
	employee and team member, leader / manager or			_/2	- 7	
	administrator, advocate for the interests and health of the				_	
	patient, scientist / researcher.					
12.3.4	The medical education organization should adjust and		_	+		
	change the content to the changing conditions and needs of					
	the medical care system.					
12.4	PROGRAM STRUCTURE, CONTENT AND DURATION					
12.4.1	The medical education organization should describe the		+			
	general structure, composition and duration of the					
	educational program, clearly establish the compulsory					
	component and the optional component, integrate practice					
	and theory, take into account the requirements of national					
	legislation and ensure an adequate representation of how					
	local, national or regional health systems are focused on the					
	needs of providing medical assistance to the population.					
12.4.2	When deciding on the duration of the program, the medical		+			
	educational institution should take into account the required					

		1	1	1	1	1
	end results of basic medical education in the selected field					
	of medicine, the requirements for fulfilling the different					
	roles of certified specialists in the health sector, and possible					
	alternatives for using training based on time parameters.					
12.5	TRAINING ORGANIZATION					
12.5.1	The medical education organization must determine the		+			
12.3.1	responsibility and authority for organizing, coordinating,					
	managing and evaluating each training base, clinical base					
10.5.0	and educational process.					
12.5.2	The medical educational institution should guarantee		+			
	clinical training in multidisciplinary clinics and coordinate					
	training on the basis of these clinics so that residents receive					
	adequate training in various aspects of the chosen field of					
	medicine.					
	The medical education organization must observe the proper		74			
	representation of employees, residents and other relevant					
	stakeholders when planning an educational program.	<u> </u>				
12.5.3	Medical education organization should be guaranteed		+			
	preparation in various clinical facilities, which are					
	characterized by the profile of clinics, various categories of					
	patients, the level of medical care (primary medical					-
	care, specialized medical care, highly specialized medical					
	care), hospitals and outpatient clinics.					
12.5.4	The medical education institution should coordinate		+			
12.3.7	numerous training facilities to gain appropriate access to					
	various aspects of the chosen field of medicine.					27
12.5.5	The medical education organization should have access to					
12.5.5			+			
	the resources necessary for planning and implementing					YA I
	training methods, student evaluation, and training program					
10.6	innovations.					
12.6	RELATIONSHIP BETWEEN POST-DIPLOMATIC		,	8		6
	MEDICAL EDUCATION AND PROVISION OF					
	MEDICAL CARE					
12.6.1	The medical education organization should describe and			+		
	recognize the role of mentoring in professional					
	development, guarantee the integration between training and					
	medical care (on-the-job training), and ensure that training					
	is a complement to and consistent with the requirements for					
	medical care.			100		
12.6.2	The medical education institution should effectively		+			
	organize the use of the capabilities of the healthcare system					
	or the provision of medical care for training purposes, which					
	involves the use of the capabilities of various clinical bases,					
	patient problems and clinical problems for training					
	purposes, while at the same time observing the requirements					
	for medical care.					
		26	21	F	0	0
12	TOTAL:	26	21	5	0	0
13.	STANDARD "ASSESSMENT OF RESIDENTS"					
13.1	EVALUATION METHODS					
13.1.1	The medical education institution must formulate and		+			
	implement a policy for evaluating residents, it must					
	determine, establish and publish principles, goals, methods			<u></u>		
				_		

			i		1
17.1.3	implement a policy according to the criteria and the selection	'			
14.1.3	recruitment of residents. The medical education organization should formulate and	+			
111112	between the potential and training opportunities and the				
14.1.2	The medical education institution must strike a balance		+		
	relationship between the mission and the selection of residents.				
