A Guide

for

Accreditation of Medical Colleges,

Iraq

By

The National Council For

Accreditation of Medical Colleges

(NCAMC)

2024

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Preface of the *3rd. edition*

The 2024 edition was released after the NCAMC was granted WFME recognition in February 2024. The council met 17 out of 20 WFME criteria. Since then, the Council has been diligently working to address gaps and enhance the quality of its operations. This updated edition was made based on feedback and recommendations from WFME experts. It included the following changes:

- Activating students' roles in SAS subcommittees and site visits.
- Updating the eligibility policy and procedures.
- Updating the evaluation methods.
- Updating the post-accreditation process.

After receiving the ministerial approval, the policies and procedures for students' roles in the accreditation process were posted on the website. (http://ncamc-iq.org/upload/3131197302.pdf). Students' role will include their representation in the NCAMC, active participation in the SAS subcommittees, and the site visit.

Updating the eligibility policy and procedure: When a college applies for accreditation, it must submit the SAR with its related documents as well as a filled eligibility form. Then the NCAMC appoints a committee of three members (EEC) to examine the Self-Assessment Report (SAR) and related documents. The committee will decide on the college's eligibility within two weeks. Additionally, details such as plagiarism have been incorporated into the template (http://ncamc-iq.org/upload/3222673131.pdf).

The most recent update in the college evaluation steps occurs after receiving the report from the national assessors' team. The report is sent back to the college to correct any factual errors, with an emphasis on maintaining the confidentiality of the report. (http://ncamc-iq.org/?page=43).

An important step in updating the colleges' follow-up policy and procedures during the post-accreditation period involved updating the follow-up and progress reports (http://ncamc-iq.org/?page=43). Proposals and regulations were also submitted to the Ministry for colleges that either do not obtain accreditation or have their accreditation withdrawn. (http://ncamc-iq.org/upload/3288137318.pdf , *page 31*).

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June 2024

Preface of 1st. edt.

Accreditation is a step in the process of quality development that determines whether a program meets established standards for function, structure, and performance. The accreditation process enhances institutional and program improvement and provides assurance to patients, employers, students, and faculty that a program meets national and community needs, complies with relevant Iraqi guidelines and regulations, and has comparability to international standards. It allows the identification of areas of good practice that may be shared and areas that need to be modified in order to meet the required standards. The process of accreditation encourages and supports continuous quality improvement and will allow the development of a culture in medical colleges that will sustain improvement. It also determines whether the quality of medical education meets the standards completely, partially, or not.

Accreditation of medical colleges is normally carried out by national governments, or by national agencies receiving their authority from the government. The National Council for Accreditation of Medical Colleges (NCAMC) was established in February - 2015 as an expansion of The National Committee for Accreditation of Medical Colleges in Iraq. It receives its authority from the Ministry of Higher Education and Scientific Research to become the formal reference to academic accreditation in Iraq based on the standards stated in the Iraqi National Guideline on Standards for Establishing and Accrediting Medical Colleges (INGSEAMC).

The National Standards for Accreditation of Medical Colleges (NSAMC) were reviewed several times and were updated lastly according to WFME 2018. It addresses all aspects of the college including the: mission and outcomes; educational program; student assessment; program evaluation; students; academic staff; educational resources; governance and administration; and continuous renewal.

The first step in the accreditation process is the self-assessment study (SAS) during which a medical college undertakes a self-evaluation in relation to compliance with the required standards and gathers the supporting documentation. ‘From this process’ The College will identify its strengths and areas where more development needs to be carried out and produce an action plan for further work. The college can request a peer review visit at any stage during the process of SAS. This is an optional advisory visit, to assist the college and to collect information that will be of assistance to other colleges as they undertake their own self-

evaluations and prepare for an accreditation visit.

The last step is to conduct a site visit for evaluation and, thereafter, the final decision for accreditation.

Comprehensive guidance on the purpose, structure, and outcomes of the accreditation process are detailed in the document **"A Guide for Accreditation of Medical Colleges"**. This new edition 2022 is modified in the light of accreditation visits and reports and further discussions with stakeholders. The document has been written by members of the NCAMC based on their acknowledged expertise with input from the advisory board's members namely, Prof. Nigel Bax, Prof. Ghanim Alsheikh, Prof. Mohammed AlUzri. So, on behalf of the NCAMC's members, we dedicate this book to the Iraqi Medical Colleges, wishing them all the success and prosperity.

Prof. Yusra Abdul Rahman Mahmood
President of The NCAMC
MOHESR - Iraq
Oct. / 2018

History of NCAMC Establishment

In Iraq, there are more than 30 colleges distributed all over the country. These are all public colleges, funded by the government through the Ministry of Higher Education and Scientific Research. Recently, private medical colleges have been established according to present criteria. The first public college was established in 1927 according to the British model. The rest of the colleges that have been established later followed the same subject-based model. National medical colleges worked jointly with international medical colleges at the start. Then with the development of national staff, the role of international staff became less. Political transitions in Iraq played a role in this change. Cooperation did not stop, and visiting professors kept teaching and examining Iraqi medical students until the eighties of the last century. Higher education and training of most Iraqi doctors used to be conducted in the United Kingdom, the United States, and other developed countries. In the 1980s, Iraq established the Iraqi Board for Medical Specializations and participated in the Pan-Arab Board for Medical Specializations to qualify medical graduates in different specialties locally aiming at improving the health system and services. Cooperation between Iraqi medical colleges and international ones persisted in one way or another until sanctions were imposed on Iraq in 1990 by the United Nations.

Thereafter WHO represented the only source of international support for health services and medical education. This cooperation with WHO led to the introduction of the accreditation concept into medical education in Iraq in 2007 by the WHO staff during a conference of the Association of Arab Deans of Medical Colleges that was held in Damascus, Syria, and was attended by the head of the committee of Iraqi medical colleges deans Professor Hikmet A. Hatem. National efforts were initiated thereafter to increase awareness of medical faculties on the importance of accreditation and the need to accomplish it by all colleges. A milestone step in the journey was the official establishment of an accreditation committee within the Ministry of Higher Education and Scientific Research which, was affiliated with the Quality Assurance Division but the office was in Al-Nahrain College of Medicine in Baghdad. This committee was named the National Accreditation Committee of Medical Colleges in Iraq (NACMCI) and included thirteen members, two of them from the Ministry of Health. Liaison committees also were established in each of the medical colleges in Iraq where all of them were affiliated with NACMCI. Many scientific activities have been conducted since in collaboration with WHO. These activities included workshops, conferences, and panel discussions inside Iraq and in nearby Arab countries like Bahrain and Jordan. Members of NACMCI and liaison committees participated in these activities. Most of these activities have been funded by WHO. The events covered variable aspects of accreditation theory and practice.

Another milestone in the accreditation process in Iraq was the formulation of the Iraqi National Guideline on Standards for Establishing and Accrediting Medical Schools and its approval by the Minister of Higher Education and Scientific Research, Minister of Health, WHO representative in Iraq, deans of medical colleges, members of NACMCI and members of liaisons committees endorsed and signed a copy of the guideline in 2009. This has led to a series of accreditation activities including peer visits carried out by members of the accreditation committee and liaison committees. Then the accreditation committee requested

each medical college to conduct a self-assessment study, write a report, and submit the report to the accreditation committee. Most of the colleges responded and submitted self-assessment reports to the accreditation committee in 2013. Those reports varied in their compliance with the Iraqi National Guideline on Standards for Establishing and Accrediting Medical Schools. NACMCI on the one hand and all the medical colleges on the other hand, were eager to carry on, but some constraints faced us all. At that time a question about who will accredit eligible colleges of medicine was raised. NACMCI needed to be approved by the minister's board; this was requested by the Ministry of Higher Education and Scientific Research in April 2010. The NACMCI wanted a more consistent accreditation decision through the participation of international experts and requested WHO for such international participation. As a result of the above constraints, the NACMCI momentum regressed, until the establishment of the Quality Assurance and Academic Accreditation Directorate within the Apparatus of Supervision and Scientific Evaluation. Important developments have been achieved, including establishing the National Council for Accreditation of Medical Colleges (NCAMC) in 2015 as a development of NACMCI. This may be considered as an evolution for more systematic work. The council through its periodic meetings prepared this comprehensive guideline book. The NCAMC will work on accrediting Iraqi Medical Colleges; as well as doing its best to achieve WFME recognition.

The ultimate result of all these efforts will be fulfilling community health needs through the provision of safe and equitable healthcare services.

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NCAMC member
Sep.2022

List of Abbreviations

CME	Continuous Medical Education
CPD	Continuous professional development
CV	Curriculum Vitae
DC	Data Collection
EC	Entrance Conference
EEC	Eligibility Evaluation Committee
FAIMER	Foundation for Advancement of International Medical Education and Research
FF	Fully Fulfilled
HC	Head Committee
MOHESR	Ministry Of Higher Education and Scientific Research
MO	Mission, Objectives
NACMCI	National Accreditation Committee of Medical Colleges in Iraq
NCAMC	National Council for Accreditation of Medical Colleges
NF	Not fulfilled
NSAMC	National Standards for Accreditation of Medical Colleges
PHCC	Primary Health Care Center
PF	Partial Fulfilled
POA	Plan Of Action
QA	Quality Assurance
Ques	Questionnaire
SAS	Self-Assessment Study
SC	Subcommittee
SAR	Self-Assessment report
StC	Steering Committee
SVT	Site Visit Team
SWOT	Strengths, Weaknesses, Opportunities, Threats
SCR	Subcommittee report
TFS	Task Force Subcommittee
WFME	World Federation for Medical Education

