To the Accreditation Council
of the Eurasian Center for Accreditation
and Quality Assurance
in Education and Health Care
December 5, 2025

REPORT
OF THE EXTERNAL EXPERT COMMISSION ON THE RESULTS OF THE ASSESSMENT OF THE EDUCATIONAL PROGRAMME OF RESIDENCY IN SPECIALTY 7R01108 "NEONATOLOGY" OF "THE UNIVERSITY MEDICAL CENTER" CORPORATE FOUNDATION FOR COMPLIANCE WITH THE STANDARDS FOR PROGRAMME ACCREDITATION OF THE POSTGRADUATE EDUCATION (RESIDENCY) OF THE EURASIAN CENTER FOR ACCREDITATION AND QUALITY ASSURANCE IN EDUCATION AND HEALTH CARE

external expert assessment period: November 17-19, 2025

Astana, 2025

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LIST OF DESIGNATIONS AND ABBREVIATIONS

Abbreviation	Designation
ECAQA	Eurasian Center for Accreditation and Quality Assurance in Education and Health Care
EHEA	European Higher Education Area
WFME	World Federation for Medical Education
MH RK	Ministry of Healthcare of the Republic of Kazakhstan
MSHE RK	Ministry of Science and Higher Education of the Republic of Kazakhstan
RLA	Regulatory legal acts
EP	Educational programme
ESG	Standards and Guidelines for Quality Assurance of Higher Education in the European Higher Education Area
CF «UMC»	Corporate Foundation "University Medical Center"
HC	Heart Center
CMC	Center for Motherhood and Childhood
DC	Diagnostic center
SC	Simulation center
JCI	Joint Commission International
CPD	Continuing professional development
AMS	administrative and managerial staff
SCES	State compulsory educational standard
FC	Final certification
IEP	Individual Education Plan
RW	Research work
CED	Catalog of elective disciplines
TS	Teaching staff
NCIE	National Center for Independent Examinations
QMS	Quality management system
IWPDT	The work of a postgraduate doctor - physician under the supervision of a clinical supervisor during the period of clinical activity of the postgraduate doctor - physician
IWPD	Independent work of a postgraduate doctor - physician
EMC	educational and methodological council
TM	Teaching materials
CAD	Clinical and Academic Department
FA, ME, SA, OAR	Formative assessment. Midterm examination. Summative assessment. Overall admission rating.

1. Composition of the External Expert Commission

In accordance with the order of the ECAQA under No.28 dated October 28, 2025, an External Expert Commission (hereinafter referred to as the EEC) was formed to conduct an external assessment of the educational programme of residency in the specialty 7R01108 "Neonatology" during the period November 17-19, 2025, consisting of the following members:

No.	Status as part of the EEC	Full name	Academic degree/title, position, place of work/place of study, year, specialty
1	Chairperson	Morenko Marina Alexeyevna	Doctor of Medical Sciences, Professor, Head of the Department of Children's Diseases No.1 of the NJSC "Astana Medical University", Chief Children's Allergist-Immunologist of the Astana Public Healthcare Administration, Member of the European Academy of Allergologists and Clinical Immunologists, Member of the Eurasian Association of Pediatricians and Neonatologists
2	International expert	Yanchev Yavor Petkov	Doctor of Medical Sciences, Professor of Neurosurgery, Head of the Department of Neurosurgery and ENT Diseases at the Medical University of Varna. Head of the Neurosurgery Clinic at the "St. Marina" University Hospital of the Medical University of Varna (Varna, Bulgaria). Vice President of the Bulgarian Society of Neurosurgeons (BSNS); President of the Bulgarian Society of Pediatric Neurosurgery (BSPNS)
3	International expert	Akhvlediani Leila Teimurovna	Professor, Doctor of Medicine (MD, PhD), Deputy Head of Department, Doctor of Philosophy (PhD) in Biology (Immunology, Allergology), Ivane Javakhishvili Tbilisi State University, Tbilisi, Republic of Georgia
4	Academic expert	Madyarov Valentin Manarbekovich,	Doctor of Medical Sciences, Head of the Department of Surgery with a Course in Anesthesiology and Resuscitation of the NEI "Kazakh-Russian Medical University"
5	Academic expert	Yessenkulova Saule Askerovna	Doctor of Medical Sciences, Professor of the Center for Postgraduate Education of JSC "Kazakh Research Institute of Oncology and Radiology", Member of the Association of Oncologists of the Republic of Kazakhstan
6	Academic expert	Abeuova Bibigul Amangeldiyevna	Doctor of Medical Sciences, Professor of the Department of Family Medicine No.3 of the NJSC "Astana Medical University"
7	Academic expert	Tashenova Gulnara	Doctor of Medical Sciences, Head of the

		Talipovna	Department of Children's Diseases named after Professor N.A. Barlybayeva of the NJSC "S.D. Asfendiyarov Kazakh National Medical University", Chief Freelance Pediatrician of the Ministry of Healthcare of the Republic of Kazakhstan, Almaty
8	Academic expert	Talkimbayeva Nailya Anuarovna,	Doctor of Medical Sciences, Head of the Simulation Center of the NJSC "S.D. Asfendiyarov Kazakh National Medical University"
9	Academic expert	Izbassarova Akmaral Shaimerdenovna	Candidate of Medical Sciences, Associate Professor, Head of the Department of Physical Medicine and Rehabilitation, Sports Medicine of the NJSC "S.D. Asfendiyarov Kazakh National Medical University", Neurologist of the highest category
10	Academic expert	Ivanchenko Nellya Nikolayevna	Candidate of Medical Sciences, Head of the Department of Postgraduate and Continuing Education of JSC "Research Institute of Cardiology and Internal Diseases"
11	Academic expert	Kabildina Nailya Amirbekovna	Candidate of Medical Sciences, Professor, Oncosurgeon, Head of the Department of Oncology and Radiation Diagnostics of the NJSC "Karaganda Medical University"
12	Academic expert	Salimbayeva Damilya Nurgaziyevna	Candidate of Medical Sciences, Head of the Department of Strategic Development and Science of JSC "Scientific Center of Obstetrics, Gynecology and Perinatology"
13	Academic expert	Rustembekkyzy Zhansaya	Teacher-researcher, PhD of the Department of Obstetrics, Gynecology and Perinatology of the NJSC "Karaganda Medical University"
14	Employer-expert	Tugelbayeva Kyzylgul Alimovna	Head/Chief of the Educational Programmes Department at the Republican State enterprise on the Right of Economic Management "Scientific and Production Center for Transfusiology" of the Ministry of Healthcare of the Republic of Kazakhstan
15	Expert doctoral student	Yktiyarov Ayaz Abdirakhymuly	A second-year doctoral student in the specialty "Medicine" at the NJSC "Astana Medical University"
16	Expert postgraduate doctor	Makhmutov Timur Nurzhanovich	First-year postgraduate doctor in the specialty "Urology and Andrology Adult, Pediatric "

The EEC report includes a description of the results and conclusion of the external assessment of the educational programme 7R01108 "Neonatology" for compliance with the Standards for Programme Accreditation of the Postgraduate Education (Residency) (developed on the basis of the International Standards for Improving the Quality of Postgraduate Education Programmes of the

WFME 2023) and conclusions (hereinafter referred to as the Standards for accreditation), recommendations of the EEC for further improvement of approaches and conditions for the implementation of the above-mentioned educational programme and recommendations on accreditation for the ECAQA Accreditation Council on accreditation.

2. General part of the final report

2.1 Presentation of the educational programme in the residency specialty 7R01108 "Neonatology"

Name of the organization, legal form of ownership, BIN	Corporate Foundation "University Medical Center"
Governing body	Autonomous Educational Organization "Nazarbayev University"
Full name of the first head	Pya Yuriy Vladimirovich
Location and contact details	Republic of Kazakhstan, 010000 "Nura" district, Astana st. Turan, 32 Tel.: +7(7172) 692450 E-mail:umc@umc.org.kz Official website:www.umc.org.kz
State license for educational activities in residency (date, number)	Corporate Foundation "University Medical Center" (hereinafter referred to as the CF "UMC") was created in accordance with the decision of the Board of Trustees of the Autonomous Educational Organization "Nazarbayev University" (hereinafter referred to as Nazarbayev University) dated September 20, 2015.
Year of commencement of the implementation of the accredited educational programme (EP)	2019
Information on placement in the Register of the EHEA of the Ministry of Science and Higher Education of the Republic of Kazakhstan	Available
Duration of study	2 years
Total number of graduates since the beginning of the EP implementation	15
The number of postgraduate doctors in the EP since the beginning of the current academic year	6
Full-time/part-time teachers involved in the implementation of the EP	The teaching staff is represented by 6 specialists, including 1 Doctor of Medical Sciences, 3 Candidates of Medical Sciences, 1 PhD and 4 top-category physicians. 4 full-time and 2 part-time staff members Academic degree holder rate - 66.6% Proficiency in categorization: 100%

2.2 Information about previous accreditation

In December 2020, residency specialty 7R01108 "Neonatology" passed international specialized accreditation and was accredited for 5 years. Registration date in the Unified Higher

Education Platform Register: May 26, 2025 https://epvo.kz/#/register/education_program/application/63130

2.3 Brief description of the analysis results of the self-assessment report of the educational programme of residency in the specialty 7R01108 "Neonatology" and conclusions on its completion

The self-assessment report of the educational programme of residency in specialty 7R01108 "Neonatology" (hereinafter referred to as the report) consists of 235 pages of the main text, 104 pages of annexes, and copies or electronic versions of 16 documents located at https://drive.google.com/drive/folders/1GGiZfXcnzDDtjLjRfjU1aO75Mbipi0Ak.

The report is characterized by its completeness in responding to all 8 key standards for accreditation and criteria, its structure, taking into account the recommendations of the Guidelines for Conducting Self-Assessment of Educational Programme provided to the educational organization by the accreditation center - ECAQA and its internal unity of information. A cover letter signed by Nurgul Kaliyevna Khamzina, Deputy Chairperson of the Board of Directors of the CF “UMC”, confirming the accuracy of the quantitative information and data included in the self-assessment report, is attached to the report.

The report includes a list of 32 members of the internal self-assessment committee, indicating the responsibilities of each employee and information about the representative of the organization responsible for conducting the self-assessment of the educational programme – Alma Alibekovna Syzdykova, Director of the Education Department, MSc, MBA.

The self-assessment of the educational programme of the residency in specialty 7R01108 "Neonatology" was conducted based on Order No.78-n/k of the Chairperson of the Board dated February 25, 2025 "On approval of the composition of the working group for preparation for specialized accreditation of the Corporate Foundation “University Medical Center” (CF “UMC”).

All standards provide the University's actual practice of training postgraduate doctors in the specialty 7R01108 "Neonatology," taking into account the start of student admission in 2020. They also provide substantiated data, examples of the implementation of educational programme objectives, national and international events and methodological support, confirming compliance with standards for accreditation. The description in the self-assessment report is sufficiently comprehensive and up-to-date regarding the number of postgraduate doctors, teachers, administration, information on selection and admission, learning outcomes, knowledge and skills assessment results, the University's clinical facilities and clinical settings, contractual obligations with partners (universities, associations and facilities), financial information, development and improvement plans, etc.

The report was submitted to the ECAQA in its final form, with data adjusted according to the above recommendations. It was written in a competent language, the wording for each standard was clear and understandable and described in accordance with the criteria of the standards. The tables and attached documents https://drive.google.com/drive/folders/1GGiZfXcnzDDtjLjRfjU1aO75Mbipi0Ak contained references in the text and were numbered continuously.

3. Description of the external expert assessment

The external expert assessment of the educational programme for training postgraduate doctors in specialty 7R01108 "Neonatology" was organized in accordance with the Guidelines for Conducting External Assessment of Educational Organizations and Educational Programmes of the ECAQA. The visit dates to organization: November 17-19, 2025. The detailed schedule for the 3-day visit is presented in Annex 3 to this report.

To obtain objective information, the EEC members used the following methods and their results:

- Conversation with management and administrative staff – 12;
- Interviews with postgraduate doctors – 27;
- Website review: www.umc.org.kz https://umc.org.kz/about-umc/ https://umc.org.kz/mission-and-vision/ ;
- Interviewing 10 employees and 12 supervisors;
- Survey for teachers and postgraduate doctors – 17 and 16, respectively;
- Observation of postgraduate doctor learning: attendance of 1 class (6 postgraduate doctors);
- Review of resources in the context of meeting standards for accreditation: 6 practice/clinical engagement settings were visited, including the Heart Center (HC), the National Center for Motherhood and Childhood (NCMC), the Diagnostic Center (DC), the Simulation Center (SC), the National Research Oncology Center (NROC) and the Vivarium - where learning is conducted in 12 educational programmes of residency with the participation of 14 full-time teachers/part-time faculty members in various residency programmes;
- Review of 24 educational and methodological documents both before the visit to the organization and during the visit to the divisions (the list of documents reviewed is in **Annex 2**).

The accredited organization's staff ensured the presence of all individuals specified in the visit programme and the list of interview and conversations' sites (Table 1).

Table 1 - **Information on the number and categories of participants in meetings, interviews and conversations with EEC members**

No.	Position	Quantity
1	Chairperson of the Board of Directors of CF "UMC"	1
2	Deputy Chairperson of the Board of Directors of CF "UMC"	1
3	Director of the Education Department	1
4	Postgraduate doctors of CF "UMC"	27
5	Graduates of the UMC residency program	43
6	Employers	11
7	Clinical supervisors/curators	23
8	Human Resources Department	1
9	Finance Department	2

On the final day of the visit, a meeting of the EEC members was held to discuss the external assessment. A final discussion was held regarding the external assessment of the educational programme, document review, conversation, interview and survey results. The EEC members began drafting the final EEC report. The external assessment results were summarized. The experts individually completed the "Quality Profile and Criteria for External Assessment of the "Pediatrics" Educational Programme for Compliance with the ECAQA Standards for accreditation". The EEC members made no comments. Recommendations for improving the educational programme were discussed, and Chairperson M.A. Morenko held a final open vote on the recommendations for the ECAQA Accreditation Council.