14.1.1	The medical education institution should consider the	+			
14.1	RECEPTION POLICY AND SELECTION		+		1
14.	STANDARD "RESIDENTS" DECERTION POLICY AND SELECTION		+		1
1.4		6	3	1	0
	work, provide interprofessional training. TOTAL:	6	3	1	0
	integrated training and involvement in practical clinical				
	methods and practices of assessment, which facilitate				
13.2.3	Medical education organization should use the principles,	+			
10.00	knowledge and skills.				1
	to residents based on the results of an assessment of their		1		
	provision of timely, specific, constructive and fair feedback				
13.2.2	The medical education organization must guarantee the		+		
	determine the adequacy and relevance of training.				
	outcomes are achieved by students, facilitate learning,				
	training methods, ensure that the established learning				
	compatible with the established end results of training and				
	principles, methods and practices of assessment that are				
13.2.1	The medical education organization should use the	+			
	TRAINING				107
13.2	RELATIONSHIP BETWEEN ASSESSMENT AND				
15.1.7	types and stages of training in a training journal or protocols.				
13.1.7	The medical education institution should record the various	+			
	assessment methods, if necessary.				
13.1.0	involvement of external examiners, introduce new		+		
13.1.6	Medical educational organization should facilitate the		+		
	appeal of the assessment results based on the principles of justice and through compliance with the legal process.				
13.1.5	The medical education institution should use the system of	+			
13.1.5	assessment methods.				1
	document the reliability, validity and fairness of the				
13.1.4	The medical education organization should study and			+	
10.1.1	of permitted retakes.				<u> </u>
	exams or other types of assessments, including the number				
13.1.3	The medical education institution must formulate criteria for	+			
	to the established learning outcomes.				
	effectiveness of assessment methods and formats in relation				
	validity, reliability, impact on training, acceptability and				
	their "applicability", which includes a combination of				
	set of assessment methods and formats in accordance with				
13.1.2	The medical education organization should use an additional		+		1
	behavior and attitude.				
	assessment covers knowledge, skills and professional				
	professional qualification exams, and ensure that the				
	and practices for evaluating residents, including				

i .	with disabilities, requiring the necessary conditions and					
	equipment in accordance with national laws and regulations,					
	and take into account the safety of doctors and patients.					
1 1 1 1	Ţ					
14.1.4	A medical education organization should formulate and		+			
	implement a policy for transferring residents from other					
4145	national or international programs.					
14.1.5	The medical education organization must guarantee a high			+		
	level in understanding of the biomedical sciences, achieved					
	at the undergraduate level before the start of postgraduate					
	education.					
14.1.6	The medical education institution must guarantee the		+			
	transparency of the selection process and equal access to					
	postgraduate education.					
14.1.7	The medical education organization should consider, within	- 1		+		
	the framework of its selection procedure, the specific					
	abilities of applicants in order to increase the result of the					
	learning process in the selected field of medicine.					
14.1.8	The medical education institution should develEP an appeal		+			
	procedure regarding the decision of the admissions					
	committee.					
14.1.9	Medical education organization should include associations			+		
	and organizations of residents in the process of developing					
	policies for the admission and selection of residents.	80.1				
14.1.10	The medical education institution should periodically			+		70.
	review admission policies based on relevant social and	- 1				
	professional data in order to meet community health needs.					
14.2	NUMBER OF STUDENTS					
14.2.1	The medical education institution must establish the number			+		•
1	of residents that matches the clinical / practical training	- 41				
	opportunities, the potential of clinical mentoring and other					
	available resources, the national and regional human					
	_			3		
	resource requirements in accordance with the chosen field			3		
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does			3		
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate			8		
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with			1		
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the			1		
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the					
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and					
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training.				7	6
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible			+	7	
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes			+	7	
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the			+	7	
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population,			+	7	
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for			+	7	
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for recruiting and receiving their groups of small peoples and			+	7	
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for recruiting and receiving their groups of small peoples and doctors from rural areas.				7	
14.2.2	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for recruiting and receiving their groups of small peoples and doctors from rural areas. The medical education institution should review the number			+	7	
14.2.3	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for recruiting and receiving their groups of small peoples and doctors from rural areas. The medical education institution should review the number of residents through consultation with interested parties.			+	7	
	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for recruiting and receiving their groups of small peoples and doctors from rural areas. The medical education institution should review the number of residents through consultation with interested parties. The medical education institution should adapt the number				7	
14.2.3	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for recruiting and receiving their groups of small peoples and doctors from rural areas. The medical education institution should review the number of residents through consultation with interested parties. The medical education institution should adapt the number of residents, taking into account the available information			+	7	
14.2.3	resource requirements in accordance with the chosen field of medicine, and if the medical educational institution does not independently determine the enrollment, demonstrate their responsibility by explaining existing relationships with authorized bodies and addressing attention to the consequences of decisions on admission, for example, the imbalance between recruitment and available potential and the capabilities of bases and resources for training. The medical education organization should have accessible information on the health needs of society, which includes considering balanced recruitment in accordance with the gender, ethnic and social characteristics of the population, including the potential need for special policies for recruiting and receiving their groups of small peoples and doctors from rural areas. The medical education institution should review the number of residents through consultation with interested parties. The medical education institution should adapt the number			+	7	

	unpredictability of the exact needs of healthcare professionals in various fields of medicine.			