- CHAPTER ONE -

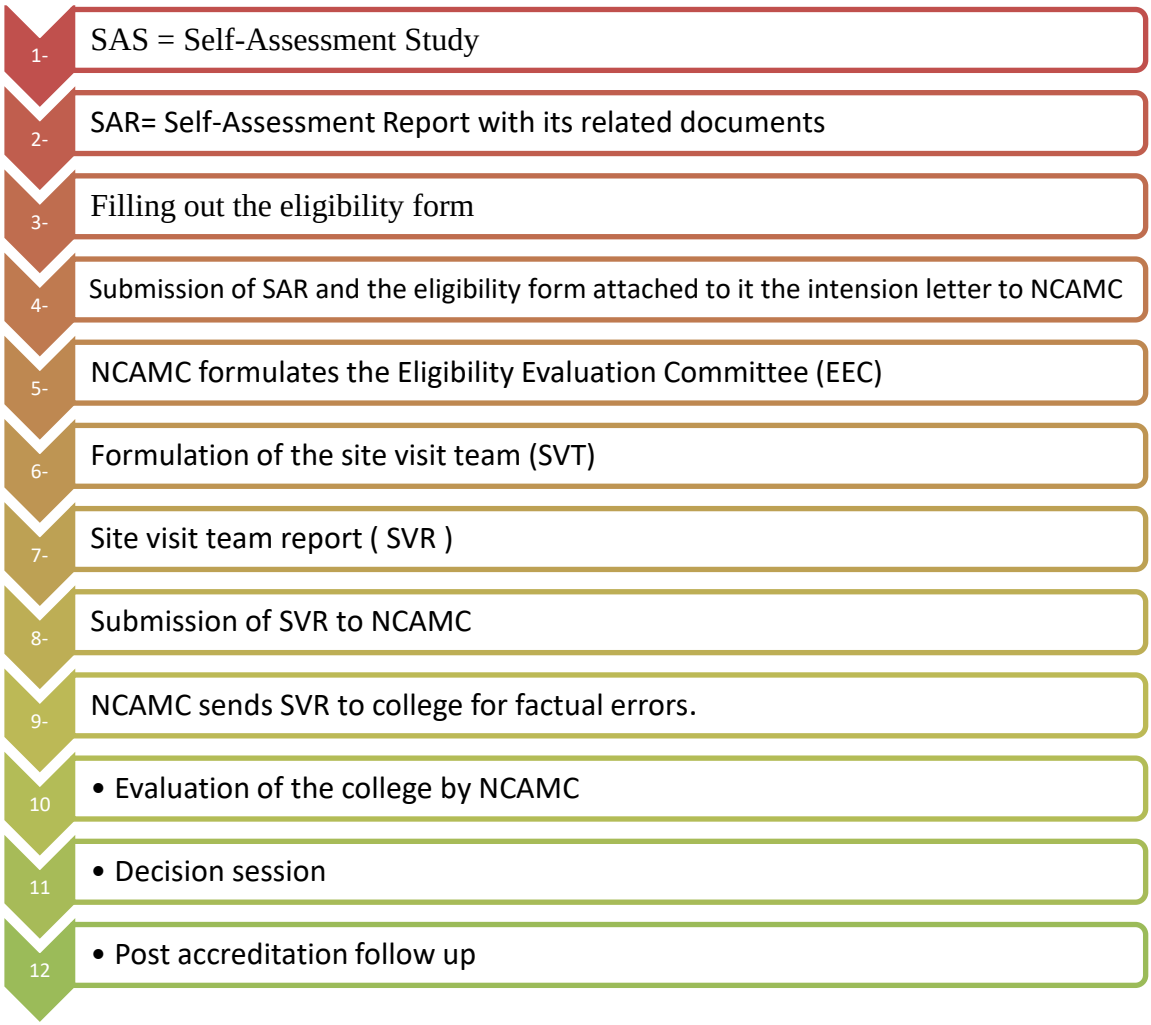
Guidance

1. This book is the official reference for medical colleges, which are on the way to achieving accreditation.
2. Accreditation is mandatory, as it ensures better outcomes by continuous maintenance of the stated national standards.
3. The medical colleges must adopt and fulfill the "National Standards for Accreditation of Medical Colleges' stated by the NCAMC.
4. The "Iraqi Guide of Accreditation for Medical Colleges" is there to demonstrate the whole accreditation process and to guide medical colleges through its steps.
5. The first step of this process is conducting a "Self-Assessment Study" followed by writing a "Self-Assessment Report" (SAR) and properly indexed documents.
6. The college must write the report (SAR) in a clear and simplified way, and at the same time, in detail and reflect reality, and give logical justifications in the events that a standard is not achieved.
7. The college must fill out the eligibility form (http://ncamc-iq.org/upload/3222673131.pdf) and submit it with the SAR and its related documents to the NCAMC.
8. The NCAMC formulates an eligibility evaluation committee (EEC) to decide whether the college is eligible or not for submission to the accreditation process, according to certain criteria.
9. If the college is eligible, NCAMC will assign the Site Visiting Team (SVT) to study these documents, conduct the "Site visit" and report findings along with the necessary documents to the NCAMC.
10. Before the Council begins the evaluation process, it re-sends the report (SVR) to the college to correct factual errors, if any, with an emphasis on maintaining the confidentiality of the report.
11. If there are no factual errors, then the NCAMC will review the documents from both sides, the college and the SVT, and start the "Decision Making" process.
12. On fulfilling the national standards, the medical college will have the license of "Full Accreditation" that will be valid for 6 years. Otherwise, conditioned accreditation or "denial or non-accreditation may be decided.
13. It is allowed for a complaint to be presented by internal (NCAMC's staff) or external (higher education institutions, local community, private sector, or

others) bodies according to certain policies and procedures. http://ncamc-iq.org/upload/3288137318.pdf . page 32

14. It is allowed for the medical college to "Appeal" on the Council's decision. The already assigned committee by the NCAMC will investigate and report its decision to the NCAMC for approval. This decision is considered final.
15. Accreditation is a continuous process maintained by regular progress report(s) according to certain policy (http://ncamc-iq.org/upload/2939276341.pdf).

Steps of the accreditation process



CHAPTER TWO -
Self-Assessment Study (SAS)

The SAS exercises and procedures are a diagnostic, participatory, and planning project for the continuous quality improvement of all aspects of the college including the input, process, and outcomes. The preparation at the college level forms the cornerstone of the process of national accreditation.

This will provide the opportunity for the medical Colleges to show compliance with the National Standards and to set an action plan for maintenance and improvement aiming at better outcomes.

In summary the SAS:

- Must take the National Standards as a benchmark.
- Aims to document college achievements regarding the NSAMC with periodic reviews and updates.
- Is to be periodically reviewed and updated by the medical college .
- Must be guided by the highest authorities within the college (the dean and college council).
- Needs given preparations, like well-designated committees, awareness campaigns, and well-indexed documents.
- Documentation and involvement of the stakeholders.
- Must be preceded by stakeholders' comprehensive awareness of the NSAMC and of this book (Iraqi Guide for Accreditation of Medical Colleges).
- Is better to be preceded by stakeholders attending related workshops and participating in the peer review visit program.
- Is ended by writing the Self-Assessment Report (SAR) and the related well-indexed documents.

College Plan of Action:

During each of the following steps, proper coherence of the documents and guides prepared by the NCAMC is a must. Furthermore, consulting the NCAMC, asking for a workshop, asking for a peer review visit, or asking for any other support is highly recommended:

First: Awareness campaigns:

These are necessary to build the capacity and capabilities of the college staff regarding accreditation. Awareness campaigns should aim to introduce concepts of accreditation and quality assurance to the stakeholders emphasizing the National Standards, accreditation guidelines, and SAS. One of the most important methods to accomplish this; is by conducting workshops, and large or small meetings with various disciplines of stakeholders. The key principle of these campaigns is the involvement of a wide range of stakeholders who are directly or indirectly participating in the process of accreditation. These meetings and workshops should explain and make it easy to understand the National Standards, because SAS is a collaborative process that requires the solidarity of all. Additionally, these activities must explain achievements, risks, challenges, opportunities, and related things within the college. Furthermore, it is useful for such campaigns to think of a reasonable distribution of posters, and booklets.

Second: Formulation of accreditation committees with definite tasks:

These committees along with their tasks should be formulated by the college council and updated as required. considering that each committee must be composed of an odd number of members. There must be a steering committee, a head committee, and subcommittees (preferably one for each area of the NSAMC).

Students play an important role in the accreditation process in general and the self-assessment study of their college in particular in terms of participation in the awareness campaign, questionnaires, feedback, and participation in writing the report, as well as their role during the visit of the national assessors' team. http://ncamc-iq.org/upload/3131197302.pdf

The formulation and tasks of these committees must be as mentioned below:

1: Steering Committee (StC):

- **a)** Dean of the College ---------- Head
- **b)** Vice Dean for Academic Affairs ---------- member
- **c)** Vice Dean for Administrative Affairs ---------- member
- **d)** Director of the Teaching Hospital ---------- member
- **e)** Representative of local government ---------- member
- **f)** Director of the University Quality Assurance Dept. ---------- member
- **g)** General director of health ---------- member
- **h)** Member of the Medical Association ---------- member
- **i)** Students' representative ---------- member
- **j)** Other experienced members according to the college need

Tasks of the Steering Committee:

1. It reports activities to the Dean and College Council.
2. Guides and leads the accreditation process at the college.
3. Manages strategic issues related to the accreditation process.
4. Suggest the formulation of the HC, and SC.
5. Provides support for the HC and SCs as needed.
6. Supports awareness campaigns about accreditation.
7. Setting the necessary schedules for achieving and monitoring related tasks.
8. Discuss and approve constructive recommendations made by the HC and SCs and follow up on their implementation
9. Discuss and approve the final SAR supported by all required documents.
10. Dispatches the final SAR to the Dean and College Council for approval.

2: Head Committee (HC) for SAS:

a) Vice-dean for academic affairs ---------- head
b) Head of medical education department /unit committee----------member
c) Head of the quality assurance unit. ----------member
d) Head/Members of department/ teaching modules --- ----------member
e) Employee representative ----------member
f) Students' representative (different levels)----------member
g) Other members according to the need----------member

Tasks of HC:

1. Reports activities to the StC
2. Suggest the members of each of the SCs
3. Set a schedule for SCs to complete their tasks
4. Directing and follow-up the SCs to perform their tasks.
5. Conduct awareness campaigns.
6. Adopt suitable research methods to collect and analyze the collected data (subjects included in the study, sampling method, and data collection tools as a distribution of questionnaires and interviews ...). Considering the “Evidence Generation Manual” stated by the NCAMC.
7. Support the SCs to overcome technical and administrative issues, in coordination with the StC and related personnel, departments, units, stakeholders … etc.
8. Held regular meetings to discuss the progress and reports’ drafts and to determine shortcomings identified by the SCs.
9. Set recommendations to face the shortcomings and propose an action plan to overcome them.
10. Prepare the draft of the SAR. This is done by discussing, amending, unifying, and approving reports’ drafts of the SCs. The HC should consider the statistical analysis and SWOT analysis to identify, the strengths, weaknesses, opportunities, and threats. This report must include a presentation of data with appropriate tables and figures aiming to show the percentage of achieving each standard of the National

Standards along with the related SWOT analysis.

11. Perfect indexing of the documents.
12. It is optional for the HC (under the guidance of the StC) to consult experts' personnel for writing the SAR or to formulate a subcommittee for this task (Report Subcommittee – RSC). The experts and\or members of the RSC should have known English writing skills and good statistical knowledge. Members from the HC must be nominated to participate in the RSC (if formulated) to facilitate communication.
13. At the end, the HC dispatches the SAR draft to the StC for approval.

3: Sub-committees (SCs) or Task Force Committees (TFCs):

a) Faculty member ---------- Head
b) Faculty members according to needs---------- member
c) Employee according to needs.---------- member
d) Students Representative (different levels). ---------- member

Tasks of the SCs:

1. Report activities to the HC.
2. Follow the directions and schedules stated by the HC.
3. Participate in awareness campaigns.
4. Study and review their task area and standards and may enlist their opinion and suggestions when needed.
5. Conduct the SAS in a given area and collect related and required documents according to the National Standards and Evidence Generation guide.
6. Adopt research methods to gather information (subjects included in the study, sampling method, and data collection tools as a distribution of questionnaires and interviews)
7. Prepare a draft of the report on that area. This report should not simply summarize or repeat the information in the documents. Instead, it should contain a thoughtful analysis of each area in the context of National Standards leading to conclusions about strengths and challenges (including potential or suspected areas where elements might be unsatisfactory). The report should include suitable recommendations and action plans to resolve shortcomings and identify problems.
8. Perfect indexing of the documents according to the National Standards

Third: Data Collection (DC):

This includes all the official administrative orders, surveys, and paperwork required throughout the process of accreditation. Additionally, it is very important to properly collect documents and generate evidence for each standard within the different areas of the National Standards considering the “Evidence Generation Guide”.

These aim to establish a database within the college which is very essential because it will document the outgrowing activities within the college, especially regarding accreditation.

Hence, proper archiving and indexing with appropriate paper and computer work are so important to collect and preserve related documents and evidence. To fulfill this task, it is better for the college to formulate instructions and administrative orders, provide necessary resources, allocate a given space, and assign one or more staff member/s for this task. The collected documents must be updated continuously by these committees and related personnel.

Well-designed tools and evidence generation are the soles of the documentation process, and the data must be collected on a research statistical basis to get fruitful results and analysis. Like all research, this needs to set objectives and methodology of data collection.

Data collection could be achieved in different ways like verification (documents, photocopies of official papers…etc.), questionnaires, and structured group discussion. This will be presented at the SAR and should be presented in a narrative descriptive manner, a percent opinion, or by other suitable forms.

Well designed and proper use of questionnaires is very useful to collect data and evidence. According to the needs, these questionnaires should be directed to different disciplines of stakeholders (faculty staff, students, graduates, training and supervising physicians, administrative staff of the university, and administrative staff of the health institutions, medical association, and representative of the community ... etc.). Considering the list of questionnaires listed in this guide and the Evidence Generation Guide.

Fourth: Data management:

Professional handling of the data is a must and is the responsibility of all committees according to their tasks. Statistical analysis must be done whenever possible. Additionally, the collected data must be well indexed to be mentioned within the SAR where they must be described in a narrative way.

Fifth: Action Plan:

The results obtained must be interpreted and discussed with stakeholders. Wide participation and transparency are essential in this step.

The college must have an achievable action plan based on the SWOT analysis. This plan must show strategies to maintain and improve strength points and strategies to overcome shortcomings and threats using the available opportunities.

The action plan must be linked to an applicable schedule that takes into consideration different aspects within that college, like the manpower, resources … etc. All these activities must be shown explicitly in the SAR demonstrating the achievements in every and each one of the recorded points.

College SAS Plan of Action (POA)
(Suggested Templates)
Template 1:

Action	1	2	3	4	5	6	7	8	9	10	11	12
Formulation of accreditation and taskforce committees												
Formulation of administrative orders												
Awareness campaigns and actions												
Performing tasks for each domain according to NSAMC												
Announce duties of committees and taskforce teams												
Taskforce actions (questionnaire, meetings, photo...etc.)												
Statistical analysis (and other) as needed												
Workshops to discuss and consolidate feedback												
Write reports about each domain by the subcommittees												
Discuss and uniform reports of the subcommittees												
Prepare the SSR along with all required documents												
Management suggestions and overcome shortcomings												
Approve the SSR by the dean and college council												
Handle to SSR to SVT on request												

CHAPTER THREE -
Self-Assessment Report (SAR)

The planning, preparation, and conduction of the Self-Assessment Study (SAS) are regarded as the foundation stone of the accreditation process which should end with writing the SAR.