Comfortable conditions were created for the EEC, and access to all necessary information and material resources was provided. The commission notes the high level of the University's corporate culture and the high degree of team's openness in providing information to the EEC members. Particular mention should be made of the high professionalism of the clinical supervisors and the developing professional competencies of the neonatology postgraduate doctors.

In a survey of postgraduate doctors, 87.5% rated the work of the External Expert Commission on accreditation as positive, while 6.25% rated it as satisfactory. The majority of respondents (87.5%) believe that educational institutions or educational programmes should be accredited.

According to 52.4% of teachers, the survey conducted by the ECAQA is useful for developing recommendations for improving key areas of the accredited educational institution's activities.

At the end of the visit programme, the EEC chairperson presented recommendations based on the results of the external assessment as part of the specialized accreditation to the educational institution's management and staff.

4. Analysis of compliance with standards for accreditation based on the results of an external assessment of the residency educational programme in specialty 7R01108 "Neonatology"

Standard 1: MISSION AND VALUES

1.1 Stating the mission

The UMC Foundation's mission statement was developed based on an analysis of the current healthcare situation in the Republic of Kazakhstan, as well as the Foundation's development prospects within the integrated academic healthcare system of Nazarbayev University. When reviewing and approving the mission statement, the UMC Foundation relies on state policy documents, regulatory documents of the Ministry of Education and Science of the Republic of Kazakhstan and the Ministry of Health of the Republic of Kazakhstan, the annual address of the President of the Republic of Kazakhstan to the people of Kazakhstan, and the Development Strategy of Nazarbayev University.

Based on self-report data, questionnaire results, and interviews, all CF "UMC" staff and its centers participated in developing the mission statement. During the program's implementation, specifically, through interviews with the organization's top director, members of the advisory body (Educational and Methodological Council), and interviews with residents and faculty, compliance with the criteria of Standard 1 was established. All participants in the educational process are aware of the educational program's mission statement and participated in formulating proposals for its formulation. The mission statement is communicated to potential residents through the website, social media, and informational letters to medical organizations. The organization's strategic plan for 2024-2028 (approved by the decision of the Board of Trustees of the UMC on June 11, 2024) was reviewed. It includes areas such as improving the System of Medical Care with a Focus on Patient Needs, Quality and Innovation in Education and Practical Training of Healthcare Professionals, Research Activities, and Ensuring Financial Sustainability and an Effective Management System. This confirms compliance with standards for accreditation and demonstrates the organization's goals, objectives, and prospects. Interviews with residents revealed that before classes begin, faculty members inform residents about the organization's mission and work plans, and provide information on the educational program, faculty, and training facilities.

During their visit to the CF "UMC" departments, experts noted the strengths of the educational organization in relation to the accredited educational program, including: the CF "UMC" has departments directly related to the 7R01108 Neonatology educational program, which can be noted as best practice in education. Specifically, the NCMC inpatient departments house the following: the intensive care unit; the neonatology department, which includes physiology and pathology of newborns; and the pediatric surgery department.

Faculty and Supervisors from the General Pediatrics Department of the Clinical Academic Department of Pediatrics (CAD) and the Developmental Intensive Care Unit of the Clinical-Academic Department of Anesthesiology and Intensive Care are directly involved in the educational process. The Neonatology program is directed by G.S. Tortaeva, MD, PhD, a neonatologist.

A review of the documentation demonstrates that the organization's mission, the mission of the educational program 7R01108 "Neonatology," and the educational process are structured in accordance with the State Educational Standard (GOSO) and current regulatory legal acts (RLA) in postgraduate education and healthcare.

The educational organization conducts resident training in the following clinical sites and departments: NCMC – Department of Neonatology, Complex Somatics, Department of Pediatric Anesthesiology, Resuscitation and Intensive Care, Pediatric Surgery, Medical Genetics, and the Functional and Laboratory Diagnostics departments; The DC offers a course in outpatient neonatology and conducts laboratory and diagnostic procedures.

It should be noted that the organization, and in particular the CF “UMC”, prioritizes the safety and autonomy of pediatric patients by ensuring informed consent for various examination and treatment procedures, maintaining confidential patient information, and providing educational information on all aspects of the patient's stay in the departments. Resident physicians are permitted to perform procedures and surgeries only within the scope of approved privileges. In accordance with JCI international accreditation requirements, every resident physician training at UMC with access to patients must complete a privilege application. A privilege form is permission to perform manipulations, procedures, and surgeries. The privilege form is signed by the resident and their clinical supervisor, approved by the residency program director, and approved by the UMC Director.

Experts have determined that residents have appropriate working conditions to support their own health. For example, with a typical on-call workload of four on-call shifts per month, this is reduced to two days per shift during pregnancy or with a child under six months old. Residents can be excused for health reasons.

Basic resident competencies in the accredited specialty, as well as specialized competencies such as "patient management," "communication and collaboration," "safety and quality," and "research," help educational organizations implement innovative forms of training. This will allow residents to develop skills and qualities such as clinical reasoning and practical skills in managing children with somatic diseases requiring inpatient or outpatient treatment. Residents study diagnostic algorithms, diagnosis formulation, and the development of individualized treatment plans based on age and pathological characteristics, principles of evidence-based medicine, medical record keeping, and methods of providing emergency care to children with life-threatening conditions. The educational organization encourages residents to strive to participate in research in their chosen specialty through training and participation in conferences and congresses.

1.2 Participation in mission formulation

All structural divisions of the CF “UMC” participated in the development of the strategy and mission, and discussions also took place at the advisory and consultative body level, including the Academic and Methodological Council. During the visit, experts established that neonatologists participated in the development of the goals and objectives (mission) of the educational program 7R01108 "Neonatology," as confirmed by the document on the composition of the Academic and Methodological Council.

In a conversation with residents and employers, when asked, "What is the personal contribution of residents to improving the educational program?", residents responded that they participate in choosing elective courses, while employers noted the high quality of residency graduates.

In a survey of 16 residents (on https://webanketa.com/), several of the 22 questions were devoted to the quality of the educational process and educational program. It was found that 81.25% of residents would recommend studying at this educational institution to their acquaintances, friends, and relatives. 75% of respondents believe that educational program directors and faculty are aware of students' learning needs. To the question, "Do you think this educational institution allows you to acquire the necessary knowledge and skills in your chosen specialty?", 93.75% of residents answered yes, 0% were unsure, 6.25% could not yet answer this question, and 0% would like to believe so.

The 17-faculty surveyed (21 survey questions) also responded that 70.59% were satisfied with the work and workplace organization at this educational institution, and 23.59% partially agreed with this statement. Experts determined that the organization has a healthy environment, as the director is readily accessible to both residents and staff, and 83.25% respond promptly to requests. In the survey, 83.25% of faculty were satisfied with the organization's environment, and 17.65% were partially satisfied. According to 76.47% of respondents, teachers at educational institutions have the opportunity to develop as professionals in their field. A total of 17 respondents (17 staff members in total) responded, with 17.65% having up to 5 years of teaching experience, 35.29% having up to 10 years, and 47.06% having over 10 years.

Conclusions of EEC by criteria. Comply with 6 standards: 6 – fully.

Standard 2: EDUCATIONAL PROGRAMME

2.1 Educational programme and certification

During the study of self-report data and the on-site visit, experts found a correlation between the content and the required qualifications of residents upon completion of the 7R01108 "Neonatology" program. This correlation is expressed in the acquisition of relevant practical skills, such as providing effective and modern care to patients, acquiring knowledge in the care of newborns, intensive care, neonatal pathology, neonatal surgery, behavioral and social sciences, and medical ethics. Interpersonal skills have been developed with patients and their families, in teamwork with other healthcare professionals, the scientific community, and the public, and can perform instructor/senior partner skills in relation to first-year residents and students. Scientist skills continue to develop.

Upon completion of their two-year program, students in the Neonatology program are admitted to an independent examination in the form of a Final Certification, which qualifies them for a specialist certificate in the neonatology specialty and admission to clinical practice in outpatient and inpatient medical facilities. Thus, the residency program ensures the attainment of the qualification of "neonatologist," which is confirmed by the issuance of a state-issued certificate. Preparation for certification is also supported by the National Center for Independent Examination (NCIE), where graduates take certification exams.

From 2019 to 2024, 100% of graduates of the residency program in specialty 7R01108 "Neonatology" successfully passed the independent examination.

Experts reviewed documents confirming the fulfillment of this accreditation standard criterion in the program's Self-Assessment Report. The residency program in specialty 7R01108 "Neonatology" has been included in the EHEA Register since 2019.

2.2 Intended learning outcomes

The link between learning outcomes and societal needs is reflected in the UMC Strategic Plan for 2024–2028. The learning outcomes are defined and included in document OP 7R01108 "Neonatology," which was developed in accordance with Order No. RK MOH-63 of the Ministry of Health of the Republic of Kazakhstan dated July 4, 2022, and approved by the UMC Board of Directors (approved by the Educational and Methodological Council, Protocol No. 3 dated February 20, 2025). Stakeholders are informed about the learning outcomes of residents in specialty 7R01108 "Neonatology" through the analysis and evaluation of summative assessments and final certification results.

During the EEC, experts confirmed that residents' professional behavior and communication skills are developed through practical skills acquisition and are reflected in the relevant documents: the OP and discipline syllabi. Faculty and residents have been informed of the Code of Ethics. The Code of Ethics can be found on the university website (approved June 8, 2021). **(ESG II Part 1.2)**

It has been established that the expected learning outcomes comply with the requirements of national professional standards for the specialty "Neonatology," as well as key and professional

competencies. There are no reviews or feedback on the accredited educational program (not required by internal regulations). Therefore, the requirements of the professional community for the specialty "Neonatology" have not been taken into account, partly because practicing nephrologists (employees of the research centers of the UMC branch) participate in the training of pediatric residents.

The accredited Neonatology program defines learning outcomes that include knowledge, skills, and professional behavior. Each skill can be assessed and measured using the existing list of skills required for nephrology residents, as well as summative and formative assessment forms developed and used by the Department of Education at UMC. Residents receive instruction at the bedside, where knowledge and skills are most often assessed. A survey of residents in various specialties revealed that the standard university assessments are not used for assessment. There are no attendance or grade monitoring logs, and there are no checklists/evaluation sheets (such as a mini-clinical exam, on-duty assessment, etc.).

Since its last accreditation, the educational organization has implemented the following measures to improve its educational program: training for physicians involved in the residency program in various areas (the "Effective UMC Teacher" competency-based model, the "Educational Technologies in Residency. Trusted Professional Activity" seminar, the "Methodology for Creating Digital Classes in Postgraduate Medical and Pharmaceutical Education" internship, advanced training on "Methodology for Developing Results-Based Educational Programs," a seminar on "Methodology and Educational Technologies in Residency," a seminar on "Educational Technologies. Resident Assessment," and a training seminar on "Methodology for Developing Examination Materials (Test Questions and Clinical Scenarios) for Assessing Key Competencies of Students, Graduates of Educational Programs in Healthcare, and Healthcare Specialists"). In other words, the staff is trained, but implementation is lacking.

Resident training requires their participation in providing medical care to the public.

During their training, residents undergo training in both the NCMC departments and the City Multidisciplinary Hospital No. 1 of the Astana Akimat and City Multidisciplinary Hospital No. 2 of the Astana Akimat. These departments include perinatal centers, developmental care departments, neonatal pathology departments, and intensive care units. In the neonatology departments, residents learn how to care for newborns and premature babies, including very low birth weight (VLBW), extremely low birth weight (ELBW), and IVF multiple pregnancy. Residents' independent study includes visits to the NU and SC libraries to prepare clinical presentations and work in the journal club. All results of independent work are compiled into the resident's portfolio. The Department of Education organizes training at various conferences, seminars, and congresses held on the NCMC and CC campuses.

Residents' professional conduct is ensured by signing an information agreement. They have been familiarized with the Code of Ethics, which was developed and approved on June 8, 2021. When interviewing employers, experts inquired about their satisfaction with the residents' work. Overall, residents maintain ethical behavior toward faculty, fellow students, and healthcare staff. An ethics council is in place, which any employee of the educational institution can contact to resolve conflict situations. Over the past five years, no such situations have occurred. Residents themselves, during a meeting with experts, confirmed that faculty maintain ethical behavior toward them. When asked whether conflict resolution studies had been conducted for faculty in the past few years, the answer was "not conducted," as the residents were unable to provide any training. No incidents were reported (resident physicians are allowed to perform procedures and operations only within the framework of approved privileges in accordance with the requirements of the international accreditation JCI; each resident physician studying at the CF “UMC” and having access to patients must complete an application for privileges).

When determining the intended learning outcomes, the Department of Education staff considered previous undergraduate and internship learning outcomes, as well as the goals and objectives of subsequent continuous professional development in the chosen specialty. The

educational institution offers continuing education and training (continuous professional development), but does not offer certification courses or advanced training in the specialty of "Neonatology" (NU website for continuing education).

Experts established a clear continuity between the final outcomes of residents' previous training (prerequisites) and their residency training and subsequent continuing professional development programs. The institution has developed 33 continuing education programs, including for the specialty of "Neonatology." Residents are informed about these programs.

100% of faculty respondents believe that students at this educational institution possess a high level of knowledge and practical skills after completing the training program.

Faculty surveyed during the external assessment indicated that 29.41% were fully satisfied with the level of residents' prior training, 52.94% were partially satisfied, 5.88% were completely dissatisfied, and 11.76% were partially dissatisfied.

The qualification obtained by completing the educational program in Neonatology corresponds to level 8 of the National Qualifications Framework **(ESG 1.2)** and has the code 7R01108. Completion of residency training is accompanied by the issuance of a certificate of the appropriate format, which will be in demand in all medical organizations in the Republic of Kazakhstan.