14.3	SUPPORT AND CONSULTING OF RESIDENTS			
14.3.1	The medical education institution should have a system of	+		
	academic counseling for residents, provide advice to			
	residents, taking into account the results of monitoring			
	progress in training, including unintentional incidents.			
14.3.2	A medical education organization should provide support to	+		
	residents focused on social, financial and personal needs,			
	allocate appropriate resources for social and personal			
	support.			
14.3.3	The medical education institution must ensure	+		
	confidentiality regarding counseling and support and			
	provide support for career guidance and career planning.			
14.3.4	Medical education organization should provide support in	+		
	the event of a professional crisis and involve student			
	organizations (residents) in solving their problem situations.			
14.4	REPRESENTATIVE OFFICE		1	
14.4.1	The medical education organization should develEP and		+	
	implement a policy on the representation of residents and			
	their due in the formulation of the mission and the final			
	results of training, participation in the development of the			
	training program, planning of working conditions,			
	evaluation of the training program, management of the			70
	training program.			
14.4.2	Medical education organizations should encourage resident		+	
	organizations to participate in decisions about the processes,			
	conditions, and rules of education and training.			10.
14.5	WORKING CONDITIONS			
14.5.1	The medical education organization should conduct a	+		
	training program in accordance with paid posts /	,	18	6
	scholarships or other ways to finance residents.			
14.5.2	The medical education organization must ensure the	+		
	participation of residents in all medical activities of the		- 2	
	clinical facilities, including the inclusion of home calling			
	responsibilities related to the training program.			
14.5.3	The medical education organization must determine the	+		
	responsibility and communicate to everyone information	_		
	about the participation and conditions of the provision of		1	
	medical services by residents.			
14.5.4	The medical education organization must provide additional	+		
	training, in case of forced interruptions in preparation, on the			
	occasion of pregnancy (including pregnancy and childbirth			
1455	/ paternity leave), illness, military service or secondment.			
14.5.5.	The medical education organization should ensure that the		+	
	participation of residents in the provision of medical			
44 = -	services is not dominant and not excessive.			
14.5.6	The medical education organization should take into		+	
	I accessment the amenda at material to the acceptual transfer at meading I access	1		I
	account the needs of patients, the continuity of medical care			
	and the educational needs of residents when planning duty hours and work schedule on call.			

14.5.7	Medical education organizations should be allowed to study		+			
	under special circumstances in accordance with an					
	individual training program and taking into account					
	previous experience in providing medical care.					
14.5.8	The medical education organization should ensure that the		+			
	quality of training for an individual program and the total					
	duration of training are not less than for residents who have					
	completed a full training program.					
	TOTAL:		15	13	0	0
15.	STANDARD "TEACHERS"					
15.1	RECEPTION AND SELECTION POLICY					
15.1.1	The medical education organization must develEP and		+			
	implement a policy for the recruitment and admission of					
	teachers, managers and tutors, which determines the		`			
	required experience, criteria for scientific, educational,					
	pedagogical and clinical achievements, including the					
	balance between teaching, research and specialist					
	qualifications, their responsibilities, employee					
	responsibilities and, in particular, the balance between					
	teaching, research and medical care.					