To write the SAR, it is of particular importance to have an enthusiastic collaboration between a wide range of stakeholders rather than writing the SAR by a limited number of concerned college staff. These stakeholders may involve members of the accreditation committees, different scientific and administrative departments, students … etc.

The SAR should be as comprehensive as necessary and, at the same time, as brief as possible. It is to be chaptered according to this guide and the national standards of accreditation aiming to explore different aspects and activities within the college. The college should consider that improving these aspects, or at least putting a scheduled plan of improvement, is as important as writing the SAR. Furthermore, this report must be evidence-based, and the collected documents must be well indexed (standard by standard). It is a must for the SAR to mention all the Strengths, Weaknesses, Opportunities, and Threats (SWOT) rather than magnifying the achievements and ignoring the shortcomings. Of course, this should be written along with a suitable plan to maintain and improve achievements on one side and overcome shortcomings on the other side.

Who is responsible for writing the SAR?

It should be remembered that this task cannot be achieved unless so many stakeholders are involved. Primarily, members of the Head Committee or the Report's Subcommittee are responsible for writing the final SAR based on report drafts of the subcommittees, as mentioned in Chapter Two of this guide. These members must be well-oriented and have a global awareness of the activities done by their college during the SAS with good experience in related disciplines. They must be in direct contact with other members of the accreditation committees aiming to write an up to the standards, meaningful, and well-structured report. Good English writing skills are essential and consulting experts for this purpose is advised.

How to write the SAR?

To start with, there must be an applicable schedule for this task considering the available manpower, facilities, challenges ... etc. A thorough discussion of report

drafts written by the Accreditation Subcommittees is essential considering that rephrasing, restructuring, and rewriting are needed most of the time. Instead of just being descriptive of what is there in the college, it must be a narrative exploration of each area including a SWOT analysis with specified well-indexed documentation for each standard.

A- Generic structure of SAR.

One of the basic objectives of the SAR is to show the actually documented achievements of the college regarding the National Standards for Accreditation. This report needs to be comprehensive, well-structured, and informative to all stakeholders including the non-faculty community, considering that it is primarily directed to the National Council for Accreditation of Medical Colleges (NCAMC).

Although the SAR usually portrays prevailing and constraining circumstances, it should neither expect nor express great and unrealistic optimism about conditions that may modify (improve or worsen) the short-term outcomes. Instead, a feasible plan of action (in measurable scales) should be shown taking into consideration the time schedule, human resources, cost, technical limitations ... etc.

Writing the SAR requires careful documentation of the college achievements in each one of the national standards considering that this documentation, indexing, and evidence generation are essential and crucial. Considering that accreditation is a continuous process, this report must show a specified well-scheduled action plan of the college to overcome and improve shortcomings and maintain and improve achievements (SWOT analysis).

As the primary pillar of the SAS is diagnostic, the related analytical tools should be selected and used properly according to the standard. That is why showing the presence, application, and effectiveness of most of the standards requires that data and information must come from statistically representative samples of related stakeholders considering that the accreditation process requires the involvement of wide participants.

Within the SAR, a well-written and conclusive executive summary is needed (here, persons with good English writing skills are needed the most). Conclusions and recommendations emerging from SAS should focus on improvement aiming to acquire and maintain accreditation. The results of the surveys / research need to be discussed (preferably in a narrative way) and should be evidence-based. All the included information should be edited and cross-checked for consistency.

A - Points to be remembered while writing the SAR:

The SAR should be:

1. Simple, so it can be clearly comprehended without complicated jargon or sophisticated statistical and analytical methods, so the data can be easily conceived.
2. Affordable, so it does not involve using complicated and expensive tools for SAS which can cause a burden on the college.
3. Wide participation, the SAR is the end of the SAS that should be comprehensive with the participation of a wide range of stakeholders (faculty members and other college staff, Staff from the university and staff from MoH institutions, students, community … etc.).
4. Measurable, the achievements of the college for each standard and area of the National Standards must be measurable, especially those related to the action plan and SWOT analysis.
5. Flexible, so each step can be reasonably adapted according to college circumstances and can be upgraded according to future development.
6. Up to date, making use of the most available and advanced technology (within and outside the college) to preserve, present and handle related information and documents.
7. Auditing, there must be clear processes and steps for external and internal auditing and evaluation of the whole process from authorized stakeholders (ministry, university, health sector, … etc.)
8. The college must ensure originality when writing the SAR and try to avoid plagiarism. The allowed percentage of plagiarism is 20% (based on the regulation of MOHESR in the official order BT 5* / 5868 on 27 / 7 / 2015).

B - Contents of the SAR:(appendix II)

The SAR should cover the following essential content:

1. The title page:

   One page includes the title of the study, the college name and mailing address, names and affiliations of report authors, and the date of submission to the NCAMC.

The following statement is written on the first page of the report:

"All rights are reserved. This report cannot be disposed of, printed, or quoted without the college's approval. Unauthorized use is a legal violation and may result in legal action."

2. Dean's statement about the college accreditation:

One page states the vision of the college regarding accreditation and the achievement of that college in this regard. It might include a photo of the dean or the college building.

3. The Historical background of the college:

Not more than two pages stating the historical background of the college as the date of initiation, number of graduates, awards acquired ... etc. It might include a historical photo of the college or related events.

4. Acknowledgment:

One page to show and thank the efforts of the participating personnel, society groups, agencies, and others who participate in one way or another in the process of accreditation and SAR writing.

5. Summary report (executive summary):

No more than two pages including the summary of the main chapters of the report with the results concluded. It should show the methodology used.

6. The purpose of evaluation:

One page states the college's point of view about why it needs accreditation and how this report is beneficial in this regard.

7. Evaluation methodology and statistical methods:

No more than two pages show the study model and design (quantitative, qualitative, or mixed) and the reason for choosing such a design. Data collection should be described (instruments, sources, procedures, sample size and sampling techniques, and limitations). Furthermore, this section should show how data were analyzed (content analysis of qualitative data, descriptive statistics, and/or statistical tests of significance of quantitative data).

8. Discussion of the standards within each area of the National Standards:

There must be a given chapter for each area. It must be written in a narrative way and each chapter includes a background and rationale context of that area and all the standards listed considering that the numbering method used here must be identical to that of the National Standards. The results should be so clear with a logical and narrative summary (quantitative and qualitative). The use of tables and figures is preferable when appropriate (clearly labeled). The results should highlight the relevant negative as well as positive findings preparing them for analysis. There should be a clear referral of events and results to their documents (cited in the appendices). Discussing the results must be based on the three levels of achievement (i.e. I-present, II-present and applied, III-present and applied and effective) so as the citation and

appendices. College benchmarks, achievements, and shortcomings should be explained clearly with reasonable details (when needed). It is vital to do this through SWOT analysis to emphasize and enlighten the points of strength, weakness, opportunities, and threats. Furthermore, a proper action plan must be obvious to measure all actions taken by the college in this regard (maintain strength points and overcome shortcomings). Also, it is important to report how progress will be measured along with a time schedule.

9. Conclusion and recommendation:

No more than two pages. The conclusions should enumerate the summary of the SWOT analysis appropriately. Recommendations aim to facilitate future work to overcome shortcomings and maintain achievements and should be focused and have a significant impact on the process explaining how their implementation will participate in improvement.

10. Citation and Appendices:

List sources for any references made in the stem of the report to relevant theories, research, or data from other sources. Include tables, figures, graphs, charts, questionnaires, photos ... etc. that is relevant and explanatory. The appendices could be ; at the end of its related chapter , at the end of the SAR, or could be in the isolated booklet with proper referral to the SAR stem. Indexing should take into consideration the list of standards and how they are discussed in the stem of the SAR.

11- Layout of the SAR

- The page layout should be one inch adjusted throughout.
- The font size of the stem is 12 points, Times New Roman, adjusted. Titles will be CAPS and bold. Subtitles will be bold with CAPS of the initials only.
- Carefully check the quality of all images, tables, and scanned copies. Scanners may produce distortions, low contrast, or crooked pages. Be sure that the originals are of high resolution for quality reproduction.
- After the entire report has been completed and assembled, put page numbers in the bottom center of each page, including appendices. Number the pages of the report consecutively and do not number each section separately.
- Place the Table of Contents (including that for the appendix) immediately after the title page. These pages should be numbered in lowercase Roman numerals in the bottom center of the page (see the Site-visit report template).

- Please use common style conventions: The word "dean" is not capitalized except when it begins a sentence. The same is true for the vice dean, president, and so on. The words “medical”, “college” and “university” are not capitalized unless they begin sentences or are used as the college’s full name (such as Baghdad Medical college). The word "faculty" is not capitalized unless it begins a sentence or is the Iraqi equivalent of school, e.g., "The president intends to allocate more funds to the Baghdad Faculty of Medicine for laboratory construction." Discipline names (e.g., "Physiology," "Biochemistry," "Medicine,") are capitalized when they refer to departments. Note that "department" is not capitalized unless it is used with reference to a specific discipline, as in the "Department of Medicine”. Capitalize the names of formal college committees and subcommittees (e.g., Committee on Educational Policy), but do not capitalize the committee if the formal name is not used and the committee is referred to just by function (e.g., curriculum committee).
- Before submitting the report, carefully proofread it to correct spelling, typographical, grammatical, and punctuation errors.

- CHAPTER FOUR –
Evidence generation

Refer to the “ manual for self-assessment study, evidence generation” for detailed information. (http://ncamc-iq.org/upload/3376167029.pdf)

CHAPTER FIVE-
Accreditation site visit

When the National Council for Accreditation of Medical Colleges (NCAMC) receives the Self-Assessment Report (SAR) and related documents from the college, it will assign a team of assessors "The Site Visiting Team (SVT)" according to the given criteria to take over the evaluation process for that college. The SVT has three main tasks throughout this process that will be guided by the NCAMC, these will be:

- To study the SAR and related documents to have a comprehensive awareness of the college regarding the National Standards of Accreditation,
- To conduct a "Site Visit" to that college for verification. This should focus on given areas and standards that need further investigation,
- To report to the NCAMC with a report (SVR) and all the related documents that must be well indexed according to the SVT activity and observation.

The Site Visit which lasts for 3-5 working days will be considering the following concepts:

First\\ The Medical College:

1. The college must conduct a Self-Assessment Study (SAS) guided by the National Standards and culminated by writing the Self-Assessment Report (SAR) including all the required (indexed) documents as mentioned in this guide. These must be officially handed to the NCAMC in two forms hard and electronic copies.

2. The college is informed about the SVT members and has the right to report feedback to the NCAMC in case of the presence of any conflict of interest (http://ncamc-iq.org/upload/3288137318.pdf , *page 35*).

3. The college must be ready to-contact the SVT according to the code of conduct planned by NCAMC. The college must nominate a dedicated faculty member "the person in contact" for this task. This contact will be ended at the end of the Site Visit.

4. During the Site Visit, the college must prepare a "properly equipped" room within the college for the SVT to conduct meetings and related activities. The person in contact should have enough authority to facilitate the process and take suitable actions as needed. He should arrange different activities like visiting related locations and institutions, conducting questionnaires, collecting documents ... etc.

5. The college must ensure that the process will pass smoothly and that the SVT has the autonomy needed to conduct its duties. This must be so clear to all stakeholders with clear instruction from the dean to prevent any interference with such autonomy.
6. In case of any conflict of interest, the college must contact the team leader and, if needed, the NCAMC through its supervisor as soon as such issues arise. Such issues, if any, should be dealt with wisely and carefully.
7. The college should not expect the SVT to give details or decisions. Instead, by the end of the Site Visit, a short goodbye meeting will be held between the SVT and the dean of the college in which, the leader of the SVT presents the team thanks to the college and gives general feedback about the process.
8. On receiving the SVT report, the NCAMC will send it to the Dean of the college under evaluation along with a special template for correction of factual errors if any. (link to be added)
9. After receiving the college's response (step -8-); the NCAMC will go through the final evaluation process aiming to reach the final decision within three weeks.