2.3 Educational programme organization and structure

The CF "UMC" conducts its educational activities based on the regulatory framework recommended by the Ministry of Education and Science of the Republic of Kazakhstan and the Ministry of Health of the Republic of Kazakhstan. The duration of the educational program in the specialty "Neonatology" is 2 years. The educational program model is determined based on the intended learning outcomes of residents and therefore includes the following: the expected learning outcomes comply with the requirements of the State Educational Standard (GOSO) and professional associations. This is reflected in the UMC strategic documents and is implemented through the integration of international approaches into educational activities. The UMC Strategic Plan for 2024-2028 (Section 2.2, Goal 2) emphasizes the residency programs' commitment to global standards in postgraduate medical education, including WFME and ACGME. The consistency and transparency of training is guaranteed by the fact that the CF "UMC" informs the public about the established intended learning outcomes of the postgraduate medical education programs by posting the final competencies of residency graduates, in accordance with the State Educational Standard (GOSO), on the official UMC website. The criteria for assessing the level of competence development are also reflected in the syllabi, which are freely available on the organization's website.

To implement the educational program in the specialty "Neonatology," the organization's documents include teaching and methodological documents that define the curriculum's objectives, integrate practical and theoretical components, and provide independent work. While compliance with the State Educational Standard and standard requirements has been established, the program presents key competencies as a general list, without identifying professional competencies by discipline or the level of their mastery.

The neonatology resident class was attended on November 18, 2025, in the developmental care department of the NCMC. Five residents attended the class, which focused on "Distress Syndrome." The class was conducted according to schedule by B.T. Charipova, a neonatologist in the Developmental Intensive Care Unit of the Clinical and Academic Department of Anesthesiology and Intensive Care. The instructor gave a presentation on the topic under study, and three case studies on the diagnosis and treatment of this disease were discussed. The residents actively participated in the discussion.

The organization ensures compliance with ethical principles in the implementation of the educational program, as experts reviewed the Code of Ethics (June 8, 2021), and residents responded during interviews that they were aware of the contents of this document.

An analysis of educational activities revealed that the educational program provided on Google

Drive specifies the following: educational level, educational code, full names of the developers, content, and the program passport. It was noted that there is no distribution of the core competencies of the disciplines according to key competencies, nor is there a distribution of professional competencies by year and discipline within the specialty.

The syllabi indicate the distribution of lecture hours, but there is no distribution between the independent work of student with teacher (IWST) and independent work of student (IWS), and the form of final assessment for the disciplines is not specified. Lecture titles are listed (one hour each week), but there are no seminar/practical class topics.

The supervising system described in the document "Rules for the Organization of Residency Educational Programs at the UMC Branch and the Educational Programs of the Nazarbayev University School of Medicine" was evaluated. Of the total number of faculty implementing the resident programs, two are supervisors. The main objectives of which are: 1) promoting the comprehensive active professional development of the resident physician, 2) providing resident physicians with patients in the department, 3) implementing clinical practice management and monitoring the performance of procedures by the resident physician in accordance with the privilege sheet, 4) monitoring the participation of the resident physician in consultations, analysis of complex cases, conferences, 5) monitoring the academic performance of the resident, 6) training through joint rounds, discussions of the examination plan and treatment of patients, 7) assessing the resident physician for mastery of knowledge and practical skills during and at the end of rotation/discipline according to approved assessment forms and their timely completion 8) promoting the development of teamwork skills and a patient-oriented approach 9) monitoring attendance of classes and educational events, 10) assisting the resident in research work, 11) participation in educational events (journal club, etc.), 12) resolving complex issues, disputes between resident physicians, 13) drawing up a character reference for a resident physician based on the results of the completion of a discipline/rotation, 14) monitoring the resident's compliance with appearance requirements.

The procedure for informing residents about their rights and responsibilities is reflected in the "Rules for the organization of educational programs for residency of the Corporate Fund "University Medical Center" and educational programs of the School of Medicine "Nazarbayev University" (NU), as well as in the Guide for a resident physician.

Faculty primarily utilize "Bedside Teaching." This method enables residents to participate in providing medical care to patients. Faculty can provide residents with supervision of 3 to 10 specialized patients per day. For example, upon completion of their training, residents in the Neonatology specialty program can perform procedures such as diagnosing and treating childhood diseases using evidence-based medicine and in accordance with the protocols of the Ministry of Health of the Republic of Kazakhstan, counseling and educating patients and their parents on proper nutrition, hygiene, and effective care, performing treatment procedures, and more.

Research work is conducted through elective courses, but must be completed within the framework of the IWS during the course(s).

The experts determined that the educational institution fully implements the principles of academic integrity and anti-plagiarism. This is reflected in a document on the official NU website. Academic integrity applies to such stages of resident training as conducting research. Anti-plagiarism applies when residents are preparing for publication. Residents are trained to promptly collect informed consent from patients for all diagnostic and therapeutic procedures. The experts noted that the corresponding document, signed by the patient, is included in the medical records.

Thus, by the end of the two-year training, residents will acquire certain core skills and competencies in the profession of Neonatology, enabling them to work in healthcare organizations **(ESG 1.2).**

Experts have not identified any violations of the principle of equality in postgraduate education and continuous professional development, as the educational institution complies with the

Constitution of the Republic of Kazakhstan, the Law on the Languages of the Peoples of the Republic of Kazakhstan, and other regulatory legal acts in the fields of education and healthcare.

The educational institution has a mechanism for regularly adapting teaching and learning methods to the requirements of modern science and education, as well as the current needs of practical healthcare. This mechanism includes the principles of openness and transparency in the educational process and promoting the adoption and strengthening of measures aimed at maintaining academic integrity.

This demonstrates compliance with Standard 2 regarding the adaptation of training to the needs of residents. Along with the principles of quality and academic integrity described in a document on the official NU website, the institution has an anti-plagiarism system.

2.4 Educational programme content

The development of residency programs at UMC is based on the principle of continuity with basic medical education programs (bachelor's and internship), which is reflected in the working curricula, individual curricula, and the Catalog of Elective Courses. The program content is developed in accordance with the state compulsory standard (SCS) and model professional programs approved by the Ministry of Health of the Republic of Kazakhstan.

UMC has documents containing requirements for the structure and content of educational programs, including the "Rules for the Organization of Residency Educational Programs at UMC and the Educational Programs of the Nazarbayev University School of Medicine" and the "Instructions for the Development of Educational and Methodological Documentation and the Academic Achievement Assessment System for Resident Physicians of the University Medical Center Corporate Fund" (approved by the UMC on February 19, 2025).

The content of the working programs and the catalog of elective courses reflect the needs of the healthcare system, as well as the specific research and development work and scientific achievements of faculty members. To successfully implement the educational program in the specialty "Neonatology," the organization has resources to organize the assessment of the practical skills of residents in departments and simulation centers.

The duration of the educational program in the specialty "Neonatology" is two years of study. In accordance with the State Educational Standard (GOSO), the program structure consists of a mandatory component and an elective component, as well as credits for midterm certification and two credits for final certification. Therefore, the workload for training a neonatologist is 140 credits. Overall, the program structure is organized by rotations in accordance with the disciplines stipulated by the State Educational Standard (GOSO) of the Ministry of Health of the Republic of Kazakhstan. Thus, according to the State Educational Standard (GOSO), rotations in the educational program "Neonatology" in the first and second years of study included the following disciplines: "Pathologists of the Neonatal Period," "Nursing of Premature Infants," "Resuscitation and Intensive Care of Newborns," "Research Work," "Neonatology in Hospitals," "Outpatient Neonatology," "Neonatal Neurology," and "Neonatal Surgery."

The practical component of the educational program consists of supervised clinical training, participation in research, and teaching.

As part of the residency program in Neonatology, the academic week includes up to 38 hours of clinical practice (Monday and Wednesday, 8:00–17:00; Tuesday and Thursday, until 16:00; Friday, until 15:00), lectures (2 hours/week), a journal club (1 hour/week), and a research project (2 hours/week). On-site assignments are organized once a week, ensuring 24-hour care. This distribution of the academic workload allows for coverage of key topics.

Legal aspects of physician practice are discussed in all disciplines, according to the educational program. The research component of resident training is formed through participation in journal clubs and training in individual research projects, the results of which are reported to the Department of Education meetings.

Course plans and programs are discussed and approved at meetings of the Educational and Methodological Council (EMC). When making changes and additions to plans, programs, and other matters, the selection of relevant and challenging course topics is taken into account, based on the needs of practical healthcare professionals and regional and city Healthcare Departments. The quality of residency educational programs is monitored through a survey using the "360-Degree Questionnaire."

Faculty provide residents with teaching and methodological materials, as well as additional literature to prepare for classes. 75% were completely satisfied, while 25% were partially satisfied.

The organization has its own clinical site at the National Center for Medical Children's Hospital, which includes the following departments: developmental care, neonatal pathology, and developmental intensive care.

In response to the survey question "Is there sufficient time for practical training (patient supervision, etc.)?", 87.5% of residents fully agreed, 6.25% partially agreed, and 6.25% disagreed. Furthermore, 68.75% of residents stated that the faculty member provides feedback after classes (listening to their opinions, conducting a mini-survey, and error analysis sessions).

Meanwhile, in response to the question "Are resident representatives involved in the development of educational programs?", the experts received the following response: 70.59%. Residents surveyed were completely satisfied with the curriculum (62.5%).

The residency program includes 60-hour components on the fundamentals and methodology of scientific research, including clinical trials and clinical epidemiology. Faculty members employ a methodology for critically evaluating scientific literature and medical research data, which is confirmed by reviewing documents such as residents' reports to the Educational and Medical Council (EMC) and the Department of Education. This form of education is also organized through a monthly journal club.

Residents confirmed that evidence-based medicine is integrated into their education. Specifically, by using clinical protocols in manage a patient, residents are familiar with evidence-based literature.

The resident survey revealed that the educational institution provides access to student participation in research, with 81.25% of residents fully satisfied, 12.5% partially satisfied, and 0% dissatisfied. Residents should engage in R&D, and in response to the questionnaire, 81.25% wrote that they are already engaged in R&D, 12.5% are planning to start, 12.5% are looking for a R&D topic, and 6.25% are not engaged in it.

2.5 Learning methods and experience

The primary teaching methods in residency are bedside teaching. Supervising is provided in accordance with the "Rules for the Organization of Residency Educational Programs of the University Medical Center Corporate Foundation and the Educational Programs of the Nazarbayev University School of Medicine" (approved June 3, 2024). During interviews with residents, experts found that faculty/supervisors most often organize clinical reviews of patients supervised by residents. Feedback is provided daily, and residents can ask their supervisor any questions regarding patient management and also have access to medical records and the patient management information system through their supervisor's account (under their control).

Simulation-based training is provided at the School of Medicine's Simulation Center, which has a room with simulation models at the Nazarbayev University Medical Center. The following simulation equipment is available to residents of the accredited educational program: adult and pediatric CPR simulators (newborn and 5 years old), a Sherpa X CPR simulator with a tablet computer, a pediatric auscultation manikin, abdominal injection simulators, intravenous infusion simulators, a catheterization simulator (male, female), and more. These simulators are designed to practice basic CPR and infusion skills. Simulator training is not included in the educational program or syllabi; a training schedule at the CC is available, but not provided.

Principles of Quality, Academic Integrity, and Anti-Plagiarism (ESG II Part 1.3). Residents are systematically informed about the principles of academic integrity and the anti-plagiarism policy. One of the documents that communicates these provisions to each student is the "Residency Handbook," which contains a section detailing the UMC academic policy, including integrity requirements and the prohibition on plagiarism. Additionally, information about these principles is communicated to residents during introductory classes, through course syllabi, and through ongoing interaction with faculty.

The expert asked residents, "What do they understand by academic integrity?" and received the following response: "Confirm the source of the information used, clearly cite or reference the source; independently pass exams; accurately report research results and adhere to research policies; and use information in accordance with copyright." The expert concluded that the principles of academic integrity in residency primarily relate to areas such as passing exams and conducting scientific research.

Residents are informed of their rights and responsibilities through the "Residential Physician Handbook," which details the rights and responsibilities of trainees. Information is also contained in the "Rules for the Organization of Residency Educational Programs at the UMC Foundation," approved by the Foundation's Board, which also contains a full list of the rights, duties, and responsibilities of resident physicians. The rights and responsibilities of UMC resident physicians are also regulated by the Agreement concluded within the framework of the residency training program. The Education Department and the clinical supervisor are responsible for this. Residents' adherence to ethical standards is communicated to them through the Resident Handbook.

Experts confirm that the educational organization provides residents with the necessary skills and abilities that can impact their personal development and be applied in their future careers **(ESG II Part 1.3).** This is supported by a review of documents such as the Resident Handbook and the Rules for the Organization of Residency Educational Programs at the CF “UMC”. It is also supported by attendance at classes, meetings with supervisors, residents, representatives of the Department of Education, and the results of a resident survey.

Equality principles, including gender, cultural, and religious ones, are observed with respect to residents and faculty, as outlined in the "Rules for Admission to the UMC Residency Program" dated April 8, 2024. A site visit to the educational institution revealed no instances of non-compliance with these principles. The primary documents for the educational institution are the Constitution of the Republic of Kazakhstan and the Law of the Republic of Kazakhstan "On Education," which, in Article 3, paragraph 3, establishes the principle of equal rights for all citizens to education, regardless of gender, age, social status, and other factors. Thus, in the 2024-2025 class of neonatology students, there were four women and one man. A meeting with neonatology residents for the 2024-2025 class took place during interviews and a class visit (November 18, 2025).

Teaching and learning methods are regularly adapted to changing conditions **(ESG II Part 1.5)** and the requirements of practical healthcare. Thus, the leadership of the Neonatology program (G.S. Tortaeva and B.A. Abentaeva) added elective courses to the curriculum on "Functional Diagnostic Methods in Newborns" and "Medical Genetics in Newborns."