15.1.2	The medical education organization should consider the		+			
	mission of the educational program, the needs of the					
	educational system and the needs of the medical care system					W.
	in its selection policy.					
15.1.3	The medical education organization should, in the			+		
	development and implementation of a personnel policy,					
	determine the responsibility of all doctors as part of their					0
	professional duties for participating in postgraduate					10
	education based on practice, reward their participation in					
60	postgraduate training of specialists, ensure that teachers are	97.1		N.		U.,
	practicing specialists in relevant fields, ensure that teachers					
	of sub-specialties are appointed only for a certain period of					
	study in accordance with the specific specific training					
	programs and their qualifications.			- /4		
15.2	COMMITMENTS AND DEVELOPMENT					
15.2.1	The medical education organization must ensure that			+		
	teachers and residents have enough time for teaching,					
	mentoring and training, provide a development program for					
	teachers and mentors, and guarantee a periodic assessment					
	of the activities of teachers and mentors.					
15.2.2	In the development and implementation of a personnel		+			
	policy, the medical education organization should include					
	their training and further professional development of both					
	professional and pedagogical qualifications in the staff					
	development program and teacher support; Evaluate and					
	acknowledge academic activity as teachers and					
	mentors; determine the ratio between the number of teachers					
	who have received recognition and the number of residents,					
	guaranteeing their individual relationship and monitoring					
	the achievements of residents.					
	TOTAL:		3	2	0	0

16.	STANDARD "EDUCATIONAL RESOURCES"					
16.1	MATERIAL AND TECHNICAL SUPPORT AND					
	EQUIPMENT					
16.1.1	The medical education organization should provide		+			
	residents with the basis and opportunities for practical and					
	theoretical training, access to the latest professional					
	literature and sources, adequate information and					
	communication technologies and equipment for teaching					
	practical skills, and a safe environment for self-directed					
	learning.					
16.1.2	The medical education organization should regularly			+		
	evaluate and update the material and technical equipment					
	and equipment for their compliance and ensuring the quality					
	of postgraduate education.					
16.2	CLINICAL BASES					
16.2.1	The medical education institution must select and approve		+			
	the training facilities and provide access to appropriate					
	clinical / practical training facilities, a sufficient number of			М.		
	patients, appropriate patients and information about patients			٦	- 13	
	with various problems to achieve the educational goals,					
	including using the possibilities of both inpatient and					
	outpatient care, and on duty.		_			
16.2.2	When choosing a learning environment and clinical base,		+			
	the medical educational institution should ensure that the	70				TO .
	curriculum includes issues of health promotion and disease	- 1				
	prevention, training in other clinics / institutes and primary					01
	health care facilities that are relevant to the profile.					
16.3	INFORMATION TECHNOLOGY					
16.3.1	The medical education organization must guarantee access		+			
	to the web and electronic media and make effective use of	_				
	information and communication technologies, in an ethical		,	3		6
	manner, as an integrated part of the educational program.					
16.3.2	The medical education organization should promote the use		+		_	
	by teachers and students of existing and new information			- 1	- /	
	and communication technologies for: self-study,			_/2	- 7	
	communication with colleagues, access to relevant patient			/		
	data and health information systems, patient management,					
	practice and work in medical care systems.					
16.4	CLINICAL TEAMS					
16.4.1	Medical education organization should guarantee		+			
	experience in a team of colleagues and other health					
4 - 1 -	professionals.					
16.4.2	The medical education organization should provide training		+			
	in an interdisciplinary / interprofessional team and develEP					
	the ability to work effectively with colleagues and other					
1640	healthcare professionals.					
16.4.3	The medical education organization should promote the			+		
	development of the ability to guide and train other health					
17 =	professionals.					