Second\\ The Site Visiting Team:

1. For each college, there will be an assigned SVT. Each team consists of 5-7 main members including the team leader; in addition to another 1-2 members who are involved in training and enhancing their capabilities. One of the main members may take the duty of the registrar of the team.
2. The leader of the SVT is nominated by NCAMC according to the given criteria approved by MOHESR (http://ncamc-iq.org/upload/2184467607.pdf). He should be dedicated to the task and his performance is continuously monitored by NCAMC through the supervisor.
3. Members of each SVT are academic staff and experts who will be selected, according to a given criterion by the NCAMC. This selection will be from the assembly of the main team who have undergone numerous trainings and various assessments.
4. The activity of each SVT will be supervised by a member from the NCAMC. Additionally, national or international expert(s) and observational trainees may be selected by the NCAMC to participate in this activity whenever needed. All communications are expected to be through the SVT leader, from one side, and the supervisor from the NCAMC, from another side.
5. Each team member must apprehend the national standards of accreditation and

related steps stated in this guide. Additionally, comprehensive awareness about the college to be visited and its educational program is so crucial. They should be well prepared for this activity and work in a punctual, objective, and professional manner. They must follow the stated protocol and related code of conduct and abide by the time frame throughout the whole activity.

6. The team leader will be the "spokesperson" for the team to handle all direct contacts with the Medical College and with the NCAMC. He should show good leadership, communication, facilitation, and coordination skills. The team leader will be held responsible (by the NCAMC) for the whole Accreditation Program to that college and is required to report to the NCAMC regularly. And he should send the final report to the NCAMC on time.

7. In the case of conflict of interests, proper and prompt actions should be taken as stated by the NCAMC. This requires immediate notification and wise judgments.

Third\\ Code of Conduct (for the SVT):

1. Members of the SVT must follow this code of conduct.

2. The SVT must have a comprehensive awareness of the college and its educational program prior to the visit as stated in this Guide. This should be done by studying documents of that college including SAR in relation to the National Standards of Accreditation stated by the NCAMC.

3. The leader of the SVT must adopt mechanisms to ensure that team members apply standards and procedures consistently and appropriately. The leader and his\her team should put together a plan, in concordance with the related plan of the NCAMC, and distribute duties to come out with fruitful results.

4. The process must start by contacting the dean of the college for a brief introduction and to agree on the schedule and steps of this part of the accreditation process including the site visit. Major issues and events related to implementing the accreditation process should be agreed upon by the two sides.(appendix IV)

5. Any contact between the SVT from one side and the college and\or the NCAMC from the other side must be done through the team leader. If needed, the leader might delegate a team member for this task.

6. It is allowed for the SVT, through its leader to contact the person in contact of that college at any time before and during the site visit.

7. The SVT must show no conflict of interest throughout the whole accreditation

process. This is based on transparency and honor. Close observation and follow-up of such conflicts should be done by the team leader under close observation by the NCAMC.

8. At the start of the site visit, the SVT may hold a short introductory meeting with the dean and related faculty members (not more than 30 minutes) during which, the already prepared action plan and schedule should be explained, in brief, by the team leader. At the end of this meeting, permission to conduct the site visit should be asked for by the team leader.

9. During the site visit, the team must verify and collect documents while visiting different (selected) facilities related to the National Standards. these facilities may include teaching halls, small group rooms, offices, and laboratories, with special attention to the affiliated institutions like Hospitals, Primary Health Care Centers ... etc.

10. The SVT must sample ideas and opinions from different stakeholders. This may be done by questionnaire, small and large group meetings, personal meetings ... etc. The collected information must be documented in short reports to be included in the Annexes related to the final SVT report.

11. The SVT must, internally, discuss findings and observations on a daily basis (at the end of each working day) and come up with an agreed working plan, tasks, and schedule for the next day. This aims to highlight shortcomings and outstanding issues, to determine missing documents … etc.

12. For the same college when it applies for accreditation next time (whether granted full, conditioned or denied accreditation ; the SVT should especially monitor the implementation of recommendations from the previous visit. So, the team must have an idea about the previous visit, its recommendations, and the achievement of the college at that time.

13. Personal feedback from the SVT members must not be shown to the college by any means and for any purpose. Such feedback may be discussed within the SVT confidentially to build an agreement within the team on related details.

14. By the end of the site visit, the team leader should meet the dean to thank him for his welcome and support (appendix VI). This meeting is to brief the dean about the overall activities and about the obvious achievements and shortcomings at the college, neither details nor decisions must be given. The college must understand that the decision will be made by the NCAMC after a thorough review of the documents that come from the college and that come from the SVT. Members of the SVT and a few faculty members, if the

dean wishes, may attend this meeting.

15. The whole task of the SVT is based on gathering and analysis of documents, information, viewpoints, and ideas from different sources. Discussion, interviews, questionnaires, and documents are crucial.

16. During the whole process of SVT activities, the leader of the team must report to the NCAMC on a regular basis. The final report of the SVT should be handed to the NCAMC (supported with well-indexed documents) within two weeks after the site visit.

17. The report must be constructive, evidence-based, and be written in a narrative way according to the format stated in this guide. Within this report, outstanding achievements and shortcomings should be discussed.

18. The NCAMC may contact and can ask for a meeting with the leader or any member of the SVT if needed. This may be done to discuss concerns, clarify related issues, ask for further documents ...

CHAPTER SIX
The Report of the Site Visit (SVR)
[Appendix III]

The college of medicine to be accredited has to adopt the National Standards for Accreditation of Medical Colleges. In this regard, the college will do a Self-Assessment Study (SAS), write the related report (SAR), and collect and index related documents that will be studied by the Site Visiting Team (SVT). Then, the SVT will conduct the Site Visit to verify the compliance of the college to these standards. After that, the SVT will write a report and index-related documents and submitted to the NCAMC.

The SVR represents the formal record of the SVT findings at the college related to the national standards. For each area of the national standards, this report must describe the college's performance and highlight achievements and shortcomings. Each statement and paragraph within this report must be referred to one or more of the related documents considering that these documents must be well indexed as shown in the Appendix (III).

Along with related documents, this report serves as an important source of information for NCAMC to take the final decision. So, this report must follow these regulations:

First\\ General Principles:

This report must be professional and written in a narrative way, skillfully. It must be descriptive depending on the evidence and data collected. It must emphasize the college's performance regarding each of the national standards. Additionally, it should highlight outstanding achievements and shortcomings that college in this regard.

Second\\ Building up the Site Visiting Report (SVR):

All the following activities will be guided by the leader of the SVT. The supervisor from the NCAMC will be available for consultation whenever needed.

1- **Before the Site Visit**: The members of the SVT must meet on a regular base to know their tasks exactly and comprehend related sections of the SAR and accompanying documents sent by the college. At this stage, they should start plotting the general frame of their report draft as part of the final site-visiting report. By this time, there must be a plan specifying standards that need verification, especially those with missing documents, and to be followed up with the college before or during the site visit to fulfill this task. Indexing the documents in hand must start at this point. This indexing must follow the national

standards and is not related to the document indexing done by the college.

2- **During the Site Visit:** The SVT members perform their tasks according to their already decided schedule. On a daily basis, they must enrich their initial drafts with updates of the checked standards and related events. The newly collected documents must be added to the already indexed documents.

3- **After the Site Visit:** Finalization of the report drafts and relevant documents must be carefully and skillfully completed and indexed by the members of the SVT by the end of the last day of the site visit. Then, the team leader will receive these drafts and it is his\her task to check that all related aspects of the site visiting report are covered, all standards are discussed, and that the stem of the report is allied to a well-indexed document.

Before the end of the last day of the site visit, the team leader must be sure that these report drafts are based on information from college SAR and observations during the site visit and supplied with indexed documents that have already been sent by the college and documents collected during the site visit.

The leader of the SVT has overall responsibility for the final report. He should unify the whole report regarding clarity, consistency as well as spelling, and formatting. By the first three days of the site visit, the team leader must prepare a draft of the report and documents. He may add important notes, where appropriate. Then, an open discussion with the members of the SVT must be arranged for the mutual confirmation of the final agreement within the team that should be completed by no more than ten working days after the end of the site visit.

Within two weeks after the end of the site visit, the team leader forwards the final and formal site visit report and related indexed documents to the NCAMC.

Third\\ Formal Structure of the SVT Report (SVR):

- Title of the site visiting report:
- Cover Page: includes specific information such as "*Toward excellence in medical education*" or "*A report of Baghdad College of Medicine*", *college name and site visit date* …etc.
- Table of Contents: Make sure that all Appendix documents are listed. The report should be paged sequentially, including the Appendix.
- Memorandum and Signature:
  After the stem of the memorandum, details of the SVT members must be listed including their names, titles, affiliation, and emails, as well as their roles on the SVT as a leader, secretary, reporter, member, or observer.

❖ Introduction and Composition of the SVT:

For example, A site visit of the University of (…..) College of Medicine was conducted on (day\ month\year), by a team representing the NCAMC. The team expresses its appreciation to the Dean and the administrative staff, faculty, and students for their interest and candor during the site - visit.

❖ Summary of SVT Findings:

For each standard, subarea, and area of the National Standards, the preferred format includes putting the related numbers and formal name and stem of the standard to be discussed followed by a paragraph labeled "Finding". The finding is a narrative discussion of the facts with enough details and must be supported by data and evidence. It must follow the three levels of evaluation i.e. I-present, II- present and applied, III- present, applied, and effective. This can be supported by recommendations of the SVT for improvement. This must be done for each area, subarea, and standard. If there are no findings for a given standard, you have to write a brief discussion about this defect and avoid leaving it empty.

❖ Area Reviewing:

Each area is mentioned with its number, name, and any comments. The stem of the report should include the number and name of the standard followed by a narrative description and comments about the facts related to each standard with emphasis on the three levels of evaluation i.e. level -I-present, level -II- present, and applied, and level -III- present, applied, and effective. In the narrative stem of the report, there should be careful differentiation between information and conclusions that come from the college side from those that come from the SVT findings. For each standard and after the stem description there must be referring to the number of the documents on which that stem was based.

These collated documents must be well indexed in a common appendix at the end of the report. A List of appendix numbers and item names at the beginning of the relevant section of the report is recommended.

❖ College SAS and Data Collection:

Comment on the SAS in terms of the degree of participation of different stakeholders (medical staff, administrators, students…etc.), the comprehensiveness and depth of analyses, and the organization and quality of the conclusions and recommendations.

Comment on the quality of the document collection including its organization, completeness, and internal consistency. Note if there were missing

information in the data collection (as if questions were not completely or appropriately answered) or if there were any difficulties for the SVT in securing needed information before or during the site visit. Indicate whether quantitative data were updated for the current year.

- ❖ History and Setting of the College and Allied Institutions (hospitals and PHCC):

Briefly summarize the history of the college including accreditation history. Describe the medical college in terms of its size, age, governmental or private status, and its organizational relationships with the university, health sciences center, geographically separate / distributed campus(es), and principal teaching hospital(s). Describe the geographic relationships of the main campus to major clinical teaching sites and, where appropriate, remote campuses; include relevant maps of the locations of affiliated teaching sites and any geographically distributed campuses in the Appendix.

Fourth\\ Outlook of the SVT Report :

1. The page layout should be one inch margined throughout.
2. Use the template supplied by the NCAMC (font-size: 12 points, Times New Roman, justified and the line spacing is 1.5).
3. Place “Table of Contents” (including that for the appendix) immediately after the title page. These pages should be numbered in lowercase Roman numerals at the bottom center of the page.
4. After the entire report has been completed and assembled, put page numbers in the bottom center of each page, including appendices. Number the pages of the report consecutively starting from the memorandum (do not number each section separately).
5. The covering memorandum from the team leader follows the list of the content. This memorandum must be signed by the members and leader of the SVT.
6. Carefully check the quality of all images, tables, and scanned copies. Scanners may produce distortions, low contrast, or crooked pages. Be sure that the originals are of high resolution for quality reproduction.
7. Please use common style conventions: The word "dean" is not capitalized except when it begins a sentence. The same is true for vice president, and president. The words “medical”, “college” and “university” are not capitalized unless they begin sentences or are used as the college’s full name (such as Baghdad Medical College). The word "faculty" is not capitalized unless it begins a sentence or is the Iraqi equivalent of school, e.g., "The president intends to allocate more funds to the(....) Faculty of Medicine for

laboratory construction." Discipline names (e.g., "Physiology," "Biochemistry," "Medicine,") are capitalized when they refer to departments. Note that "department" is not capitalized unless it is used with reference to a specific discipline, as in "Department of Medicine". Capitalize the initials of formal college committees and subcommittees (e.g., Committee on Educational Policy), but do not capitalize the committee if the formal name is not used and the committee is referred to just by function (e.g., Curriculum Committee).