Of the 16 residents surveyed, 75% responded that faculty use active and interactive teaching methods quite often in their classes, while 25% said they use them occasionally.

2.6 Educational programme and learning facilities

Residents of the accredited educational program are trained at the CF “UMC”, which includes training at the primary, secondary, and tertiary levels of medical care.

The CF “UMC” clinical sites include leading medical centers: the Maternal and Child Healthcare Center, the Diagnostic Center, and the Heart Center. All three facilities are part of the CF “UMC” and boast a modern clinical infrastructure with over 1,000 beds and the capacity to conduct up to 500 outpatient visits per shift. These sites provide highly specialized medical care using innovative

technologies unmatched by other healthcare organizations in the Republic of Kazakhstan. This creates the conditions for residents to master advanced clinical approaches and technologies in accordance with established learning outcomes.

In addition to its internal divisions, the CF “UMC” maintains formal contractual relationships with a number of external clinical sites, expanding its resident training capabilities. These include the City Children's Hospital No. 2, a state-owned utility enterprise based on the right of economic management, the National Research Oncology Center, the Research Institute of Traumatology and Orthopedics, the National Center for Neurosurgery, City Hospital No. 1, City Hospital No. 2, and other institutions. These sites provide access to practical experience at the primary, specialized, and highly specialized medical care levels across a wide range of specialties.

Residents can work in the laboratories of the NCMC and the Clinical Center. In most cases, residents are trained at the CF “UMC”. Experts visited the clinics of the NCMC and the Clinical Center, which each have one classroom and are engaged in the educational process with supervisors depending on the discipline. Residents in the 2023-2024 and 2024-2025 classes are currently enrolled in the accredited program.

The selection of clinical sites should be based on the structure of the educational program and related disciplines. The National Center for Medical Children's and the Distinguished Care Center have the authority to select/determine the clinical site for resident training. These medical organizations are accredited by the Corporate Foundation UMC and received the JCI certificate (September 2024), making them the 63rd clinic in the world to receive this accreditation.

The centers are equipped with conference rooms (with capacities ranging from 20 to 200 seats), three classrooms, computer labs, and a library with 6,562 items (including 13 in the Neonatology specialty), providing access to domestic and international electronic databases (PubMed, UpToDate, ClinicalKey, etc.). Clinical competency development is complemented by participation in surgeries, clinical case analysis, simulation training, and patient management in specialized departments.

The EEC members confirmed that neonatology residents have access to resources from medical organizations with a specific specialization and level of care.

Clinical supervisors from the NCMC departments participated in the planning, development, discussion, and approval of the educational program **(ESG II Part 1.2).** The residency program was approved at a meeting of the Educational and Medical Council (Minutes No. 3 dated February 20, 2025).

Review of the educational program is not required by the Department of Education's internal documents.

The educational process management reflected in the self-assessment report (**Standard 2**) and general management approaches were confirmed during visits to the NCMC departments and interviews with staff. Verification of **Standard 2** revealed that neonatology residents were in constant working contact with department physicians, mid-level medical staff, and junior medical personnel.

The experts reviewed the work of departments, including the pediatric clinical division, where residents, together with supervisors, provided consultations to pediatric patients from across the republic.

The training of residents in the neonatology specialty is aimed at meeting the needs of practical healthcare, and the number of required specialties is regulated by the Ministry of Health of the Republic of Kazakhstan. Residents in this specialty can develop knowledge and skills in monitoring and treating newborns with various pathologies, in accordance with modern perinatal technologies, WHO programs, and clinical protocols of the Republic of Kazakhstan.

On November 18, 2025, EEC members visited a class for neonatology residents in the 2024-2025 developmental care department at the National Center for Neonatal Health. Five students attended the class, which focused on "Distress Syndrome in Newborns." Instructor B.T. Charipova, a neonatologist of the highest medical category in the neonatal resuscitation and intensive care unit.

The educational institution offers the following opportunities to conduct numerous research projects in all pediatric departments of the NCMC. Research topics can be based on current problematic issues in the departments or the student's previous research work.

Every year, within the framework of the accredited program, residents carried out scientific work, which is reflected in the annex of the report. For example, resident - neonatologist Kaparov A.E., the topic of scientific research "The use of nitric oxide in newborns with persistent pulmonary hypertension" - scientific supervisor B.A. Abentayeva (Meeting No. 6 of 01.06.2020); Alsherova Zh., Rzaeva G. the topic of scientific research "Characteristics of the course of necrotizing enterocolitis in premature infants" - scientific supervisor G.S. Tortaeva (Meeting No. 4 of 30.06.2021); Esenbay A. the topic of scientific research "Psychological state of mothers of newborns treated in the intensive care, neonatology and physiology department" - scientific supervisor G.S. Tortaeva. (Meeting No. 10 dated 06.06.2023); Mambetova Z. chose the topic of the research project "Perinatal and neonatal risk factors for the development of bronchopulmonary dysplasia in premature infants" - scientific supervisor Chuvakova T.K., Tortaeva G.S. (Meeting No. 10 dated 26.06.2023); Kurmanbay N.M. the topic of the scientific research "Clinical and epidemiological aspects of the prevalence of esophageal atresia in newborns in Astana and Akmola region" - scientific supervisor Charipova B.T. (Meeting No. 12 dated 06.05.2024); Kim A.A. the topic of the scientific research "Methods of diagnostics and ways to correct anticoagulant deficiency in newborns from mothers who had COVID-19" - scientific supervisor Abentayeva B.A. (Meeting No. 16 of June 30, 2025).

Neonatology residents did not travel to conferences outside the country from 2019 to 2024, and there were no publications involving residents. Journal clubs are held monthly, where residents from various fields present the latest scientific findings.

The residency program includes 60 hours of research work instead of the ED. Residents interviewed confirmed that they are provided access to research equipment and scientific events held at the training facilities.

Conclusions of EEC by criteria. Comply with 28 standards: 27 - fully, 1- partially.

Standard	Standard implementation	Recommendations for improvement
2.6.1	Partially implemented	To ensure that residents achieve the established learning outcomes, improve the learning path in accordance with regulatory documents (credit ratios), the curriculum, and the level of medical care (i.e., take into account primary, secondary, and tertiary).

Standard 3: **ASSESSMENT OF POSTGRADUATE DOCTORS**

3.1 Assessment policy and system

During the work of the EEC, it was established that the CF “UMC” resident assessment policy is documented in the Rules for the Organization of Residency Educational Programs, approved by Resolution No. 9 of the CF “UMC” Board on June 3, 2024, as well as in the Instructions for the Development of Educational and Methodological Documentation and the Academic Achievement Assessment System, approved by the Educational and Methodological Council on February 19, 2025 (Minutes No. 2). These documents contain the goals, principles, and methods of assessment, focused on achieving the intended learning outcomes. This policy covers not only the assessment of knowledge and practical skills but also shapes approaches to assessing professional behavior, attitudes toward patients, and the ethical aspects of clinical practice.

It should be noted that UMC does not fully implement an appropriate assessment policy to comprehensively evaluate residents' academic achievements. During interviews, residents described assessment methods, such as formative and summative assessment, and stated that they were satisfied

with all of them. They also receive regular feedback from faculty. The assessment appeal system is reflected in the Educational Program document, and there have been no appeals since the institution's inception. The assessment covers not only knowledge and skills but also professional behavior and communication skills, as evidenced by the presence of a 3600-item checklist for physicians, nurses, and junior medical staff. (ESG II Part 1.3)

Validation and reliability assessment of resident assessment methods (tests, tasks, cases) are carried out using a formative assessment scorecard.

The educational organization has a practice of engaging external examiners to assess residents, which is documented in orders of the Department of Education. This ensures the independence and objectivity of assessment results. **(ESG II Part 1.3)**

For example, to verify the data in Standard 3, experts questioned the head of the Department of Education and reviewed the resident assessment documents and methods.

The organization has test assignments for several disciplines in the specialty, developed by clinical supervisors and approved at a meeting of the Educational and Methodological Council. These assessment tools are not peer-reviewed, as peer review is not required by the Department of Education's internal documents. Testing is carried out using paper-based formats.

All residents graduating in the Neonatology specialty received "good" and "excellent" grades on the final examination. To date, there have been no appeals from residents.

During a visit to the organization and an interview with A.A. Syzdykova, Director of the Department of Education, the commission confirmed that a documentation system is in place that is transparent and accessible to all faculty and staff. This system includes documents such as annual operational plans, annual reports, department regulations, faculty and resident agreements, educational and methodological documentation (EPs, working curricula, syllabi), assessment tools (formative and summative assessment), certificates, and credentials. A review of the website revealed that its pages contain the necessary documents for residents and regularly updated information.

During a visit to the organization, management was asked: "Are external examiners involved to improve the fairness, quality, and transparency of the assessment process?" The answer was no.

During interviews with two faculty members regarding assessment methods, the experts received convincing evidence that formative and summative assessments are used. Residents also shared their opinions on the timeliness of testing, pre-exam counseling, and the clarity and fairness of the entire assessment process.

Eleven employers interviewed also noted that graduate training is consistent with current developments in medical practice and science. However, the educational organization did not provide systematic feedback to them.

At the same time, interim assessments are not used in each discipline; testing is not used as an assessment method in various disciplines; there is no comparison of intended learning outcomes, assessment methods, and teaching and learning methods used.

3.2 Assessment in support of learning (formative assessment)

In accordance with the residency program syllabi at UMC, three interrelated interim assessment methods are used: formative assessment, summative assessment, and the Clinical Competency Committee.

Formative assessment is performed daily by supervisors or faculty and is based on monitoring the completion of a set minimum of practical skills and procedures. It includes constructive feedback accompanied by recommendations for improvement, such as selecting educational resources, planning additional internships, and adjusting the curriculum. The decision on the appropriateness of using formative assessment is made by members of the Clinical Competency Committee (CCC) in conjunction with the UMC Education Department, based on the specialty profile and individual rotation results.

Summative assessment is conducted following each rotation in specialized disciplines and

includes an objective assessment of knowledge, skills, and professional attitudes in accordance with learning outcomes.

The assessment system regularly identifies residents' strengths and weaknesses, as it includes an approved form of formative assessment. Formative assessment typically occurs after the completion of a seminar. These forms are reviewed by experts. Faculty regularly provide feedback to residents based on their assessments. In interviews, residents confirmed that they receive feedback after completing their training.

Experts determined that the selection of resident assessment methods focuses on bedside manage a patient, as the practical component of training is central. Bedside assessment demonstrates integrated learning and a focus on clinical skills. Established assessment methods ensure that residents have mastered all sections of the educational program and acquired the necessary practical skills.

Residents report that faculty provide them with information on the results of their assessments **(ESG II Part 1.3).**

3.3 Assessment in support of decision-making (summative assessment)

The summative assessment is divided into five levels, which assess the resident's key competencies: manage a patient, communication and collaboration, safety and quality, public health, research, learning, and development. A separate assessment of practical skills is included, highlighting strengths, suggesting target areas for improvement, and providing comments. Finally, a score is issued on a 100-point scale, signed by the assessor(s) (head of department/program and supervisor).

The criteria for admission to the final assessment are an assessment form (also approved by the Department of Education), which also has five levels, assessing the resident's key competencies: manage a patient, communication and collaboration, safety and quality, public health, research, learning, and development. Based on the results, a final recommendation is made for the next academic term or admission to the final assessment. The document is signed by the UMC Clinical Competencies Committee, consisting of three members.

The reliability and validity of quantitative data from resident assessment results is ensured by clinical supervisors, the Clinical Competencies Committee and the Education Departments **(ESG II Part 1.3).**

3.4 Quality assurance of the assessment system

CF “UMC” has developed and implemented a quality assessment policy to ensure the reliability and validity of results, both at the level of individual instruments and the entire system. The organization employs the following quality assurance mechanisms: the use of well-developed assessment tools—tests, case problem, and practical skills forms; the application of criteria-based assessment with formal specification of all procedures and tasks assessed during rotation; and the presence of an appeals procedure.

It should be noted that CF “UMC” does not engage independent examiners in resident assessments. This is not reflected in the Rules for the Organization of Residency Educational Programs of the University Medical Center Corporate Foundation and the Educational Programs of the Nazarbayev University School of Medicine, dated June 3, 2024. The results of formative and summative assessments are discussed at a meeting of the UMC Clinical Competencies Committee, after which the Education Department draws conclusions regarding the methods and content of the assessment.

Resident assessments include questions about patient safety. For example, both the formative and summative assessment forms include a section on "safety and quality," which is assessed at five levels on a 100-point scale. The portfolio also includes a Privilege Sheet with levels of trusted activity (competency clearance), which aligns with international EPAs/graded responsibility practices.

In 2022, the formative assessment forms were updated to include criteria for professional conduct and ethics.

A 2025 employer survey showed that graduates of the Neonatology residency program demonstrate very high knowledge and practical skills (ESG II Part 1.3). The experts were familiarized with the results of the final certification of residents for 2020-2024. 100% of residents passed the final exam with excellent marks in the specialty "Neonatology" in 2020, 100% in 2021, 100% in 2023, and 33.33% in 2024 (1 out of 3 residents).

Conclusions of EEC by criteria. Comply with 15 standards: 14 - fully, 1 - partially, 0 - not compliat.

Standard	Standard implementation	Recommendations for improvement
3.1.2	Partially implemented	It is recommended to optimize the existing assessment matrix with clear criteria, standardized observation formats, and regular application, which will allow for the transformation of individual good practices into a sustainable quality control mechanism. Implement an electronic journal.

Standard 4: POSTGRADUATE DOCTORS

4.1 selection and progression policy

The organization trains competent and competitive healthcare specialists through enrolment, with the goal of providing the healthcare industry with qualified personnel in this field.