16.5	MEDICAL RESEARCH AND ACHIEVEMENTS					
16.5.1	The medical education organization must ensure that			+		
	residents receive knowledge and are able to apply the					

	scientific foundations and methodology of scientific	I				
	research in the chosen field of medicine and ensure					
	appropriate integration and balance between preparation and					
	research.					
16.5.2	The medical educational organization must provide		+			
10.5.2	information on the research base and priority areas in the		'			
	field of scientific research of the medical educational					
	organization					
16.5.3	The medical education organization should facilitate the			+		
	participation of residents in medical research, the					
	development of health quality and the healthcare system,					
	which include scientific research in basic biomedical,					
	clinical, behavioral and social sciences.					
16.5.4	Medical education organizations should provide residents			+		
	with appropriate time in the training program for research.					
16.5.5	The medical educational institution should provide access to			+		
	equipment for research and ongoing scientific activities on					
	the basis of training.					
16.6	EDUCATION EXAMINATION					
16.6.1	The medical education organization should develEP and			+		1
	implement a policy on the use of expertise in the field of					
	education regarding the planning, implementation and					
1.5.5	evaluation of the educational program.					
16.6.2	The medical education organization should be given due	7		+		Th.
	attention and ensure the development of expertise in the	- 1				39
	assessment of education and research in the discipline of					gr .
16.62	medical education.					
16.6.3	The medical education organization should promote the			+		YA.
	development of the interests of employees in conducting research in education.	- 4				
16.7	PREPARATION IN OTHER INSTITUTIONS					
16.7.1	The medical education organization should develEP and					
10.7.1	implement an accessibility policy for residents and provide		+			
	them with training opportunities in alternative institutions					
	inside or outside the country.					
1672	-					
16.7.2	The medical education organization should create a system			+		
	for the translation and offsetting of learning outcomes through the active coordination of programs between					
	training institutes and the use of academic loans.					
16.7.3	The medical education organization should facilitate the		+			+
10.7.3	regional and international exchange of teachers and					
	residents by providing appropriate resources.					
16.7.4	Medical education organizations should develEP		+			
20.,	relationships with relevant national and international bodies					
	in order to facilitate the exchange and mutual recognition of					
	learning elements.					
	TOTAL:	21	11	10	0	0
17.	STANDARD "EVALUATION OF EDUCATIONAL					
	PROGRAMS"					
17.1	MECHANISMS FOR MONITORING AND					
	EVALUATION					

17.1.1	The medical education organization must constantly		+		
	monitor the educational program, determine and implement				
	a mechanism for evaluating the program, and evaluate the				
	program taking into account the mission, the required end				
	results of the training, the content of the educational				
	program, the assessment of knowledge and skills,				
	educational resources.				
17.1.2	The medical education organization should evaluate the		+		
	program about admission policy and the needs of the				
	education and the health care system, the process of				
	implementing the educational program, evaluation methods,				
	residents 'progress, teachers' qualifications, problems and				
	shortcomings identified.				
17.1.3	The medical education organization must ensure that the		+		
	relevant evaluation results are aimed at improving the				
	educational program and the participation of stakeholders in		- 74		
	the evaluation of the program.				
17.1.4	The medical education organization should ensure		+	70	
	transparency in the process and evaluation results for				
	management and all interested parties.				
17.2	FEEDBACK FROM TEACHERS AND RESIDENTS				
17.2.1	The medical education organization should study the		+		
	feedback on the educational program from teachers,	B)_ [
	residents, and employers.	7			W
17.2.2	The medical education institution should actively involve			+	
	teachers and residents in planning the evaluation of the				σ
	program, and using the results of the evaluation to improve				
	the program.				0.
17.2.1	The medical education organization should study the		+		
	feedback on the educational program from teachers,				
-	residents, and employers.	97.6	,		Co.
17.3	RESULTS OF RESIDENTS AND QUALIFIED				
	SPECIALISTS				
17.3.1	The medical education organization must constantly			+	
	monitor qualified specialists, provide feedback on the			Ω	
	clinical practice of qualified specialists from employers,				
	establish and apply a mechanism for evaluating the program,				
	using the collected data on the results of clinical practice of		_		
	qualified specialists.				