8. Before submitting the report to the NCAMC, carefully proofread it to correct spelling, typographical, grammatical, and punctuation errors.

CHAPTER SEVEN
Decisions and Appealing

The National Council for Accreditation of Medical Colleges (NCAMC) is the authorized body to decide on the accreditation of medical colleges. Appealing from the college is allowed and an already set committee within the NCAMC is allocated for this purpose (according to regulation no. 2274 issued in 7/9/ 2020, paragraph 8, statement C).

First // correction of factual errors:
Before the Council begins evaluating the college in preparation for making the appropriate decision, the Council sends the SVR to the concerned college dean in a confidential and personal manner to review it and correct factual errors, if any, according to a form prepared for this purpose. (http://ncamc-iq.org/upload/5421136095.docx)

Second // Final Decision of Accreditation:
After receiving the response from the college (previous step), the NCAMC makes the decision. To make such a decision, It takes 2-3 weeks to study , discuss the SAR, SVT report, and their related documents and verify the results and might ask the college and\or the SVT for more documents then reaching the final decision.(http://ncamc-iq.org/upload/3288137318.pdf page 16). This decision will be reported to the Minister of Higher Education and Scientific Research for endorsement. By then, the college will be formally informed and will receive the decision, along with a detailed report demonstrating the college's performance (achievements and shortcomings).

The decision will be either:

1. **Full Accreditation**: When the college fulfills the accreditation requirements. This will be valid for a full cohort (six years).
2. **Conditioned accreditation:** When the college almost fulfills the accreditation requirements. This means that some requirements were not met, mandating proper actions from the college side. The College must fulfill these requirements within a period of two years to be accredited (2 years).
3. **Denied Accreditation**: when the College does not fulfill the National Standards of Accreditation. The College must take serious actions to fulfill these standards and can re-apply for accreditation at least one year later.

Third // Appeal:

http://ncamc-iq.org/upload/3288137318.pdf , page 23

The College has the right to appeal the NCAMC decision within 4 weeks of the ministerial approval of the decision otherwise, this will be the final decision.

The Council formulates a committee, specifically for each college for this purpose. Members of this committee are NCAMC members who do not participate in any of the activities related to evaluation or decision-making for that college. This committee will study the college appeal and review the whole documents within 4 weeks after issuing the formal order.

The decision of the committee is considered final and presented to the NCAMC for approval. This final decision will be reported to the Minister of Higher Education and Scientific Research for endorsement.

By then, the college will be formally informed about the final decision.

CHAPTER -8-
POST ACCREDITATION PERIOD

(http://ncamc-iq.org/upload/3288137318.pdf . *p 24*)

Scope:

The colleges concerned in this chapter are the colleges that: granted full accreditation, conditional accreditation, had accreditation withheld from them, or had accreditation withdrawn from them after it has been granted.

I- Colleges that are granted full accreditation:

- The validity period for granting full accreditation is 6 years.
- The college is provided with a detailed report on the standards that have been achieved and those that need to be improved.
- The college must maintain strengths, address weaknesses, and achieve quality assurance standards.
- The college must submit progress reports in the second, and fourth year following its accreditation evaluation to the council indicating what steps it has taken to maintain the standards it has achieved and to address what it has not accomplished.
- When needed, the council sends a team of assessors (NAT) to verify the college's work in the field of accreditation.
- The team submits a report to the council.
- This report is subject to discussion in a special meeting, after which a decision is taken: continue full accreditation or change it to a conditioned state or withdraw it.
- It is recommended that in the first half of year six following the first accreditation decision, the college re-apply for another period of accreditation.

II- Colleges with conditioned accreditation:

Medical colleges granted conditional accreditation must submit progress reports within the first year of their accreditation evaluation, followed by a comprehensive report by the end of the second year.

- The college is given two years to adjust its performance and address the standards that were not achieved while maintaining and enhancing the standards that were achieved.
- During this period, the college receives support from the Council to help it reach accreditation. The support is in different ways, such as providing advice or carrying out a workshop or seminar… ***etc.***
- The college has to submit a complete action plan showing the steps that will be taken in addressing the weaknesses, and the approximate period for submitting the final report and applying for accreditation.
- After the college submits its report to the council, together with documents and evidence, the council assigns the assessors team (NAT)

to study the report and then visit the college to complete its evaluation focusing on the incomplete areas.

- After the team finishes its field visit to the college, it submits its final report to the council within two weeks.
- Determines two months to complete the assessment process and write the final report
- The council sends the SVR to the college for factual errors. It has to respond within a week period.
- The Council holds a special meeting to discuss the report and according to the assessment mechanisms approved by the council, the appropriate decision is made.

III- <u>Colleges that are not granted accreditation:</u>
(withholding accreditation, withdrawing accreditation)

- All colleges in Iraq are established based on the approval of the Ministry of Higher Education and Scientific Research (MoHESR), and they are officially recognized by their graduates.
- In the event of withholding accreditation to the college or withdrawing the accreditation previously granted, the council must submit a recommendation to His Excellency the Minister to take the necessary measures.
- <u>Consequences are still in progress waiting for legislation by the parliament .</u>

Appendix -1-
Summery Timetable of the work of the National Assessors Team – Site Visit – Council Evaluation – Decision Session

1.	**Receiving the report with documents from the Council**	A period not exceeding one week from the date of issuance of the assignment's ministerial order.	one week
2.	**The first meeting with the team and the distribution of tasks**		
3.	**Reading the areas, each according to his tasks, and writing the initial report**		Two weeks
	Initial visit	As needed	
4.	**Site visit and completion of writing the initial report, each according to his tasks**		Two weeks
5.	**Consolidation and writing of the final report by the team chair and rapporteur**		Two weeks
6.	**Submitting the report with documents to the Council**		
7.	**Sending the report to the college for factual errors**		(five days) a week
8.	**Receiving the report from the college, Distributing and assessing the areas by their committees**		Two weeks
9.	**finalization of assessments tables by supervisor**		A week
10.	**Convening of the decision session**		

		The week	1	2	3	4	5	6	7	8	9	10	11	12
	Activity	**Date ****												
1- **2-**	**Receiving the report and documents from the Council and holding the first meeting**													
3-	**Reading the areas and writing the initial report May include an initial visit as needed**													
4.	**Site visit and completion of writing the initial report**													
5.	**Consolidation and writing of the final report by the team chair.**													
6.	**Submission of the report to the Council by the team chair.**													
7.	**Sending the report to the college for review ##**													
8.	**Receiving the report from the college, Reading and evaluating the areas by their committees $$**													
9.	**finalization of the assessments by the supervisor**													
10.	**Convening of the decision session**													

Appendix -II-

Template of
SELF ASSESSMENT STUDY REPORT (SAR)

Key points:

1-The SSR requires collaboration between a wide range of stakeholders.
2-The SSR is to be as comprehensive as necessary and as brief as possible.
3-the SSR should be evidence-based with documents collection.
4-The document must be relevant (sacrifice).
5- Both achievements and shortcomings in regard to accreditation standards must be mentioned.
6-It must be well structured and useful to faculty members and to the Site Visiting Team (SVT).
10-SSR requires careful documentation of the college achievements for each standard.
11-Analytical tools should be selected and used properly according to the standard .
12-The measures and analysis taken through the SAS should be written in the SAR.

Contents of the SAR

Page -1- : The title page

One page including :

title of the study.
institution name.
mailing address.
names and affiliations of report's authors .
the date of submission.

Page -2-: Table of contents.

Page -3- : Dean's statement about the college accreditation.

- Not more than one page stating
- the vision of the college about accreditation
- the achievement of college regarding accreditation.
- It might include a photo of the dean or the college.

Page 4 and 5 : The Historical background of the college.

One or two pages

- The historical background of the college:
- the date of initiation,
- number of graduates,
- awards acquired ... etc.
- a historical photo of the college

page -6- : Acknowledgment

Not more than one page to show and thank efforts of the:

- participating personnel.
- society groups.
- agencies .
- others who participate in one way or another in the process of accreditation.
- others who participate in SAR writing.

Page 7 and 8 : Summary report (executive summary).

- One or two pages

- including the summary of main chapters of the report
- It should show the methodology used.
- conclusion of the results.

Page -9- : The purpose of evaluation (aims)

- Not more than one page
- Stating the college's point of view,
- The college's needs for accreditation and
- How this report is beneficial in this regard .

Page 10 and 11 : Evaluation methodology and statistical methods.

- One to two pages showing
- The study model and design (quantitative, qualitative or mixed)
- And reason for choosing such design.
- Data collection (instruments, sources, procedures, sample size and sampling techniques, and limitations) should be described.
- Furthermore, this section should show how data were analyzed (content analysis of qualitative data, descriptive statistics and/or statistical tests of significance of quantitative data).

Page -12 - ---------- as needed

Discussion of the standards within all areas

- Write a chapter number for each area .(chapter one for area -1-, chapter two for area -2- and so on).
- Each chapter includes :
- A background and rationale context of that area with the related standard.
- A logical and narrative summary (quantitative and qualitative).
- Each standard statement must be written clearly.*(refer to booklet for evidence generation).*
- Each standard must be discussed in a narrative way .
- The results should be so clear .
- Discussing the results must be based on the three levels of achievement (i.e. Level **I-present**, **level II-present and applied**, and **level III-present , applied and effective**) so as the citation and appendices.
- College benchmarks, achievements and shortcoming should be explained clearly .
- The use of tables and figures are preferable when appropriate (clearly labeled).
- The results should highlight the relevant positive as well as negative findings preparing them for analysis.
- Clear referral .
- SWOT analysis : Enlightens the points of :
    - Strength
    - Weakness,
    - Opportunities and
    - Threats.
- Proper action plan to (maintain strength points and overcome shortcomings).
- A time schedule to report how progress will be measured .

Next pages : Conclusion and recommendation

- One or two pages.
- The conclusions should enumerate the summary of the SWOT analysis appropriately .
- The recommendations aims to facilitate the future work to overcome shortcomings and maintain strength points.

Next Pages : Citation and Appendices

- list sources for any references made in the stem.
- The appendices could be the last chapter of the SAR .
- Or could be in isolated booklet with proper referral to the SAR stem.

Example of discussing a standard:

5.3 STUDENT COUNSELLING AND SUPPORT

Standard 5.3.1

The medical college and/or the university **must** have a system for academic counseling of its student population.

The(X) College of Medicine has an efficient academic counseling system for medical students. It consists of an academic counseling unit, committee, and subcommittee (5.3.1 A) who update regularly the guidelines of counseling that are announced, distributed, and followed (5.3.1 B). Each academic counselor has a subgroup of 12-15 students to follow them (5.3.1 C).

The academic counselor works hand by hand with students to help them overcome any shorting in their academic performance and create their individualized educational plans for the future careers. Each counselor plans regular meetings with his students at least twice per semester (5.3.1.D). The counselor meets more frequently with students who are failed or are at risk to fail in a mid or final module examination, those who feel academically challenged, and students with many absences (5.3.1 E, F). The counselor keeps a log of meetings with students and a summary of their social and academic affairs (5.3.1 G).