Under the state educational procurement program, UMC annually receives a significant number of places in a number of clinical specialties, confirming its status as a leading clinical site. The educational organization has a resident admissions policy, which is described in the Rules for the Organization of Residency Educational Programs of the University Medical Center Corporate Foundation and the Educational Programs of the Nazarbayev University School of Medicine, dated June 3, 2024.

The document takes into account the requirements for residency applicants in terms of their previous achievements in undergraduate and internship studies: according to the internal Rules for Admission to the UMC Residency Program, individuals with a final internship assessment score of at least 3.33 points and a grade point average (GPA) of at least 3.0 are admitted to the entrance exams for the UMC Residency Program, and also describes the requirements for safety compliance **(ESG II Part 1.4).**

In 2025, when preparing applications for the new academic year, an analysis of the number of surgeries and procedures performed in departments for 2024 was conducted. Based on these results, the optimal number of new admissions was determined, taking into account the provision of each resident with the required volume of surgeries and procedures. The number of students for new admissions is also submitted to the Academic and Methodological Council for review, and then to the Board of Trustees of the UMC Foundation. Individuals who have completed higher education programs are admitted to residency. As part of improving the UMC Foundation's admissions policy, the UMC Foundation Board of Directors, by Decision No. 6 of April 8, 2024, approved the Rules for Admission to Residency of the University Medical Center Corporate Foundation. These Rules define the specialty exam as testing and/or assessing practical skills. Furthermore, the threshold score for the specialty was increased to 75 points. The procedure for conducting the entrance exam in the specialty is described in more detail in Section 4.1.4.

The educational institution has created a barrier-free learning environment, including ramps, call buttons, elevators, and accessible restrooms.

Approaches to the admission and transfer of residents from other educational institutions are reflected in the CF "UMC" Residency Admission Rules.

The appeal procedure following admission to residency is outlined in the CF "UMC" Residency Educational Programs and the Nazarbayev University School of Medicine Educational Programs. Information on the right to appeal, deadlines, and filing procedures is posted on the official residency admissions page on the CF "UMC" website.

The appeals committee works with each resident physician individually. If an individual fails to appear for an appeals committee meeting, their appeal will not be considered. The appeals committee's decision is made by a majority vote of the total number of committee members. In the event of a tie, the vote of the committee chairperson is decisive. The work of the appeals committee is documented in minutes signed by the chairperson and all committee members. Following the meeting, the appeals committee, having reviewed the applicants' examination answer sheets, decides to uphold the results of the subject examination committee.

During the period 2020–2025, one appeal was filed by a resident physician in the Neonatology specialty. **(ESG II Part 1.4).**

According to self-reporting and communication with program directors, the CF "UMC" did not include associations of postgraduate continuing education students in the admissions and selection policy development process, which is one area for improvement in the residency program. The Department of Education is responsible for reviewing the admissions and selection policies and the number of residents annually.

In the specialty of "Neonatology," the total number of residents graduated during the residency admissions start dates was 22. The Ministry of Health of the Republic of Kazakhstan and local executive authorities are sources of information on the need for specialists in "Neonatology." Therefore, experts validated the self-assessment report data according to Standard 4. Overall, all criteria were met. The experts reviewed the resident admissions documentation.

4.2 Performance improvement and exit from the programme

UMC has an officially approved policy regulating academic support, conditions for successful progression in training, and grounds for dismissal of residents, which are documented in the Rules for the Organization of Residency Educational Programs at UMC and the Educational Programs of the Nazarbayev University School of Medicine dated June 3, 2024.

The practice of academic advising, personal support for residents, and the development of not only professional skills were assessed by experts through discussions with residents and their clinical supervisor.

Each resident is assigned a supervisor from among the faculty for the entire training period. This supervisor performs the following functions: participating in the development of an individual curriculum, the selection of elective courses and instructors, and overseeing the student's clinical, educational, and research activities.

The organization provides support in matters of academic performance, discipline, choice of individual research direction, internship base, and supervisor. Educational work and the integration of residents into the academic and social environment are also carried out.

Faculty members prevent situations involving unexpected incidents involving residents that could potentially cause harm to patients. This is accomplished through informed consent and the signing of a Privilege Sheet with levels of trusted activity (competency clearance), which is consistent with international EPAs/graded responsibility practices. According to faculty members, no such situations were observed during the period 2020-2025. Each resident is familiar with and applies informed patient consent for examinations, treatment, and medical procedures in their clinical work. Before classes begin, residents are instructed by their faculty members on how to comply with the rules of conduct in a medical organization and sign a document—a Privilege Sheet. Residents

confirmed this during meetings with experts, and the presence of Privilege Sheets themselves are included in the Portfolios of residents in other specialties.

Social, financial, and personal support for residents is provided in accordance with the Rules for the Appointment, Payment, and Amount of State scholarship allowance for Students in Educational Organizations, approved by Decree No. 116 of the Government of the Republic of Kazakhstan dated February 7, 2008. For example, to provide social support to residents, the Tariff Commission of the UMC Foundation was established in 2018 and supported the proposal to provide 30% discounts on medical examinations and laboratory tests performed by resident physicians at UMC Foundation centers. Psychological support for residents is provided through the Psychosocial Support Sector, which employs six full-time specialists. A psycho-emotional relaxation room with regular art and music therapy sessions and yoga is also available. Confidential counseling by psychologists is also provided. A career counseling system for graduates is also in place, with a 100% employment rate by 2023.

UMC guarantees confidentiality regarding consultations and support provided to resident physicians via email, the Department of Education (Outlook), and personal phone numbers of Department of Education employees.

Consulting services are provided to assist residency graduates in career planning. The employment rate for graduates of all residency programs was 100% in 2019-2024 **(ESG II Part 1.4).**

4.3 International medical graduates

The organization has a document, the Rules for Admission to the UMC Residency Program, approved by Board Resolution No. 6 on April 8, 2024, which regulates the recognition policy for residency qualifications. No foreign residents have been accepted into the residency program, including those admitted to the accredited program. The Rules for Admission to the UMC Residency Program guarantee equal opportunities for residents. Residents sign an agreement, one copy of which is given to the resident and one copy is kept by the Department of Education.

4.4 Postgraduate doctor work and study

Neonatology residents at the CF “UMC” are provided with a program that defines goals, objectives, overall workload and work hours, their areas of responsibility, and the intended learning outcomes. Residents are informed about their supervisors. Four clinical supervisors participated in resident training under the accredited program at the NCMC clinical sites. Residents are informed about the number and timing of ongoing assessments and final examinations.

Neonatology residents participate in events organized by the clinical sites, according to the Comprehensive Plan for the Joint Continuity of the Clinic's Educational Organization. Experts reviewed this plan for 2025 and found that residents participate in events and earn the appropriate certificates. The clinical training program for residents includes supervision of 3-10 patients per month, with up to four on-call shifts. All of this is regulated in the Resident Handbook.

Department faculty inform residents about the conditions for their participation in providing medical care through supervisors, based on the Rules for the Organization of Residency Educational Programs at the UMC Branch and the educational programs of the Nazarbayev University School of Medicine.

If a resident is forced to interrupt their studies (due to pregnancy, maternity leave, illness, or military service), the educational organization provides professional online platforms (Zoom, Google Classroom), as well as access to electronic libraries, databases, and video materials. This allows residents temporarily absent from clinical sites to continue mastering theoretical components and maintain contact with the educational environment. For this purpose, an individual training plan is developed for the resident in collaboration with the resident's supervisor, a representative of the Education Department, and the Deputy Chairman of the Board. The plan is agreed upon with the

resident and approved by the Department Director. Currently, there are no such students, including in the accredited Neonatology program.

4.5 Postgraduate doctor safety

During a visit to the organization, it was established that, according to the Rules for the Organization of Residency Educational Programs at the UMC Branch of the Kyrgyz Republic, a resident physician is not an independent provider of medical care, but rather performs practical skills under the guidance of a supervisor and within the framework of an approved privilege sheet. This document, signed by the program director, defines the list of clinical procedures permitted for the trainee, depending on their level of training. All resident activities are carried out under the supervision of a clinical supervisor.

Therefore, the resident studies with the legal status of a student and performs clinical activities strictly within the framework of the educational program, without acting as an attending physician. The resident's personal file includes a corresponding contract, which is not an employment contract or a civil-law contract, but reflects the status of the trainee undergoing practical training at the clinical units of the UMC Branch of the Kyrgyz Republic.

First-year residents provide medical care to patients under the supervision of a clinical supervisor, and second-year residents can practice instructor/senior peer supervision for first-year residents.

Resident physical safety during training is regulated by the Safety Procedures, which residents sign before beginning training, as well as by clinical documents, including their healthcare certificate. Psychological safety is ensured through a supervising system, regular feedback, supervisor support, and the ability to contact program management in cases of overload, conflict, or professional burnout.

4.6 Postgraduate doctor renumeration

According to the Rules for the Assignment and Payment of State scholarship allowance, approved by Government Resolution No. 116 of February 7, 2008 (as amended on October 10, 2022), resident physicians studying under state educational programs receive a state scholarship allowance for the entire duration of their studies, regardless of their assessment results (since September 1, 2025, the scholarship allowance is 134,664 tenge). The document "Resident Scholarship Program" is published in the regulatory documents section of the official UMC website under "Regulatory Documentation."

Residents may work 0.25 of their full-time position outside of their studies, in accordance with internal orders regarding operational requirements. This year, there are six residents enrolled in the accredited program, three of whom work in neonatology departments.

4.7 Postgraduate doctor health and welfare

Residents are provided with professional and personal support focused on physical health, personal well-being, and psychological well-being, including professional burnout, through the UMC Residency Programs Guidelines and the Resident Handbook. During a meeting with experts, residents stated that they could obtain legal assistance by contacting a UMC lawyer.

Conclusions of EEC by criteria. Comply with 19 standards: 19 - fully, 0 - partially, 0 - not compliat

Standard 5: TEACHERS AND CLINICAL SUPERVISORS

5.1 Teachers and clinical supervisor establishment

The composition of the faculty and supervisors of the CF “UMC” is agreed upon by the heads of clinical departments, reviewed by the EMC, and approved by order of the head of the CF “UMC” annually, taking into account new admissions for the corresponding academic year.

In the specialty "Neonatology", the teaching staff is represented by 6 specialists, 2 supervisors, including 3 candidates of medical sciences, 1 doctor of medical sciences, 1 PhD and 4 physicians of the highest category: Abentayeva B.A. - Head of the Department of Resuscitation and Intensive Care of Newborns, Department of Anesthesiology and Intensive Care; Chuvakova T.K. - Senior Resident-Consultant in Neonatology, Department of Resuscitation and Developmental Intensive Care Unit; Tortaeva G.S. - Head of the Neonatology Program, Department of General Pediatrics, Department of Pediatrics; Duisenbieva L.T. - Neonatologist, Department of Resuscitation and Developmental Intensive Care Unit; Charipova B.T. – Neonatologist, Developmental Intensive Care Unit; Mukhambetova M.E. – Neonatologist, Developmental Intensive Care Unit, Department of Anesthesiology and Intensive Care; Zhanabaeva S.S. – Neonatologist, Developmental Intensive Care Unit; Kamiev R.T. – Neonatologist, Developmental Intensive Care Unit.

During the visit, the Experts reviewed the physicians' job descriptions. A strategic plan is to transition to a "dual appointment" system—combining the roles of teacher, physician, and researcher.

The Experts were familiarized with the HR policy and the Regulation on Supervisors in the Rules for the Organization of Residency Educational Programs. The ratio of faculty to residents is 1:3. In 2019, the number of trainees was 5, in 2020—1, in 2021—10, in 2022—3, and in 2024—3.

The principles of ethics and academic integrity for faculty are reflected in the "UMC Business Ethics Code" of December 26, 2022. During discussions with faculty, they confirmed their awareness of this issue. According to Chapters 6 and 8 of the document, faculty and supervisors are required to strictly adhere to the principles of respect, professionalism, confidentiality, and honesty in their relationships with students, colleagues, and patients. Violations of ethical standards are reviewed by the Corporate Ethics Commission, which functions as an independent expert body. There is also an Ombudsman, which reviews complaints and appeals, provides consultations, and monitors compliance with ethical standards. All provisions are mandatory for all employees and are subject to disciplinary action.

To verify the self-assessment report data for Standard 5, external experts obtained faculty input on the HR policy. This includes professional development for faculty and supervisors, which is carried out through internal seminars on teaching methods, IT competencies, the use of educational platforms, and the development of test materials. Faculty participate in training courses on medical pedagogy, competency assessment, and are also involved in international educational events.

The discussion with clinical supervisors included topics such as resident assessment, their engagement with patients, communication skills and personal growth, professionalism, and public healthcare principles. This allowed the experts to learn about approaches to engaging clinical staff for teaching (there are three faculty members), resident enrolment strategies and tactics, and the educational program's informational support. They also identified challenges in human resource management and development, as the supervisors are not professional educators.

Technical and administrative staff are available to support the educational program **(ESG II Part 1.5),** including the Department of Education, the Economics Department, the Human Resources Department, and legal staff.

A meeting was held with staff from support departments such as the Economics Department and the Human Resources Department.

A survey of the faculty revealed that the majority (64.71%) were completely satisfied with the work organization and workplace at this educational institution, while 35.29% were partially satisfied. At this educational institution, faculty have the opportunity to engage in research and publish their results – 76.47% strongly agree, 17.65% somewhat. Salaries are satisfactory – 35.29% strongly agree, 17.65% somewhat.

5.2 Ethics and conduct of teachers and clinical supervisors

The responsibilities of UMC faculty and clinical supervisors regarding ethics and academic integrity are regulated by the "Rules for the Organization of Residency Educational Programs" (paragraphs 6 and 8 of the "UMC Code of Business Ethics" dated December 26, 2022).