17.3.2	The medical education institution should be informed of the			+	
	results of the clinical practice assessment of qualified				
	specialists of the persons responsible for receiving residents				
	and planning the educational program.				
17.3	STAKEHOLDER INVOLVEMENT				
17.3.1	The medical education institution should involve key			+	
	stakeholders in the program for monitoring and evaluating				
	the educational program.				
17.3.2.	The medical educational institution should ensure that			+	
	interested parties have access to the results of the course				
	assessment and the educational program; the results of				
	feedback on the independent clinical practice of specialists				
	and feedback on the educational program should be studied				
	1 0	l .		1	1

	and analyzed.					
17.4	PROCEDURE FOR APPROVAL OF EDUCATIONAL PROGRAMS					
17.4.1	The medical educational organization must document that all educational programs, including clinical facilities, are approved by the authorized body on the basis of clearly established criteria, an assessment of the educational program and the existing authority to award or revoke recognition by the authorized body of clinical facilities or theoretical training courses.		+			
17.4.2	The medical education institution should develEP and implement a quality control system for clinical facilities and other educational resources, material and technical equipment, including visits to training facilities or other established procedures.			+		
10	TOTAL:	13	7	6	0	0
18.	STANDARD "MANAGEMENT AND ADMINISTRATION"			1		
18.1	CONTROL					
18.1.1	The medical education organization must ensure that the educational program is carried out in accordance with the requirements of regulatory rules regarding the admission of residents (selection criteria and quantity), the process, the assessment of knowledge and skills, the established learning	7	+	r		
18.1.2	outcomes. The medical education institution should document completion of studies by awarding degrees, issuing diplomas, certificates or other official qualifications for use by national and international authorized bodies and should be responsible for programs to ensure and improve the quality of postgraduate training.	1	+	ŀ		٤
18.1.3	The medical education organization should guarantee transparency in management and decision-making, and whether the program meets the needs of public health and the provision of medical services.		+	7	7	
18.2	ACADEMIC LEADERSHIP					
18.2.1	The medical education institution must determine the responsibilities and responsibilities of management / staff in postgraduate medical education.		+			
18.2.2	The medical education organization should conduct an assessment of management / staff at regular intervals in relation to the achievement of the mission of the postgraduate program, the required end results of the program.	3	+			
18.3	BUDGET FOR TRAINING AND ALLOCATION OF RESOURCES					
18.3.1	The medical education organization should determine the responsibility and authority for managing the budgets of the educational program.		+			
18.3.2	The medical education organization should have a clear range of responsibilities and powers to provide educational programs with resources, including the target budget for		+			

			1		1	1
	training, should allocate the resources necessary for the					
	implementation and implementation of the training program					
	and allocate educational resources in accordance with the					
	needs.					
18.3.3	The medical education institution should manage the budget		+			
	to support the commitment of teachers and residents to					
	provide care and innovation in the program.					
18.4	ADMINISTRATION AND MANAGEMENT					
18.4.1	The medical education organization must guarantee the		+			
	availability of the appropriate administrative and academic					
	staff, staff to support the implementation of the educational					
	program, proper management and allocation of resources.					
18.4.2	The medical education institution should develEP a quality		+			
	management program, including regular reviews.					
18.4.3	The medical education organization should ensure that a		+			
101	regular management review is conducted to achieve quality					
	improvement.					
18.5	REQUIREMENTS AND REGULATORY ACTS					
18.5.1	The medical education organization must follow the		+			
10.5.1	definition of the national authorized bodies for the number		'			
	and recognized medical specialties and other functions of					
	medical experts, for the training of which postgraduate					
	training programs are developed.					