Feedback from the students demonstrated a great role and positive impact on the academic counseling process. Of 251 students who participated in a survey to assess the impact of communication with their academic counselors, 206 (82.1%) students stated that their academic counselor had a positive impact on their academic progress while the remaining 45 (17.9%) students were dissatisfied (5.3.1 H)

An Example of annexes' table:

Annex No.	Annex title
5.3.1. A	**A written policy or system for academic counselling .**
5.3.1. B	**A guideline which distributed or uploaded on website.**
5.3.1. C	**Administrative order of subgrouping with its mentor.**
5.3.1. D	**Meeting minutes with a well-defined date.**
5.3.1. E	**Meeting minutes with individual student who faces challenges.**
5.3.1. F	**Meeting minutes with individual student who faces challenges.**
5.3.1. G	**Well documented achieve (e.g. student progress over the study years).**
5.3.1. H	**Feedback from students with analysis of the results.**
5.3.1. I	**Report of interviewing the teachers with analysis of the results.**

Appendix III … Template of

REPORT of SITE VISIT (SVR)

The Site-Visit to

NAME OF THE COLLEGE AND UNIVERSITY

CITY

PREPARED BY SITE-VISITING TEAM

NCAMC

DATE OF SITE VISIT

TABLE OF CONTENTS

PAGE	CONTENT
1	Memorandum
	Preface
	Data collection, college SAS and SSR
	Findings according to areas of NSAMC
	Mission and outcomes
	Educational program
	Assessment of students
	Program evaluation
	Students
	Academic staff/ faculty
	Educational resources
	Governance and administration
	Continuous renewal

MEMORANDUM

TO: National Council for Accreditation of Medical Colleges (NCAMC)
FROM: Leader of the Site Visiting Team that visited NAME OF THE COLLEGE AND UNIVERSITY on VISIT DATE
RE: Report of the site visit
On behalf of the NCAMC and according to the National Accreditation Guidelines, the SVT had visited the NAME OF THE COLLEGE AND UNIVERSITY on VISIT DATE and the following report includes all the findings supported by the documents.
Respectfully

Signature
Member: NAME, TITLE, AND DEGREE
College of Medicine, University ----------
City, Province: ----------
Phone Number: ----------
Email: ----------

Signature
Member: NAME, TITLE AND DEGREE
College of Medicine, University ----------
City, Province: ----------
Phone Number: ----------
Email: ----------

Signature
Member: NAME, TITLE, AND DEGREE
College of Medicine, University ----------
City, Province: ----------
Phone Number: ----------
Email: ----------

Signature
Member: NAME, TITLE AND DEGREE
College of Medicine, University ----------
City, Province: ----------
Phone Number: ----------
Email: ----------

Signature
Leader\ SVT: NAME, TITLE, AND DEGREE
College of Medicine, University of ----------
City, Province: ----------
Phone Number: ----------
Email: ----------
Date: ----------

PREFACE

The site visit had been planned to test how Medical Colleges Adopt and apply the National Standards for Accreditation of Medical Colleges (NSAMC) and how the educational program of these colleges is up to these standards.

As a requirement of the accreditation process, the college must conduct a Self-Assessment Study (SAS) that ended by writing its Self-Assessment Report (SAR). This process involves collecting and annexing documents related to all areas stated in the NSAMC following the steps of the National Accreditation Guidelines.

The college must send these documents to the Site Visiting Team (SVT) nominated to that college.

The SVTs were formulated by the Ministry of Higher Education and Scientific Research \ National Council for Accreditation of Medical Colleges (MoHESR \ NCAMC). Members of these teams are faculty members who are enthusiastic and known to be professionals. They were selected and allocated carefully to ensure neutrality and honest judgment. They had been subjected to adequate training in accreditation, medical education, assessment … etc.

The SVT for NAME OF THE COLLEGE, UNIVERSITY contacted the college on DATE OF INITIAL CONTACT and visited the college at VISIT DATE. During this period, the SVT studied the SSR of the college and all the documents. This study was based on the NSAMC and Guidelines and the site visit was conducted to verify related issues to fulfill this task.

Based on the Code of Conduct, the SVT deals with its duties professionally, and on completing its mission, this report was prepared.

This report includes no decisions, instead, it describes facts, analyzes documents, and gives recommendations.

We should mention that this task was not to be fulfilled without the efforts of all stakeholders. Especial gratitude is directed to the NAME OF THE COLLEGE AND UNIVERSITY, represented by its Dean NAME OF THE DEAN, a person of contact NAME, faculty, staff, and students for their willingness to give the best.

Before getting into the details of this report, I and instead of this visiting team think that it was an honor to work with our mentor from the NCAMC, NAME OF THE MENTOR as he\she was so supportive and professional.

DATA COLLECTION, COLLEGE SAS AND SSR

[*Briefly note the following*]:

- Quality of data collection
- Involvement of faculty, students, and other stakeholders in the SAS
- Correlation between the college SAS. findings and the team findings.

Appendix IV … Template of
SITE-VISIT SCHEDULE

The Site-Visit to NAME OF THE COLLEGE AND UNIVERSITY by the SVT on VISIT DATE

Pre-visit day

4:00 pm … Team caucus

The team leader in collaboration with the college person in contact can adjust the topics and time allotted for individual sessions, as well as divide the team, to accommodate the distinctive characteristics of the college being visited.

Day One

8:00 am … Entrance meeting

9:00 am … Dean's perspective: Accomplishments, goals, challenges

10.00 am Discussion items (according to SVT) include:

1- ----------
2- ----------
3- ----------

11:00 -11.30am- Break

11.30. Discussion items (according to SVT) include:

1- ----------
2- ----------
3- ----------

2:00-3:00 pm … Lunch break

3.00-6.00 pm … Rest at the hotel

6:00-8:00 pm … evening meeting (Drafting report and discussion)

Day Two

7:45 am … The team is collected at the hotel (time tentative based on the distance to college)

8:30 am … Discussion items include:

1- ----------
2- ----------
3- ----------

11:00 -11.30am- Break

11.30. Discussion items (according to SVT) include:

1- ----------
2- ----------
3- ----------

2:00-3:00 pm … Lunch break
3.00-6.00 pm … Rest at the hotel
6:00-8:00 pm … evening meeting (Drafting report and discussion)

Day Three

7:45 am … The team is collected at the hotel (time tentative based on the distance to college)
8:30 am … Discussion items include:
1----------
2----------
3----------
11:00 -11.30am- Break
11.30. Discussion items (according to SVT) include:
1----------
2----------
3----------
2:00-3:00 pm … Lunch break
3.00-6.00 pm … Rest at the hotel
6:00-8:00 pm … evening meeting (Drafting report and discussion)

Day Four

7:45 am … The team is collected at the hotel (time tentative based on the distance to college)
8:30 am … Discussion items include:
1----------
2----------
3----------
11:00 -11.30am- Break
11.30. Discussion items (according to SVT) include:
1----------
2----------
3----------
2:00-3:00 pm … Lunch break
3.00-6.00 pm … Rest at the hotel
6:00-8:00 pm … evening meeting (Drafting report and discussion)

Day Five

7:45 am … The team is collected at the hotel (time tentative based on the distance to college)
8:30 am … Discussion items include:
1----------
2----------
3----------
11.30. Discussion items (according to SVT) include:
1----------
2----------
3----------

12:00 am ... Team Caucus (Private Session)
1:30 pm ... Exit meeting with the dean.
2:00-3:00 pm … Lunch break
3.00-6.00 pm … Rest at the hotel
6:00-8:00 pm … evening meeting (Drafting report and discussion)
Departure and safe journey back home in the next morning…

Appendix V … Template of

SITE-VISITING TEAM FINDINGS

The Site-Visit to NAME OF THE COLLEGE AND UNIVERSITY by the SVT on VISIT DATE

- *Write the full statement of the standard.*
- *For each standard, list the full wording under the relevant standard .*
- *At the end of each area, compare your findings with the SAS findings.*

1. Mission and outcomes

1.1.Mission

Basic standards:

1.1.1. The medical college **must** state its mission.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.1.1		
	Code no.	Comments
Present		

1.1.2. The medical college **must** make it known to its community and the health sector it serves.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied :----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 1.1.2		
	Code no.	Comments
Present		

Applied		
Effective		

1.1.3.

1.1.3.1. The medical college **must** in its mission to outline the aims and the educational strategy resulting in a medical doctor competent at a basic level.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

1.1.3.2. The medical college **must** in its mission to outline the aims and the educational strategy resulting in a medical doctor with an appropriate foundation for a future career in any branch of medicine.

Finding; (narrative statement)

Present : ---
---------- (Refer to each finding the related code no. of the documents.)

1.1.3.3. The medical college **must** in its mission to outline the aims and the educational strategy resulting in a medical doctor capable of undertaking the roles of doctors as defined by the health sector.

Finding; (narrative statement)

Present : ---
---------- (Refer to each finding the related code no. of the documents.)

1.1.3.4. The medical college **must** in its mission to outline the aims and the educational strategy resulting in a medical doctor prepared and ready for postgraduate medical education.

Finding; (narrative statement)

Present : ---
---------- (Refer to each finding the related code no. of the documents.)

1.1.3.5. The medical college **must** in its mission to outline the aims and the educational strategy resulting in a medical doctor committed to life-long learning.

Finding; (narrative statement)

Present : ---

----------(Refer to each findings the related code no. of the documents.)

Table of annexes for 1.1.3.1,2,3,4,5		
	Code no.	Comments
Present		
Applied		
Effective		

1.1.4. The medical college **must** consider that the mission encompasses the health needs of the community, the needs of the health care delivery system and other aspects of social accountability.

Finding; (narrative statement)

Present : ---
---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 1.1.4.		
	Code no.	Comments
Present		

Quality development standards:

1.1.5. The medical college **should** ensure that the mission encompasses medical research attainment.

Finding; (narrative statement)

Present : ---

----------(Refer to each finding the related code no. of the documents.)

Table of annexes for 1.1.5		
	Code no.	Comments
Present		

1.1.6. The medical college **should** ensure that the mission encompasses aspects of global health.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 1.1.6		
	Code no.	Comments
Present		

1.2 INSTITUTIONAL AUTONOMY AND ACADEMIC FREEDOM

Basic standards:

1.2.1.

1.2.1.1. The medical college **must** have institutional autonomy to formulate and implement policies for which its faculty/academic staff and administration are responsible, especially regarding the design of the curriculum.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied :----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.2.1.1		
	Code no.	Comments
Present		
Applied		

1.2.1.2. The medical college **must** have institutional autonomy to formulate and implement policies for which its faculty/academic staff and administration are responsible, especially regarding use of the allocated resources necessary for the implementation of the curriculum.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each findings the related code no. of the documents.)
Applied :----------

---------- (Refer to each findings the related code no. of the documents.)
Effective:

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 1.2.1.2.		
	Code no.	Comments

Present		
Applied		
Effective		

Quality development standards:

1.2.2. The medical college **should** ensure academic freedom for its staff and students in addressing the actual curriculum.

Finding; (narrative statement)

Present : ----------

----------(Refer to each findings the related code no. of the documents.)

Applied :----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 1.2.2.		
	Code no.	Comments
Present		
Applied		
Effective		

1.2.3. The medical college **should** ensure academic freedom for its staff and students in exploring the use of new research results to illustrate specific subjects without expanding the curriculum.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 1.2.3.

	Code no.	Comments
Present		
Effective		

1.3 EDUCATIONAL OUTCOMES

Basic standards:

1.3.1.

1.3.1.1. The medical college **must** define the intended educational outcomes that students should exhibit upon graduation in relation to their achievements at a basic level regarding knowledge, skills, and attitudes.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes		
	Code no.	Comments
Present		

1.3.1.2.The medical college **must** define the intended educational outcomes that students should exhibit upon graduation in relation to appropriate foundation for a future career in any branch of medicine.

Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes		
	Code no.	Comments
Present		

1.3.1.3. The medical college **must** define the intended educational outcomes that students should exhibit upon graduation in relation to their future roles in the health sector.

Finding; (narrative statement)

Present : ---

---------- (Refer to each finding he related code no. of the documents.)

Table of annexes		
	Code no.	Comments
Present		

1.3.1.4 The medical college **must** define the intended educational outcomes that students should exhibit upon graduation in relation to their subsequent postgraduate training.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes		
	Code no.	Comments
Present		

1.3.1.5 The medical college **must** define the intended educational outcomes that students should exhibit upon graduation in relation to their commitment to and skills in life-long learning.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes		
	Code no.	Comments
Present		

1.3.1.6 The medical college **must** define the intended educational outcomes that students should exhibit upon graduation in relation to the health needs of the community, the needs of the health care delivery system, and other aspects of social accountability.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes		
	Code no.	Comments
Present		

1.3.2. The medical college **must** ensure appropriate student conduct with respect to fellow students, faculty members, other healthcare personnel, patients, and their relatives.

Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)

Applied :

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.3.2		
	Code no.	Comments
Present		
Applied		

1.3.3. The medical college **must** make the intended educational outcomes publicly known.

Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)

Applied :

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.3.3.		
	Code no.	Comments
Present		
applied		

Quality development standards: The medical college **should**

1.3.4. The medical college **should** specify and coordinate the linkage of acquired outcomes by graduation with acquired outcomes in postgraduate training.

Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)

Applied :

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.3.4.		
	Code no.	Comments
Present		

applied		

1.3.5. The medical college **should** specify the intended outcomes of student engagement in medical research.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.3.5.		
	Code no.	Comments
Present		
applied		

1.3.6. The medical college **should** draw attention to global health-related intended outcomes.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.3.6.		
	Code no.	Comments
Present		

1.4 PARTICIPATION IN THE FORMULATION OF MISSION AND OUTCOMES

Basic standard:

1.4.1. The medical college **must** The medical college **must** ensure that its principal stakeholders participate in formulating the mission and intended educational outcomes.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied :

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.4.1		
	Code no.	Comments
Present		

applied		

Quality development standard:

1.4.2. The medical college **should** ensure that the formulation of its mission and intended educational outcomes is based also on input from other stakeholders.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied :

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 1.4.2		
	Code no.	Comments
Present		
Applied		

Area -2- Educational program

2.1 FRAMEWORK OF THE PROGRAM

Basic standards:

2.1.1. The medical college **must** define the overall curriculum.

Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 2.1.1.		
	Code no.	Comments
Present		

2.1.2. The medical college **must** use a curriculum and instructional/learning methods that stimulate, prepare and support students to take responsibility for their learning process.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ---

---------- (Refer to each findings the related code no. of the documents.)