Faculty and supervisors are required to comply with international standards for accreditation, safety requirements, sanitary and epidemiological regulations, data confidentiality, as well as norms of ethical conduct and proper interaction with students. The HR policy defines the responsibilities and obligations of faculty in the high-quality education of residents. This is described in paragraphs 6 and 8 of the "UMC Code of Business Ethics" dated December 26, 2022.

The responsibilities and duties of clinical supervisors are described in the Rules for the Organization of Residency Educational Programs of the University Medical Center Corporate Foundation and the Educational Programs of the Nazarbayev University School of Medicine (approved June 3, 2024).

The principles of ethics and academic integrity for faculty are described in the Code of Business Ethics of the UMC Corporate Foundation. The faculty interviewed confirmed that they were aware of this.

The monitoring system and process for improving the performance of supervisors **(ESG II Part 1.5)** and clinical supervisors are regulated by the Rules for the Organization of Residency Educational Programs of the University Medical Center Corporate Foundation and the Educational Programs of the Nazarbayev University School of Medicine. Supervisors are not certified for pedagogical competencies.

Monitoring and evaluation of the performance of faculty and clinical supervisors of the UMC Corporate Foundation is carried out at several levels. According to the Instructions for the Development of the EMC and the Assessment System (approved by the CF “UMC” on February 19, 2025), faculty performance is assessed based on the results of formative and summative assessments of residents, which are analyzed by program directors. The ethical aspects and behavior of faculty are also monitored by the Corporate Ethics Commission and the Ombudsman Institute, as stipulated by the Code of Business Ethics No. 17 of December 26, 2022.

5.3 Continuing professional development of teachers and clinical supervisory staff

During a meeting with the head of the HR department and interviews with faculty, the experts obtained feedback on approaches to developing faculty teaching competencies, motivation to work with residents, supervising, the "Effective UMC Teacher" competency-based model, and continued training of physicians in advanced educational technologies.

The experts determined that faculty and residents have sufficient time for teaching, supervising, and training. Faculty schedules are set from 8:00 AM to 5:00 PM. Faculty conduct seminars lasting 1 hour and 40 minutes. Clinical reviews and bedside rounds are scheduled daily from 8:00 AM to 2:00 PM. On-call hours are four times a month.

Experts received feedback on the annual faculty development program. Fifty-three clinical supervisors involved in the implementation of residency educational programs completed the training from 2019 to 2025, including two instructors from the accredited educational program in Neonatology (B.A. Abentaeva and G.S. Tortaeva). These activities are funded by the educational organization. Experts reviewed the instructors' certificates on topics such as "Educational Technologies in Residency. Trusted Professional Activity" (6 hours), "Methodology for Developing Examination Materials (Test Questions and Clinical Scenarios) for Assessing Key Competencies of Students and Graduates of Educational Programs in the Field of Healthcare Specialists," and "Methodology for Digital Classes in Postgraduate Medical and Pharmaceutical Education."

Faculty salaries are based on the physician's salary, the teaching work performed by the supervisor, and KPIs.

Funding for supervisors is provided in accordance with the laws of the Ministry of Health of the Republic of Kazakhstan and the regulatory documents of the CF “UMC”.

The personnel policy **(ESG II Part 1.5)** and approaches to engaging clinical supervisors are reviewed annually in accordance with the changing needs of postgraduate medical education. The last review was conducted on November 29, 2021. The policy for recruiting and developing faculty and clinical supervisors at the CF "UMC" is reviewed annually as part of educational process planning and staffing.

The educational institution offers opportunities for career growth and development of teachers' competencies. *76.47% of surveyed teachers responded, and 23.53% partially agreed. 47.06% attended professional development programs less than a year ago, 47.06% during the current year, 35.29% more than three years ago, 5.88% more than five years ago, and 11.76% answered "I don't remember when that was."*

The institution implements social support programs for teachers: 5.88% answered "yes, such programs exist," 5.88% "I have already taken advantage of them," 23.53% of respondents said no such programs exist, and 47.06% of respondents were unaware of them.

Conclusions of EEC by criteria. Comply with 8 standards: 7 - fully, 1 - partially, 0 - not compliat

Standard	Standard implementation	Recommendations for improvement
5.3.3	Partially implemented	To align with current international trends in resident training, it is recommended to expand the development of supervisors' pedagogical skills—feedback techniques, coaching, facilitation, and assessment tools—to enhance the program's comprehensiveness and improve the effectiveness of training.

Standard 6: EDUCATIONAL RESOURCES

6.1 Clinical facilities for learning and research

During the EEC members' visit to the educational institution, it was noted that the UMC branch has modern facilities supporting the implementation of postgraduate medical education programs. The infrastructure includes lecture halls, conference rooms, classrooms, a simulation lab, libraries, computer labs, clinical and outpatient diagnostic units.

Resident training is primarily conducted at the NCMC (developmental care unit, Developmental Pathology Unit, and Intensive Care Unit, each with 20 beds), the Clinical Center, and libraries. Residents also have access to small and large conference rooms for seminars and journal clubs, laboratories, a 34-seat library, a service center, and a computer lab. Residents have access to simulation equipment at the Center, which is equipped with 14 simulators. The developmental care unit also has its own simulators/models for mastering and reinforcing practical skills.

The adequacy of the material and technical resources, clinical sites, and the number and profile of patients for clinical training is ensured by all UMC CF structural divisions involved in the implementation of educational programs: the Department, UMC CF centers, and the library. When developing and updating educational programs, an analysis is conducted to ensure that the necessary material and technical resources, literature, and specialized departments of the centers are adequately provided for the disciplines.

Before beginning the relevant course of study, residents receive a syllabus from their instructor, indicating the skills they should acquire and develop during their training. The educational organization provides residents with opportunities for practical and theoretical learning through bedside teaching, which is state-of-the-art and the best in practical skill acquisition.

Access to the latest professional literature and international sources is provided through the CMC Library, which subscribes to 20 journals and 2 newspapers. The CC subscribes to 45 journals and 9 newspapers. Literature needs are analyzed based on the level and language of instruction.

Resources from the NU School of Medicine library (PubMed, UpToDate, ClinicalKey, etc.) are available in Kazakh, Russian, and English. Additionally, resources from AMEE, ACGME, Coursera, MOOCs, and FOAMed are actively utilized to support clinical and scientific learning.

A safe learning environment in the functional/instrumental diagnostics laboratories/rooms **(ESG II Part 1.6)** is ensured by familiarizing residents with safety and healthcare regulations before classes. Laboratory facilities, clinical sites, and simulation rooms operate according to international JCI standards. Experts reviewed the Safety Regulations. UMC conducts mandatory staff training on emergency procedures, including evacuation drills. Residents interviewed confirmed their awareness of this document.

The educational institution conducts research in various areas of pediatrics.

All research information is included in the resident's portfolio, the structure of which is based on the "Rules for the Organization of Educational Programs for the UMC Residency Program and the Educational Programs of the Nazarbayev University School of Medicine."

If residents conduct scientific and practical research, they are provided with access to instrumental and laboratory equipment, if necessary.

The facility's material and technical resources, including its library, are updated annually. Over the past five years, updates have included the following: PubMed, UpToDate, ClinicalKey, AMEE, ACGME, Coursera, MOOCs, and FOAMed. **(ESG II Part 1.6)**

Interviews with three clinical supervisors revealed that they were satisfied with the residents' work, noted their growth in knowledge and practical skills, and reported maintaining ongoing contact with residency graduates, continuing to provide advisory and practical assistance even after residency completion.

6.2 Postgraduate medical education based on clinical learning

CF “UMC” residents' training in medical record keeping is based on current professional practice standards, clinical protocols, and JCI principles.

During the course of the training, the EEC members assessed residents' record keeping, including daily entries in electronic medical records, preparation of prescription sheets, procedure records, discharge summaries in the Medical Information System (MIS), and portfolio maintenance.

A review of CF “UMC” resources showed that they meet the goals and objectives of educational activities, and the educational organization's staff ensures collegial and ethical relationships with medical staff and clinical site management to achieve resident outcomes. A sufficient number of specialized patients are provided in the neonatal and premature developmental care unit and the developmental intensive care unit, the necessary modern equipment is available to students, and faculty provide high-quality training that adheres to ethical and deontological standards. Access to the city's perinatal centers is available (on a contractual basis).

During visits to clinical sites, experts assessed resources (the NCMC, the Disability Center, the Center for Social Support, and the National Center for Occupational Therapy), their compliance with training programs, accessibility for faculty and residents, and the extent to which this equipment is modern and meets the needs of trainees and practical healthcare.

To validate the self-assessment report and obtain evidence of program quality, interviews with residents were conducted. The experts asked questions about satisfaction with training, sufficient time for patient supervision, working with medical documentation, satisfaction with teaching methods and faculty qualifications, social and moral support for residents who need it, participation in "Journal Clubs," and access to international professional literature databases. Overall, residents were satisfied with the training and assessment methods, and specifically enrolled in this organization because they believe it has excellent and modern resources, a strong reputation, and international connections.

The center has a simulation center equipped with 14 simulators. Residents in the Neonatology specialty program can practice practical skills such as basic cardiopulmonary resuscitation for adults

and children and anaphylactic shock in adults and children. Providing emergency care to patients with anaphylactic shock in children is also included in the curriculum. Thus, resident training in the simulation center is an integrated part of clinical training.

Residents demonstrated their commitment to the educational process, were proactive in answering questions from external experts, and provided insights into the organization of training, assessment of their skills, advisory support, and opportunities to participate in research projects. Experts reviewed the residents' documents (portfolios, resident assessment checklists, and resident survey results).

To develop teamwork experience among residents, the educational organization conducts activities such as regular clinical case reviews involving specialists from various fields, journal club meetings, attendance at consultations, and fulfilling colleagues' assignments within their areas of expertise. Experts attended a journal club meeting on modern corrections for pediatric orthopedic pathologies. Inter-professional collaboration is implemented in the training of first-year residents and nurses, and they participate in supervising and educational sessions. Competencies in educational management are developed through the involvement of senior-year residents in coordinating the work of junior-year residents.

In the survey, residents noted that they have free access to patients at clinical sites and are provided with all the necessary conditions to improve their practical skills. 88.4% of faculty members completely agreed, 5.88% partially agreed, and 0% was undecided.

Regular updates of equipment at clinical sites and other educational resources are carried out in accordance with the changing needs of resident training. In accordance with the internal regulations of the CF “UMC”, the renewal of the material and technical resources, including educational, research equipment, and medical devices, is carried out based on the approved budget and within the procedures established by the "Rules for the Procurement of Goods, Works, and Services" (as amended on April 27, 2021). The planned and current number of residents is taken into account to ensure a 3:1 ratio of residents to faculty. The profile of clinical supervisors is determined by the specialty of clinical supervisors, and the Department of Education evaluates their compliance with the goals and objectives of the residency, their level of education, and their proficiency in teaching methods.

To enhance their teaching competencies, two faculty members (B.A. Abentaeva and B.T. Charipova) completed a 6-hour seminar on "Entrusted Professional Activity" and a 12-hour seminar on "Educational Technologies in Residency." All faculty members and supervisors regularly participate in master classes on medical education as part of the joint program between NU and the University of Pittsburgh. Clinical supervisors are provided with the following materials for training residents: the Neonatology curriculum, syllabi for the first and second years of study, the Rules for Organizing Residency Educational Programs of the University Medical Center Corporate Foundation and the Educational Programs of the Nazarbayev University School of Medicine, and a schedule for first- and second-year residents.

In accordance with the internal regulations of the UMC Foundation, the renewal of the material and technical resources, including educational, research equipment, and medical devices, is carried out based on the approved budget and within the procedures established by the "Rules for the Procurement of Goods, Works, and Services" (as amended on April 27, 2021). This document allows for the purchase of equipment from manufacturers, authorized dealers, and distributors. For large purchases, approval is required from the Foundation's executive body, based on the recommendation of the Medical Council, ensuring that the acquired equipment complies with the profile of educational programs and clinical sites. The Department of Education staff conducts annual monitoring of the quality of educational programs, and the results are discussed at UMC meetings.

Sociological surveys, including issues of education quality, could become one of the mechanisms for assessing education. However, such surveys are not provided for in the educational organization.

6.3 Training postgraduate doctors at alternative clinical settings

The academic training policy for residents includes the opportunity to study at institutions if the available clinical sites cover all topics covered in the educational program. Residents in the Neonatology specialty are trained primarily at the NCMC (Department of Pediatric Anesthesiology, Resuscitation, and Intensive Care, Department of Neonatal Resuscitation and Intensive Care, Department of Transfusiology, etc.) and the CC (Outpatient Neonatology). Students also have access to city healthcare facilities on a contractual basis.

During the reporting period, there were no joint scientific publications with students. However, residents participate annually in research projects approved by the Academic and Methodological Council (AMC) meeting, which also accepts the residents' research results. Over the past three years, 13 research projects by neonatology residents have been approved by the AMC.

Academic mobility for neonatology residents was conducted once in the Republic of Kazakhstan (Lisakovsk City Hospital, a state-owned utility enterprise based on the right of economic management of the Kostanay Region Akimat's Healthcare Department, from October 18, 2021 to April 15, 2022) (ESG II Part 1.2).

To support international cooperation, exchange resident physicians, and share experiences in medical education, including training and seminars for specialists and resident physicians, memoranda have been signed with international clinics in Ghana, Turkey, Israel, Italy, Slovenia, Lithuania, and Korea. In 2022, memoranda of cooperation were signed with the Ospedale Pediatrico Bambino Gesù Children's Hospital (Italy) for a period of five years, providing for the joint development and implementation of projects aimed at educational and clinical training in pediatrics and subspecialties, molecular genetics (clinical diagnostics and research), personalized medicine, rare diseases and clinical research, as well as providing assistance in complex cases. That same year, a two-year memorandum of understanding was signed with Samsung Medical Center (Korea). The aim of the memorandum is to maintain a close, collaborative treatment system between UMC and CCC through a mutual patient referral system, the exchange of current medical information, and the promotion of the international medical community through the creation of a mutual cooperation system.