18.5.2	The medical education institution should identify and					
	The medical education institution should identify and			T		10
10.5.2	approve postgraduate medical advection programs in					
10.3.2	approve postgraduate medical education programs in	- 7				27
10.3.2	collaboration with all interested parties.	12	12		0	0
	collaboration with all interested parties. TOTAL:	13	12	1	0	0
19.	collaboration with all interested parties. TOTAL: STANDARD "CONTINUOUS IMPROVEMENT"	13		1	0	0
	collaboration with all interested parties. TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the	13	12 +	1	0	0
19.	collaboration with all interested parties. TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the	13		1	0	0
19.	collaboration with all interested parties. TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular	13		1	0	0
19.	collaboration with all interested parties. TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content,	13		1	0	0
19.	collaboration with all interested parties. TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge	13		1	0	0
19.	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program,	13		1	0	0
19.	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous	13		1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement.	13		1	0	0
19.	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and	13		1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects.	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects. The medical education organization should, in the	13	+	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes/competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects. The medical education organization should, in the process of updating, pay attention to the following issues:	13	+ +	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes/competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects. The medical education organization should, in the process of updating, pay attention to the following issues: - Adaptation of the mission and results of postgraduate	13	+	1	0	0
19.1 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects. The medical education organization should, in the process of updating, pay attention to the following issues: - Adaptation of the mission and results of postgraduate programs in the scientific, socio-economic and cultural	13	+ +	1	0	0
19.1 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects. The medical education organization should, in the process of updating, pay attention to the following issues: - Adaptation of the mission and results of postgraduate programs in the scientific, socio-economic and cultural development of society	13	+ +	1	0	0
19.1 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects. The medical education organization should, in the process of updating, pay attention to the following issues: - Adaptation of the mission and results of postgraduate programs in the scientific, socio-economic and cultural development of society - Modification of the established learning outcomes after	13	+ +	1	0	0
19. 19.1	TOTAL: STANDARD "CONTINUOUS IMPROVEMENT" The medical educational institution, when implementing the development of postgraduate medical education with the involvement of relevant stakeholders, should initiate regular reviews and updates of the process, structure, content, learning outcomes / competencies, assessment of knowledge and skills, the learning environment of the program, document deficiencies, allocate resources for continuous improvement. Medical Education Organization Should - base the update process on prospective studies and analyzes and on the results of our own experience and the study of literature on medical education - ensure that the process of updating and restructuring leads to a review of the policies and practices of the postgraduate medical education program in accordance with past experience, current activities and future prospects. The medical education organization should, in the process of updating, pay attention to the following issues: - Adaptation of the mission and results of postgraduate programs in the scientific, socio-economic and cultural development of society	13	+ +		0	0

TOTAL:		97	50	1	0
TOTAL:	13	6	7	0	0
collection of interests of various groups of stakeholders	10				
and needs of postgraduate studies, and over time, the					
and management to overcome the changing circumstances					
-Development of the organizational structure, management		+			
evaluation					
-Improving the process of program monitoring and program			+		
modern teaching principles					
number and profile of teachers, the training program and					
medical education, that is, the number of residents, the					
educational resources to the changing needs of postgraduate					70
-Updating equipment on clinical training bases and other			+		
changing needs for postgraduate education					
academic tutors and teachers in accordance with the					
-Adaptation of the policy of recruitment and development of			+		
curriculum requirements					
requirements, changes in basic medical education and					
expectations and circumstances, human resource					
for selecting and accepting residents to changing					
-Adaptation of the policy for selecting residents, methods			+		
teaching methods					
accordance with changes in the established results and					
-Development of principles and assessment methods in			+		
canceled					
concepts and methods are included and obsolete are					
adjustment will ensure that new relevant knowledge,					
as well as socio-economic and cultural conditions,					
situation and population structure regarding health / illness.					
behavioral and social sciences, changes in the demographic					
achievements in basic biomedical sciences, clinical,					
residency training programs in accordance with					
- Adjustment of the structure, content and duration of			+		
methods to ensure their relevance and relevance		'			
- Adaptation of educational approaches and teaching		+			
responsibilities at the end of the program.					
health education and participation in patient care, related					
environment applies to recently completed health care professionals, changes may include clinical skills, public		1			