Effective:

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.1.3. The medical college **must** ensure that the curriculum is delivered in accordance with principles of equality.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)

Effective:

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:
2.1.4. The medical college **should** ensure that the curriculum prepares the students for life-long learning.
Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied and effective ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.1.2.		
	Code no.	Comments
Present		
Applied effective		

2.2 SCIENTIFIC METHOD
Basic standards:
2.2.1.
2.2.1.1. The medical college **must** throughout the curriculum teach the principles of the scientific method, including analytical and critical thinking.
Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.2.1.1.		
	Code no.	Comments

Present		
Applied		
effective		

2.2.1.2.The medical college **must** throughout the curriculum teach medical research methods.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.2.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.2.1.3. The medical college **must** throughout the curriculum teach evidence-based medicine.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.2.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:

2.2.2. The medical college **should** in the curriculum include elements of original or advanced research.
Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.3 BASIC BIOMEDICAL SCIENCES
Basic standards:
2.3.1.
2.3.1.1. The medical college **must** in the curriculum identify and incorporate the contributions of the basic biomedical sciences to create an understanding of scientific knowledge fundamental to acquiring and applying clinical science.
Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.3.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

2.3.1.2 The medical college **must** in the curriculum identify and incorporate the contributions of the basic biomedical sciences to create an understanding of concepts and methods fundamental to acquiring and applying clinical science.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ---
---------- (Refer to each findings the related code no. of the documents.)
Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.3.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:
2.3.2.
2.3.2.1. The medical college **should** in the curriculum adjust and modify the contributions of the biomedical sciences to the scientific, technological and clinical developments.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ---
---------- (Refer to each findings the related code no. of the documents.)
Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.3.2.1		
	Code no.	Comments
Present		
Applied		
effective		

2.3.2.2.The medical college **should** in the curriculum adjust and modify the contributions of the biomedical sciences to the current and anticipated needs of the society and the health care system.
Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.3.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.4 BEHAVIOURAL AND SOCIAL SCIENCES, MEDICAL ETHICS AND JURISPRUDENCE

Basic standards:

2.4.1.

2.4.1.1 The medical college **must** in the curriculum identifies and incorporates the contributions of the: behavioral sciences.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.4.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

2.4.1.2. The medical college **must** in the curriculum identifies and incorporates the contributions of the social sciences.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.4.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.4.1.3. The medical college **must** in the curriculum identifies and incorporates the contributions of the medical ethics.
Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.4.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

2.4.1.4. The medical college **must** in the curriculum identifies and incorporates the contributions of the medical jurisprudence.
Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.4.1.4.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

2.4.2.

2.4.2.1. The medical college **should** in the curriculum adjust and modify the contributions of the behavioral and social sciences as well as medical ethics and medical jurisprudence to scientific, technological and clinical developments.

Finding;----------

2.4.2.2. The medical college **should** in the curriculum adjust and modify the contributions of the behavioral and social sciences as well as medical ethics and medical jurisprudence to current and anticipated needs of the society and the health care system.

Finding;----------

2.4.2.3. The medical college **should** in the curriculum adjust and modify the contributions of the behavioral and social sciences as well as medical ethics and medical jurisprudence to changing demographic and cultural contexts.

Finding;----------

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)

Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for.2.4.2.1, 2.4.2.2. , 2.4.2.3.		
	Code no.	Comments
Present		
Applied		
effective		

2.5 CLINICAL SCIENCES AND SKILLS

Basic standards:

2.5.1

2.5.1.1. The medical college **must** in the curriculum identify and incorporate the contributions of the clinical sciences to ensure that students acquire sufficient knowledge and clinical and professional skills to assume appropriate responsibility after graduation.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

2.5.1.2. The medical college **must** in the curriculum identify and incorporate the contributions of the clinical sciences to ensure that students spend a reasonable part of the program in planned contact with patients in relevant clinical settings.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.5.1.3. The medical college **must** in the curriculum identify and incorporate the contributions of the clinical sciences to ensure that students experience health promotion and preventive medicine.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ---
---------- (Refer to each findings the related code no. of the documents.)
Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

2.5.2. The medical college **must** specify the amount of time spent in training in major clinical disciplines.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ---
---------- (Refer to each findings the related code no. of the documents.)
Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.5.3. The medical college **must** organize clinical training with appropriate attention to patient safety.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.3.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

2.5.4.

2.5.4.1. The medical college **should** in the curriculum adjust and modify the contributions of the clinical sciences to the scientific, technological and clinical developments.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 2.5.4.1		
	Code no.	Comments
Present		
Applied		
effective		

2.5.4.2. The medical college **should** in the curriculum adjust and modify the contributions of the clinical sciences to the current and anticipated needs of the society and the health care system.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.4.2.		
	Code no.	Comments
Present		
Applied		
effective		

2.5.5. The medical college **should** ensure that every student has early patient contact gradually including participation inpatient care.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.5		
	Code no.	Comments
Present		
Applied		
effective		

2.5.6. The medical college **should** structure the different components of clinical skills training according to the stage of the study program.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.5.6.		
	Code no.	Comments
Present		
Applied		
effective		

2.6 PROGRAMME STRUCTURE, COMPOSITION, AND DURATION

Basic standard:

2.6.1. The medical college **must** describe the content, extent, and sequencing of courses and other curricular elements to ensure appropriate coordination between basic biomedical, behavioral and social, and clinical subjects.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ---

---------- (Refer to each findings the related code no. of the documents.)

Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.6.1		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

2.6.2. The medical college **should** in the curriculum ensure horizontal integration of associated sciences, disciplines, and subjects.

Finding; Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

Applied and effective ---------- ---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.6.2		
	Code no.	Comments
Present		

Applied and effective		

2.6.3. The medical college **should** in the curriculum ensure vertical integration of the clinical sciences with the basic biomedical and the behavioral and social sciences.
Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)
Applied and effective ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 2.6.3		
	Code no.	Comments
Present		
Applied and effective		

2.6.4. The medical college **should** in the curriculum allow optional (elective) content and define the balance between the core and optional content as part of the educational program.
Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)
Applied and effective ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 2.6.4		
	Code no.	Comments
Present		
Applied and effective		

2.6.5. The medical college **should** in the curriculum describe the interface with complementary medicine.
Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each findings the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.6.5.		
	Code no.	Comments
Present		
Applied		
effective		

2.7 PROGRAMME MANAGEMENT

Basic standards:

2.7.1. The medical college **must** have a curriculum committee, which under the governance of the academic leadership (the dean) has the responsibility and authority for planning and implementing the curriculum to secure its intended educational outcomes.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.7.1.		
	Code no.	Comments
Present		
Applied		
effective		

2.7.2. The medical college **must** in its curriculum committee ensures representation of staff and students.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)
Applied and effective ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.7.2.		
	Code no.	Comments
Present		
Applied and effective		

Quality development standards:

2.7.3. The medical college **should** through its curriculum committee plan and implement innovations in the curriculum.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ---

---------- (Refer to each findings the related code no. of the documents.)

Effective:---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.7.3		
	Code no.	Comments
Present		
Applied		
effective		

2.7.4. The medical college **should** in its curriculum committee include representatives of other stakeholders.

Finding; (narrative statement)

Present : ---

---------- (Refer to each findings the related code no. of the documents.)

Applied and effective: ---------- ---

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.7.4		
	Code no.	Comments
Present		

Applied and effective		

2.8 LINKAGE WITH MEDICAL PRACTICE AND THE HEALTH SECTOR

Basic standard:

2.8.1 The medical college **must** ensure operational linkage between the educational program and the subsequent stages of education or practice after graduation.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.8.1.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

2.8.2.

2.8.2.1. The medical college **should** ensure that the curriculum committee seeks input from the environment in which graduates will be expected to work, and modifies the program accordingly.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each findings the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each findings the related code no. of the documents.)

Effective:----------

---------- (Refer to each findings the related code no. of the documents.)

Table of annexes for 2.8.2.1		
	Code no.	Comments
Present		

Applied		
effective		

2.8.2.2. The medical college **should** ensure that the curriculum committee considers program modification in response to opinions in the community and society.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 2.8.2.2		
	Code no.	Comments
Present		
Applied		
effective		

Area -3- Assessment of students

3.1 ASSESSMENT METHODS

Basic standards:

3.1.1. The medical college **must** define, state, and publish the principles, methods, and practices used for the assessment of its students, including the criteria for setting pass marks, grade boundaries, and the number of allowed retakes.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

3.1.2. The medical college **must** ensure that assessments cover knowledge, skills and attitudes.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

3.1.3. The medical college **must** use a wide range of assessment methods and formats according to their “assessment utility”.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

3.1.4. The medical college **must** ensure that methods and results of assessments avoid conflicts of interest.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.4.		
	Code no.	Comments
Present		
Applied		
effective		

3.1.5. The medical college **must** ensure that assessments are open to scrutiny by external expertise.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.5.		
	Code no.	Comments
Present		
Applied		
effective		

3.1.6. The medical college **must** use a system of the appeal of assessment results.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.6.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

3.1.7. The medical college **should** evaluate and document the reliability and validity of assessment methods.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.7.		
	Code no.	Comments
Present		
Applied		
effective		

3.1.8. The medical college **should** incorporate new assessment methods where appropriate.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.8.		
	Code no.	Comments
Present		

Applied		
effective		

3.1.9. The medical college **should** encourage the use of external examiners.
Finding; (narrative statement)

Present : ---
--- (Refer to each finding the related code no. of the documents.)
Applied : --- ---
--- (Refer to each finding the related code no. of the documents.)
Effective:---
--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

3.2 RELATION BETWEEN ASSESSMENT AND LEARNING

Basic standards:
3.2.1
3.2.1.1. The medical college **must** use assessment principles, methods, and practices that are clearly compatible with intended educational outcomes and instructional methods.
Finding; (narrative statement)

Present : ---
--- (Refer to each finding the related code no. of the documents.)
Applied : --- ---
--- (Refer to each finding the related code no. of the documents.)
Effective:---
--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.2.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

3.2.1.2. The medical college **must** use assessment principles, methods, and practices that ensure that the intended educational outcomes are met by the students.
Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.2.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

3.2.1.3. The medical college **must** use assessment principles, methods, and practices that promote student learning.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.2.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

3.2.1.4. The medical college **must** use assessment principles, methods, and practices that provide an appropriate balance of formative and summative assessment to guide both learning and decisions about academic progress.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.2.1.4.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

3.2.2. The medical college **should** adjust the number and nature of examinations of curricular elements to encourage both acquisitions of the knowledge base and integrated learning.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

3.2.3. The medical college **should** ensure timely, specific, constructive, and fair feedback to students on basis of assessment results.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 3.2.3.		
	Code no.	Comments
Present		
Applied and effective		

Area - 4 - Program evaluation

4.1 MECHANISMS FOR PROGRAM MONITORING AND EVALUATION

Basic standards:

4.1.1. The medical college **must** have a program of routine curriculum monitoring of processes and outcomes.

Finding; (narrative statement)

Present ,Applied and effective ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.1.1.		
	Code no.	Comments
Present , Applied and effective		

4.1.2.1. The medical college **must** establish and apply a mechanism for program evaluation that addresses the curriculum and its main components.

Finding;----------

4.1.2.2. The medical college **must** establish and apply a mechanism for program evaluation that addresses student progress.

Finding;----------

4.1.2.3. The medical college **must** establish and apply a mechanism for program evaluation that identifies and addresses concerns.

Finding;----------

Finding; (narrative statement)

Present , applied and effective ---------- ----------

---------- ---------- ---------- ----------

---------- ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.1.2.1., 4.1.2.2., 4.1.2.3.		
	Code no.	Comments
Present , Applied and effective		

4.1.3. The medical college **must** ensure that relevant results of evaluation influence the curriculum.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

4.1.4.

4.1.4.1. The medical college **should** periodically evaluate the program by comprehensively addressing the context of the educational process.

Finding;----------

4.1.4.2. The medical college **should** periodically evaluate the program by comprehensively addressing the specific components of the curriculum.