At the CF “UMC”, international internships for resident physicians are organized on a competitive basis through the UMC Extended Observership Program (UMC EOP). The program's terms and conditions are regulated by the Rules for the Selection and Assignment of Resident Physicians on Secondments, approved by Resolution No. 12 of the Educational and Methodological Council dated May 16, 2025.

The institution's faculty actively participates in national and international events. This participation enables the application of acquired information in the educational process.

6.4 Information sources, resources and use

Experts assessed residents' and faculty's access to essential web resources, including the Directum corporate portal, Microsoft Outlook, Supervisor and Coursera learning platforms, and access to the UMC Centers' internal electronic repository via desktop computers in the computer lab or library. The clinics utilize the AKGUN Medical Information System, a system that automates clinical business processes from patient registration and hospitalization to discharge, examinations and patient prescriptions, and reporting. The system also includes a PACS module for archiving and transmitting diagnostic images. The MIS is integrated with the information systems of the Ministry of Health of the Republic of Kazakhstan (Register of attached population, SFMC, outpatient and polyclinic care, ERCP), as well as the 1C and LIS "Ariadna" systems used in the clinics. Access is also provided to the Registry of Pregnant Women and Women of Childbearing Age, the OncoRegistry, and other information systems. Portable communication devices (Dect) are used to facilitate faster communication between staff within the centers. Residents confirmed that they can

use all educational programs, including when preparing for classes.

The experts visited the library, which provides residents and staff with access to printed materials in the Kazakh, Russian, and English languages. The primary literature on neonatology includes international guidelines on neonatology and pediatrics, WHO recommendations, and clinical protocols of the Ministry of Health of the Republic of Kazakhstan.

International databases are also available, including a full-text electronic resource from one of the world's leading interactive databases of journals, book series, books, reference materials, and interactive archive collections from SpringerLink, Nature Publishing Group. Clarivate Analytics (WoS) databases, SciVerseScienceDirect full-text resources, including 2,500 journals, 11,000 online books, SciVerseScienceDirect, SciVerseScopus, Reaxys, Emabse, EngineeringVillage, as well as innovative systems for analysis, evaluation, and decision-making in scientific research: SciVal, EBSCO: Medline Complete and DynaMed Plus, WileyOnline Library; BMJ: BMJ Journals, Best Practice, BMJ eLearning, and others. Residents are aware of this.

Residents manages 3-4 patients per day, including completing the necessary documentation under the supervision of a supervisor.

Therefore, the educational organization provides residents and clinical supervisors with access to information and the use of innovative information and communication technologies **(ESG II Part 1.8).**

Over the past 2-3 years, the following information and communication technologies have been implemented: portable communication devices (Dect) are used to speed up communication between staff within centers.

WhatsApp is used to ensure seamless information exchange with fellow students. Access to relevant patient data and healthcare information systems is organized through the AKGUN Medical Information System **(ESG II Part 1.6).**

Conclusions of EEC by criteria. Comply with 15 standards: 14 - fully, 1 - partially, 0 - not compliat

Standard 7: QUALITY ASSURANCE AND IMPROVEMENT IN POSTGRADUATE TRAINING

7.1 Quality assurance system

To ensure the quality of medical care provided to the population, UMC has implemented a quality management system, including postgraduate medical education. The system is based on the principles of the ISO 9001:2015 standard and is supported through regular internal and external audits. The Quality Management Department of UMC is responsible for implementing the quality policy. The heads of structural divisions and the Education Department participated in the development and approval of the Quality Policy. The policy is updated based on monitoring results, feedback from students and faculty, risk analysis, and external expert opinions.

The quality assurance system is documented in the Rules for the Organization of Educational Residency Programs at UMC, approved by Resolution No. 9 of the UMC Board of Directors dated June 3, 2024; in the Rules for Admission to Residency of the University Medical Center Corporate Foundation, approved by Resolution No. 6 of the UMC Board of Directors dated April 8, 2024; In the Regulation on the Educational and Methodological Council, approved by Order No. 10 of the Deputy Chairman of the Board dated June 21, 2024.

Operational management is carried out by the Educational and Methodological Council, which considers proposals from faculty and students. The decisions of the Educational and Methodological Council are recorded in minutes, with copies stored in the Department of Education. Risk assessment is carried out as part of strategic planning. The UMC Strategic Plan for 2024–2028 includes a SWOT analysis and identifies areas for residency improvement (HR risk management, infrastructure upgrades, and digitalization of the educational process). Information for analysis is collected through

internal monitoring, resident surveys, discussions at Educational and Methodological Council meetings, and CAD reporting (ESG II Part 1.1).

The EEC members assessed the program for monitoring the processes and results of the educational program. It was noted that the program does not have a review from external experts, as this is not required by internal regulations. Discussions of the program at the UMC meeting (minutes No. 5 of 2023) and the collection of feedback on various elements of the residency program were also noted. They also noted that the program does not have a review from external experts, as this is not required by internal regulations.

A resident survey is conducted annually. Results of a resident survey conducted by the Department of Education at the end of 2025 revealed that residents understood the program's goals and objectives (8.42), felt sufficient responsibility for manage a patient (8.13), and received support from the Department of Education (7.69). However, key areas for improvement were identified: the effectiveness of educational activities—the journal club (6.95) and lectures (6.84)—was rated relatively low, as were knowledge assessment methods, including summative and formative assessment (6.27 each) and the skills log (6.38). Furthermore, low scores for access to a simulation room (6.24) and physician engagement in training (6.95) indicate the need to develop practice-oriented learning methods and increase interaction with clinical supervisors. Overall satisfaction with the program was 7.11, indicating potential for systemic improvement of the educational environment.

Based on the 2025 survey, 43 graduates from various fields participated. 56% were satisfied, 34% were partially satisfied, 2% were dissatisfied, and the rest were undecided. Regarding "UMC Image and Reputation," almost half (49%) believe UMC's reputation contributed to their employment, 29% noted a minor impact, and 22% saw no impact. Meanwhile, 68% of graduates are willing to recommend UMC to their friends, with 12% saying they would definitely recommend it first.

The presented results of the faculty survey demonstrate an overall high rating for the organization and content of the residency educational programs. Respondents rated residents' provision of necessary patient profiles (average score of 9.60), access to current literature (9.90), and the effectiveness of practical skills (9.40) and journal clubs (9.13) as the highest. A clear understanding of rotation goals and responsibilities also received a high score (9.30). However, areas for improvement were identified: relatively low scores were noted for resident independence in working with patients (6.70), access to computer programs (7.90), and especially access to the simulation room (6.40). Furthermore, there was variability in ratings for faculty time and motivation for teaching (8.20) and resident engagement (8.50), indicating the need for additional work to maintain engagement on both sides **(ESG II Part 1.9).**

Program evaluation takes into account the goals and objectives of the training, as well as the intended learning outcomes (through resident assessments and final examinations). The implementation of the educational program is assessed through feedback from residents and faculty, as well as graduate achievements.

Therefore, stakeholders are involved in the program's monitoring and evaluation activities **(ESG II Part 1.9).**

At the same time, key competencies in the curriculum and syllabi should include professional competencies, with their acquisition distributed across years and relevant disciplines. Mechanisms for objectively assessing all aspects of residents' performance, especially independent work, must be ensured. To ensure objective, transparent, and accurate assessment of residents' knowledge and skills, the pedagogical competencies of clinical supervisors must be improved and deepened.

Residents and residency program graduates are informed of the clinical practice assessment results through assessments by the Resident Clinical Competency Assessment Committee and through announcements at clinical practice assessment meetings via the corporate network. Therefore, all stakeholders are informed of the monitoring and feedback results, as are those responsible for resident admissions and educational program planning. Feedback results and the "360-Degree Analysis" are discussed at clinical practice assessment meetings, and decisions are

made on further corrective actions. Clinical practice assessment members include department heads, key residency officials, and, depending on the agenda, other stakeholders may be invited.

Interviews with 10 employers were conducted online and included questions such as: knowledge of the university's mission, participation in developing the mission and strategic plan proposals, participation in advisory bodies, satisfaction with residents' basic knowledge and skills, participation in resident training through supervising, providing the department and residents with the necessary resources for practical training and the development of medical judgment, issues of interaction with departments and universities in general, 100% employment of residency graduates, and more.

During interviews, employers rated graduates' qualities as strong practical skills and theoretical knowledge in working with patients. There were no negative comments. The employment rate over five years was 100%.

Resident and graduate performance are indicators of the quality of educational programs. The final assessment results for residents in various specialties in 2025 show the following: only positive ratings. The average completion rate of final assessments by UMC residents is also comparable to other organizations in the country providing educational services for residency programs.

During the visit and discussions with residents, faculty/supervisors, EEC members noted sufficient progress in the clinical training of residents in acquiring practical skills. No deficiencies were identified.

The training and monitoring of residents is primarily focused on the staff of the Department of Education, so information on the clinical practice assessment results of residents and graduates is immediately reported to the responsible officials of this department. A. A. Syzdykova, Director of the Department of Education, is responsible for all residency programs.

To improve the educational process, the Department of Education organized the necessary master classes for supervisors to enhance pedagogical competencies, and an application was submitted to purchase the Platonus software for the comprehensive automation and management of the educational process.

The educational organization initiates procedures for regularly reviewing and updating the organizational structure through the reallocation of resources. Funding for changes is provided upon submission by relevant departments and approved by the Foundation's Board.

Based on the analysis of interim assessment results, student surveys, clinical site reports, and internal audit, the Educational and Methodological Council (EMC) initiates adjustments to the program structure, approaches to knowledge assessment, and the organization of the educational process. Changes are documented in educational and methodological materials approved by the EMC. The latest version of the requirements is set out in UMC Instruction No. 2 dated February 19, 2025.

The resident portfolio form was approved by the Rules for the Organization of Residency Educational Programs of the University Medical Center Corporate Foundation and Educational Programs of the Nazarbayev University School of Medicine dated June 3, 2024. The experts reviewed the portfolios of three neonatology residents.

The educational program update process is based on the results of formative and summative assessments, the residents' practical skills log, and the 3600 analysis **(ESG II Part 1.10).**

7.2 Patient safety

A quality assurance system has been implemented, including resident error analysis and patient safety assurance, and is reflected in the Informed Consent and Privilege Sheet. Resident error analysis is the responsibility of the clinical supervisor. At each CF “UMC”, the internal quality assurance system is coordinated by the Quality Management and Patient Safety Department, led by the Deputy Director for Quality Management and Patient Safety, whose responsibilities include planning and coordination, management system improvement, service quality improvement, and

internal audits. JCI international accreditation confirms that the clinical facilities and equipment meet international standards. Residency program management (CAD, UMC, and the Department of Education) monitor the clinical activities of residents based on their Privilege Sheet, which is reviewed at least annually. Incidents, errors, and patient or employee complaints recorded through the internal monitoring system may serve as grounds for review.

Joint liability of clinical supervisors for resident errors is enshrined in the Rules for the Organization of Residency Educational Programs at the CF "UMC".

Conclusions of EEC by criteria. Comply with 10 standards: 9 - fully, 1 - partially, 0 - not compliat

Standard	Standard implementation	Recommendations for improvement
7.1.1	Partially implemented	To improve the feedback system through regular monitoring and analysis of data reflecting the specifics of specialties and use the results of surveys of all stakeholders to improve educational programs.

Standard 8: GOVERNANCE AND ADMINISTRATION

8.1 Governance

Based on the self-report and the results of the visit to the UMC Foundation, it was established that postgraduate medical education at this organization is managed by the Department of Education, a structural subdivision of the Foundation. Its activities are governed by the Regulation on the Department of Education (approved by Resolution No. 11 of the UMC Foundation Board dated August 1, 2023). The Department coordinates educational activities, plans and organizes the implementation of postgraduate education programs (including residency), monitors their quality, develops regulatory documents, and participates in the accreditation of the organization as an educational institution. The Director of the Department of Education is personally responsible for the implementation of these objectives. The department's structure and staffing levels are approved in accordance with the Foundation's organizational structure.

Residency program directors report to the Department of Education. They organize rotations, implement curricula, conduct resident assessments, and facilitate communication with clinical departments. Management is carried out through approved documents (Residency Program Management, Individualized Program Management), syllabi, privilege sheets, rotation schedules, and duty rosters, which are coordinated in accordance with established procedures.

The Department of Education is also responsible for supervising. The supervising system is managed through the appointment of supervisors by order of the CF "UMC" management, upon recommendation by program directors. The Department of Education is responsible for selecting clinical training sites and concluding contracts with them. Residency matters fall under the purview of the Deputy Chairman of the CF "UMC" Board. The Department of Science and Education is responsible for the organization of residency programs. The Department reports to the Deputy Chairman of the Board.

Experts examined the strategic development plan for the period 2024-2028, which identified four development goals, including talent attraction, equal access, professionalism and ethics, and graduate development.

During the evaluation of the Department of Education's annual reports, the EEC members concluded that work is being conducted in several areas, including the development of clinical supervisors, research, and clinical work. Resident physicians and the achievement of intended learning outcomes in the residency program are assessed through final state certification in accordance with the Rules for the Organization of Residency Educational Programs at the CF "UMC", approved by Resolution No. 9 of the CF "UMC" Board of Directors dated June 3, 2024.

At the CF “UMC”, the procedure for admitting applicants to residency is established in accordance with the Model Rules for Admission to Training of Educational Organizations Implementing Higher and Postgraduate Education Programs, approved by Order No. 600 of the Minister of Education and Science of the Republic of Kazakhstan dated October 31, 2018, Order No. RK MOH-270/2020 of the Minister of Health of the Republic of Kazakhstan dated December 15, 2020, and the State Educational Standard of the Republic of Kazakhstan – 2022 on residency. The assessment of resident physicians and the achievement of the intended learning outcomes in the residency program is carried out on the basis of the final state certification in accordance with the Rules for the Organization of Educational Residency Programs of the CF “UMC”, approved by Decision of the Board of the CF “UMC” No. 9 dated June 3, 2024.

The neonatology residency program is provided with relevant educational and methodological documents and instructors.

Upon completion of training and successful completion of state certification, graduates of the neonatology residency program at the CF “UMC” are awarded a residency completion certificate conferring the qualification of "pediatrician." This certificate is signed by the chairperson and secretary of the State Certification Commission, as well as the head of the CF “UMC”, both of which are recognized by national authorized healthcare authorities.

Therefore, the educational organization complies with the recommendations of national authorized bodies, including the Ministry of Science and Higher Education of the Republic of Kazakhstan and the Ministry of Health of the Republic of Kazakhstan, and is in accordance with the residency specialty classifier (On approval of the nomenclature of specialties and specializations in healthcare, the nomenclature and qualification characteristics of healthcare worker positions. Order of the Minister of Health of the Republic of Kazakhstan dated December 21, 2020, No. KR DSM-305/2020).

8.2 Shared governance

The duties and powers of the CF “UMC” in relation to the educational program for residency specialties are regulated by the current legislation of the Republic of Kazakhstan and the internal regulatory documents of the CF “UMC”.

Management of the educational process, including at the postgraduate level, is carried out in accordance with the organizational structure of the CF “UMC”. The governing body of the CF “UMC” is the Management Board (http://umc.org.kz/about/pravlenie/), the Chairman is Doctor of Medical Sciences, Yu. V. Pya. The Chairman of the Management Board of the UMC Foundation is appointed to and dismissed from office by the Board of Trustees and bears personal responsibility for the financial and economic activities, the safety of the property of the CF “UMC”, for organizing the fight against corruption, establishes the competence of the Deputy Chairmen of the Management Board and other senior employees of the CF “UMC”, independently resolves all issues related to the activities of the CF “UMC” in accordance with its competence defined by the legislation of the Republic of Kazakhstan and the Charter of the CF “UMC”. Residency issues are under the supervision of the Deputy Chairman of the Management Board of the CF “UMC”. The Education Department is responsible for organizing the residency programs. The Department reports to the Deputy Chairman of the Management Board.

This educational organization defines the responsibilities and obligations of management and staff for postgraduate medical education. These responsibilities are assigned to the Department of Education and are codified in the document "Rules for the Organization of Residency Educational Programs of the University Medical Center Corporate Fund and Educational Programs of the Nazarbayev University School of Medicine" dated June 3, 2024. The Department of Education is responsible for the direct organization and support of the educational process for resident physicians, overseeing the educational and methodological support of educational programs, and implementing a competency-based medical education model.

Upon review of the documents, it was established that the educational process at the CF "UMC" is regulated by the working curriculum for each specialty, the academic calendar, the class schedule, and the resident physician's individual educational plan. The organization of education in the departments is assessed through systematic monitoring by the Department of Education.

To effectively manage the educational process and ensure the successful implementation of medical education, the CF "UMC" has established an Educational and Methodological Council, approved by order No. 10 of the Deputy Chairman of the Board of the CF "UMC" dated June 21, 2024. The EMC is the primary advisory body on matters of educational, methodological, and organizational support for the educational process at the CF "UMC" (clause 1.3 of the Regulation on the EMC of the CF "UMC").

The educational organization evaluates the management of the educational process and staff in relation to the achievement of the residency program mission, expected learning outcomes through feedback with residents and faculty (see section 7.2 of the report), questionnaires, and 3600 assessments.

In response to the survey question "Do the organization's management listen to your opinion regarding issues related to the educational process, research, and clinical work?", 70.59% of teachers answered that they do so systematically, 17.65% answered "sometimes," 5.88% "quite rarely," and 0% "never."

Funding for residency programs is provided by the educational institution's budget and through grants from the Ministry of Health of the Republic of Kazakhstan and local executive bodies. The department responsible for planning and distributing funds for residency programs is the financial and economic department.

Today, experts are confident that the educational institution is financially and organizationally sustainable, as its research centers have the modern facilities necessary for providing treatment and diagnostic services to the population.

8.3 Postgraduate doctor and staff representation

The main governing body is the UMC, which includes faculty, residents, representatives of clinical departments, and representatives of the Nazarbayev University School of Medicine. The council meets at least six times a year, making decisions on curricula, assessments, and updates, which are documented in minutes and orders. Residents and faculty actively participate in discussing curricula and analyzing survey results. Residents participate in developing duty rosters, coordinating research topics, and scheduling educational events (such as the journal club), which are reflected in regulations and instructions.

The effectiveness of the participation system is documented: changes to curricula based on feedback, UMC protocols, and survey reports.

During the visit, it was confirmed that the CF "UMC" has a resident development program that includes assessment of clinical competencies, formative, and summative knowledge assessment. In addition, the provisions provide for the right of the resident to be involved in research projects and to represent the interests of students through feedback and meetings with the participation of program managers and the structural unit.

8.4 Administration

The EEC member noted that the administration and management of the educational process as a whole and the residency program in Neonatology are conducted through regular assessments of the adequacy of administrative staff and budgetary support for residency programs, regulated by the internal quality management system (QMS) policy, which complies with the principles of ESG II Part 1.9. The results demonstrate achievements such as the high demand for residency graduates in the medical services market (ESG II Part 1.9). At the same time, during interviews with Department

of Education employees, a shortage of managers implementing the educational process in the residency was mentioned.

Conclusions of EEC by criteria. Comply with 8 standards: 7 - fully, 1 - partially, 0 - not compliat

Standard	Standard implementation	Recommendations for improvement
8.4.1	Partially implemented	In order to optimize educational activities and ensure effective and systematic methodological support for the process, it is necessary to provide for the allocation of positions for managers and methodologists implementing residency training.

CONCLUSION: During the external assessment of the educational programme, it was determined that 104 of the 109 standards for accreditation demonstrated full compliance. 5 standards were partially implemented. No non-compliance with the standards was identified.

5. Recommendations for improving the educational programme for residency specialty 7R01108 "Neonatology"

Standard	Implementation	Recommendations for improvement
2.6.1	Partially implemented	To ensure that postgraduate doctors achieve the established learning outcomes, improve the learning path in accordance with regulatory documents (credit ratio), the curriculum and the level of medical care (i.e., take into account primary, secondary and tertiary).
3.1.2	Partially implemented	It is recommended to optimize the existing scoring matrix with clear criteria, standardized observation formats and regular application, which will allow for the transformation of individual good practices into a sustainable quality control mechanism. Implement an electronic journal.
5.3.3	Partially implemented	To align with current international trends in postgraduate doctor training, it is recommended to expand the development of supervisors' pedagogical skills - feedback techniques, coaching, facilitation and assessment tools - to provide a more complete programme and enhance the effectiveness of learning.
7.1.7	Partially implemented	Improve the feedback system through regular monitoring and analysis of the data obtained, reflecting the specifics of specialties and use the results of the survey of all stakeholders to improve educational programmes.
8.4.1	Partially implemented	In order to optimize educational activities and ensure effective and systematic methodological support for the process, it is necessary to provide for the allocation of positions for managers and methodologists implementing residency training.

6. Recommendations to ECAQA Accreditation Council

The EEC members established the compliance of the residency educational programme in the specialty 7R01108 "Neonatology" with the Standards for accreditation and came to a unanimous opinion to recommend that the ECAQA Accreditation Council accredit this programme for a period of 5 years.

	Full name
Chairperson	Morenko Marina Alexeyevna
International expert	Yanchev Yavor Petkov
Academic expert	Madyarov Valentin Manarbekovich,
Academic expert	Yessenkulova Saule Askerovna
Academic expert	Abeuova Bibigul Amangeldiyevna
Academic expert	Tashenova Gulnara Talipovna
Academic expert	Talkimbayeva Nailya Anuarovna,
Academic expert	Izbassarova Akmaral Shaimerdenovna
Academic expert	Salimbayeva Damilya Nurgaziyevna
Academic expert	Rustembekkyzy Zhansaya
Employer expert	Tugelbayeva Kyzylgul Alimovna
Student expert	Makhmutov Timur Nurzhanovich

6. Рекомендация Аккредитационному совету ЕЦА

Члены ВЭК пришли к единогласному мнению рекомендовать Аккредитационному совету аккредитовать образовательную программу **7R01108 «Неонатология» Корпоративного фонда «University Medical Center»** на период 5 лет.

Председатель ВЭК	МОРЕНКО МАРИНА АЛЕКСЕЕВНА	
Международный эксперт	ЕНЧЕВ ЯВОР ПЕТКОВ	
Международный эксперт	АХВЛЕДИАНИ ЛЕЙЛА ТЕЙМУРОВНА	
Академический эксперт	МАЛЬЯРОВ ВАЛЕНТИН МАНАРБЕКОВИЧ	
Академический эксперт	ЕСЕНКУЛОВА САУЛЕ АСКЕРОВНА	
Академический эксперт	АБЕУОВА БИБИГУЛЬ АМАНГЕЛЬДИЕВНА	
Академический эксперт	ТАШЕНОВА ГУЛЬНАРА ТАЛИПОВНА	
Академический эксперт	ТАЛКИМБАЕВА НАЙЛЯ АНУАРОВНА	
Академический эксперт	ИЗБАСАРОВА АКМАРАЛ ШАЙМЕРДЕНОВНА	
Академический эксперт	ИВАНЧЕНКО НЕЛЛЯ НИКОЛАЕВНА	
Академический эксперт	КАБИЛДИНА НАЙЛЯ АМИРБЕКОВНА	
Академический эксперт	САЛИМБАЕВА ДАМИЛЯ НУРГАЗИЕВНА	
Академический эксперт	РУСТЕМБЕККЫЗЫ ЖАНСАЯ	
Эксперт-работодатель	ТУГЕЛЬБАЕВА КЫЗЫЛГУЛЬ АЛИМОВНА	
Эксперт- докторант	ЫҚТИЯРОВ АЯЗ ОБДРАХЫМҰЛЫ	
Эксперт- резидент	МАХМУТОВ ТИМУР НУРЖАНОВИЧ	

Приложение 1.

Профиль качества и критерии внешней оценки образовательной программы резидентуры по специальности 7R01108 «Неонатология» (обобщение)

Стандарт	Критерии оценки	Количество стандартов	Оценка		
			Полностью соответствует	Частично соответствует	Не соответствует
1.	МИССИЯ И ЦЕННОСТИ	6	6		-
2.	ОБРАЗОВАТЕЛЬНАЯ ПРОГРАММА	28	27	1	-
3.	ОЦЕНКА РЕЗИДЕНТОВ	15	13	1	-
4.	РЕЗИДЕНТЫ	19	19		-
5.	ПРЕПОДАВАТЕЛИ И КЛИНИЧЕСКИЕ НАСТАВНИКИ	8	7	1	-
6.	ОБРАЗОВАТЕЛЬНЫЕ РЕСУРСЫ	15	15		-
7.	ОБЕСПЕЧЕНИЕ И УЛУЧШЕНИЯ КАЧЕСТВА ПОСЛЕДИПЛОМНОЙ ПОДГОТОВКИ	10	9	1	-
8.	УПРАВЛЕНИЕ И АДМИНИСТРИРОВАНИЕ	8	7	1	-
	Всего:	109	104	5	-
			109		

Приложение 2

Список документов, изученных членами ВЭК в рамках проведения внешней оценки образовательной программы резидентуры по специальности 7R01108 «Неонатология»

№	Наименования документов/дата утверждения
1.	Стратегия НУ на 2025-2030
2.	Кодекс этики от 8 июня 2021 г (сайт НУ)
3.	ОП резидентуры по специальности 7R01108 «Неонатология»
4.	Силлабус «Неонатология» 1 год обучения, 23-24 гг
5.	Силлабус «Неонатология» 2 год обучения, 23-24 гг
6.	Силлабус «Неонатология» 1 год обучения, 24-25 гг
7.	Расписание «Неонатология» 2024-2025 1 год
8.	Расписание «Неонатология» 2023-2024 2 год
9.	Расписание Неонатология 2022-2023 1 год
10.	РУПл «Неонатология» 2021-2023
11.	РУПл «Неонатология» 2022-2024
12.	Шаблон Суммативная оценка
13.	Шаблон Формативная оценка
14.	Сертификаты повышения педагогических компетенций «Образовательные технологии в резидентуре. Доверенная профессиональная деятельность» Абентаевой Б.А.
15.	Сертификаты повышения педагогических компетенций «Образовательные технологии в резидентуре. Доверенная профессиональная деятельность» Чарипова Г.С.
16.	Правила организации образовательных программ резидентуры Корпоративного Фонда «University Medical Center» и образовательных программ Школы медицины «Назарбаев Университет» от 3.06.2024
17.	Приказ Об организации проведения обучения «Компетентностная модель «Эффективный преподаватель UMC»
18.	Приказ Об организации и проведении семинара «Образовательные технологии в резидентуре. Доверенная профессиональная деятельность»
19.	Приказ Об организации и проведении стажировки по теме «Методология создания цифровых занятий в последипломном медицинском и фармацевтическом образовании»
20.	Приказ О проведении цикла повышения квалификации по теме «Методология разработки образовательных программ, ориентированных на результат»
21.	Приказ Об организации и проведении семинара по теме «Методология и образовательные технологии в резидентуре»
22.	Приказ Об организации и проведении семинара по теме «Образовательные технологии. Оценка резидентов»
23.	Приказ О проведении семинара-тренинга «Методология разработки экзаменационного материала (тестовые вопросы и клинические сценарии) для оценки ключевых компетенций обучающихся, выпускников образовательных программ по направлению подготовки здравоохранения и специалистов в области здравоохранения»
24.	Правила приема в резидентуру КФ «UMC» от 8.04.2024