Finding;----------

4.1.4.3. The medical college **should** periodically evaluate the program by comprehensively addressing the long-term acquired outcomes.

Finding;----------

4.1.4.4. The medical college **should** periodically evaluate the program by comprehensively addressing its social accountability

Finding;----------

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.1.4.1., 4.1.4.2., 4.1.4.3., 4.1.4.4.		
	Code no.	Comments
Present		
Applied and effective		

4.2 TEACHER AND STUDENT FEEDBACK

Basic standard:

4.2.1 The medical college **must** systematically seek, analyze and respond to teacher and student feedback.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.2.1.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:

4.2.2. The medical college **should** use feedback results for program development.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.2.2.		
	Code no.	Comments
Present		
Applied and effective		

4.3 PERFORMANCE OF STUDENTS AND GRADUATES

Basic standards:

4.3.1

4.3.1.1. The medical college **must** analyze the performance of cohorts of students and graduates in relation to mission and intended educational outcomes.

Finding;----------

(Refer to each finding the related code no. of the documents.)

4.3.1.2. The medical college **must** analyze the performance of cohorts of students and graduates in relation to the provision of resources.

Finding; (narrative statement)

----------(Refer to each finding the related code no. of the documents.)

Present and applied : ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.3.1.1., 4.3.1.2.		
	Code no.	Comments
Present and applied		
effective		

Quality development standards:

4.3.2.

4.3.2.1. The medical college **should** analyze the performance of cohorts of students and graduates in relation to student background and conditions.

Finding;----------
(Refer to each finding the related code no. of the documents.)

4.3.2.2. The medical college **should** analyze the performance of cohorts of students and graduates in relation to student entrance qualifications.

Finding;----------
(Refer to each finding the related code no. of the documents.)

4.3.3.

4.3.3.1. The medical college **should** use the analysis of student performance to provide feedback to the committees responsible for student selection.

Finding;----------
(Refer to each finding the related code no. of the documents.)

4.3.3.2. The medical college **should** use the analysis of student performance to provide feedback to the committees responsible for curriculum planning.

Finding;----------
(Refer to each finding the related code no. of the documents.)

4.3.3.3. The medical college **should** use the analysis of student performance to provide feedback to the committees responsible for student counseling.

Finding;----------
(Refer to each finding the related code no. of the documents.)

4.4 INVOLVEMENT OF STAKEHOLDERS

Basic standard:

4.4.1. The medical college **must** in its program monitoring and evaluation activities involve its principal stakeholders.

Finding;----------
(Refer to each finding the related code no. of the documents.)

Quality development standards:

4.4.2.

4.4.2.1. The medical college **should** for other stakeholders allow access to results of course and program evaluation.

Finding;----------

4.4.2.2. The medical college **should** for other stakeholders seek their feedback on the performance of graduates.

Finding;----------

4.4.2.3. The medical college **should** for other stakeholders seek their feedback on the curriculum.

Finding;----------

Present and applied : ----------
---------- (Refer to each finding the related code no. of the documents.)

Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 4.4.2.1, 4.4.2.2., 4.4.2.3.		
	Code no.	Comments
Present		
Applied		
effective		

Area -5- Students

5.1 ADMISSION POLICY AND SELECTION

Basic standards:

5.1.1. The medical college **must** formulate and implement an admission policy based on principles of objectivity, including a clear statement on the process of selection of students.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.1.1.		
	Code no.	Comments
Present		
Applied and effective		

5.1.2. The medical college **must** have a policy and implement a practice for admission of disabled students.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Effective:----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

5.1.3. The medical college **must** have a policy and implement a practice for the transfer of students from other national or international programs and institutions.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

5.1.4. The medical college **should** state the relationship between selection and the mission of the school, the educational program, and the desired qualities of graduates.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.1.4.		
	Code no.	Comments
Present		
Applied		

5.1.5. The medical college **should** periodically review the admission policy.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied and effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.1.5.		
	Code no.	Comments
Present		
Applied and effective		

5.1.6. The medical college **should** use a system for appeal of admission decisions.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.1.6.		
	Code no.	Comments
Present		
Applied		

5.2 STUDENT INTAKE

Basic standard:

5.2.1. The medical college **must** define the size of student intake and relate it to its capacity at all stages of the program.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.2.1		
	Code no.	Comments
Present		
Applied		

Quality development standard:

5.2.2. The medical college **should** periodically review the size and nature of student intake in consultation with other stakeholders and regulate it to meet the health needs of the community and society.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)
Effective:----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.2.2.		
	Code no.	Comments
Present		
Applied		

effective		

5.3 STUDENT COUNSELLING AND SUPPORT

Basic standards:

5.3.1. The medical college and/or the university **must** have a system for academic counseling of its student population.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.1.		
	Code no.	Comments
Present		
Applied and effective		

5.3.2. The medical college and/or the university **must** offer a program of student support, addressing social, financial, and personal needs.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.2.		
	Code no.	Comments
Present		
Applied		
effective		

5.3.3. The medical college and/or the university **must** allocate resources for student support.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.3		
	Code no.	Comments
Present		
Applied and effective		

5.3.4. The medical college and/or the university **must** ensure confidentiality in relation to counseling and support.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.4.		
	Code no.	Comments
Present		
effective		

Quality development standards:

5.3.5.

5.3.5.1. The medical college **should** provide academic counseling that is based on the monitoring of student progress.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.5.1.		
	Code no.	Comments
Present		
Applied		
effective		

5.3.5.2. The medical college **should** provide academic counseling that includes career guidance and planning.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.5.2.		
	Code no.	Comments
Present		
Applied and effective		

5.4 STUDENT REPRESENTATION

Basic standards:

5.4.1

5.4.1.1. The medical college **must** formulate and implement a policy on student representation and appropriate participation in mission statement.

Finding;----------

5.4.1.2. The medical college **must** formulate and implement a policy on student representation and appropriate participation in design of the program.

Finding;----------

5.4.1.3. The medical college **must** formulate and implement a policy on student representation and appropriate participation in management of the program.

Finding;----------

5.4.1.4. The medical college **must** formulate and implement a policy on student representation and appropriate participation in evaluation of the program.

Finding;----------

5.4.1.5. The medical college **must** formulate and implement a policy on student representation and appropriate participation in other matters relevant to students.

Finding;----------

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------
----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.4.1.1. , 5.4.1.2., 5.4.1.3., 5.4.1.4., 5.4.1.5.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:

5.4.2. The medical college **should** encourage and facilitate student activities and student organizations.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied and effective ----------
----------(Refer to each finding the related code no. of the documents.)

Table of annexes for 5.4.2		
	Code no.	Comments
Present		
Applied and effective		

Area – 6 - Academic staff/ faculty:

6.1 RECRUITMENT AND SELECTION POLICY

Basic standards:
6.1.1.

6.1.1.1. The medical college **must** formulate and implement a staff recruitment and selection policy which outline the type, responsibilities, and balance of the academic staff/faculty of the basic biomedical sciences, the behavioral and social sciences, and the clinical sciences required to deliver the curriculum adequately, including the balance between medical and non-medical academic staff, the balance between full-time and part-time academic staff, and the balance between academic and non-academic staff.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.1.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

6.1.1.2. The medical college **must** address criteria for scientific, educational, and clinical merit, including the balance between teaching, research and service functions.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.1.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

6.1.1.3. The medical college **must** specify and monitor the responsibilities of its academic staff/faculty of the basic biomedical sciences, the behavioral and social sciences, and the clinical sciences.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.1.1.3		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

6.1.2.

6.1.2.1. The medical college **should** in its policy for staff recruitment and selection take into account criteria such as relationship to its mission, including significant local issues.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.1.2.1.		
	Code no.	Comments
Present		
Applied		
effective		

6.1.2.2. The medical college **should** in its policy for staff recruitment and selection take into account criteria such as economic considerations.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.1.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

6.2 STAFF ACTIVITY AND STAFF DEVELOPMENT

Basic standards:

6.2.1

6.2.1.1. The medical college **must** formulate and implement a staff activity and development policy which allow a balance of capacity between teaching, research and service functions.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.2.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

6.2.1.2. The medical college **must** formulate and implement a staff activity and development policy which The medical college **must** formulate and implement a staff activity and development policy which ensures recognition of meritorious academic activities, with appropriate emphasis on teaching, research and service qualifications.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.2.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

6.2.1.3. The medical college **must** formulate and implement a staff activity and development policy which ensure that clinical service functions and research are used in teaching and learning.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.2.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

6.2.1.4. The medical college **must** formulate and implement a staff activity and development policy that ensures sufficient knowledge by individual staff members of the total curriculum.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.2.1.4.		
	Code no.	Comments
Present		
Applied		
effective		

6.2.1.5. The medical college **must** formulate and implement a staff activity and development policy which includes teacher training, development, support, and appraisal.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.2.1.5.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

6.2.2. The medical college **should** take into account teacher-student ratios relevant to the various curricular components.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

6.2.3. The medical college **should** design and implement a staff promotion policy.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 6.2.3.		
	Code no.	Comments
Present		

Applied		
effective		

Area – 7- Educational resources

7.1. PHYSICAL FACILITIES

Basic standards:

7.1.1. The medical college **must** have sufficient physical facilities for staff and students to ensure that the curriculum can be delivered adequately.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

7.1.2. The medical college **must** ensure a learning environment, which is safe for staff, students, patients, and their relatives.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:
7.1.3. The medical college **should** improve the learning environment by regularly updating and modifying or extending the physical facilities to match developments in educational practices.
Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)
Applied and effective: ----------
----------(Refer to each finding the related code no. of the documents.)

Table of annexes for 7.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

7.2. CLINICAL TRAINING RESOURCES

Basic standards:

7.2.1.

7.2.1.1. The medical college **must** ensure necessary resources for giving the students adequate clinical experience, including sufficient numbers and categories of patients.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied and effective: ----------
----------(Refer to each finding the related code no. of the documents.)

Table of annexes for 7.2.1.1		
	Code no.	Comments
Present		
Applied and effective		

7.2.1.2. The medical college **must** ensure necessary resources for giving the students adequate clinical experience, including sufficient clinical training facilities.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.2.1.2.		
	Code no.	Comments
Present		
Applied		

effective		

7.2.1.3. The medical college **must** ensure necessary resources for giving the students adequate clinical experience, including sufficient supervision of their clinical practice.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.2.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:

7.2.2. The medical college **should** evaluate, adapt and improve the facilities for clinical training to meet the needs of the population it serves.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

7.3. INFORMATION TECHNOLOGY

Basic standards:

7.3.1 The medical college **must** formulate and implement a policy which addresses effective and ethical use and evaluation of appropriate information and communication technology.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.3.1.		
	Code no.	Comments
Present		
Applied		
effective		

7.3.2. The medical college **must** ensure access to web-based or other electronic media.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.3.2.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

7.3.3.

7.3.3.1 The medical college **should** enable teachers and students to use existing and exploit appropriate new information and communication technology for independent learning.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.3.3.1.		
	Code no.	Comments
Present		
Applied		

effective		

7.3.3.2. The medical college **should** enable teachers and students to use existing and exploit appropriate new information and communication technology for accessing information.
Finding; (narrative statement)

Present : ---
--- (Refer to each finding the related code no. of the documents.)
Applied and effective : ---
---(Refer to each finding the related code no. of the documents.)

Table of annexes for 7.3.3.2.		
	Code no.	Comments
Present		
Applied and effective		

7.3.3.3 The medical college **should** enable teachers and students to use existing and exploit appropriate new information and communication technology for managing patients.
Finding; (narrative statement)

Present : ---
--- (Refer to each finding the related code no. of the documents.)
Applied : ---
---(Refer to each finding the related code no. of the documents.)
effective: --- ---
--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.3.3.3		
	Code no.	Comments
Present		
Applied		
effective		

7.3.3.4. The medical college **should** enable teachers and students to use existing and exploit appropriate new information and communication technology for working in health care delivery systems.
Finding; (narrative statement)

Present : ---
--- (Refer to each finding the related code no. of the documents.)
Applied : ---
---(Refer to each finding the related code no. of the documents.)
effective: --- ---
--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.3.3.4.

	Code no.	Comments
Present		
Applied		
effective		

7.3.3.5. The medical college **should** enable teachers and students to use existing and exploit appropriate new information and communication technology for optimize student access to relevant patient data and health care information systems.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.3.3.5.		
	Code no.	Comments
Present		
Applied		
effective		

7.4. MEDICAL RESEARCH AND SCHOLARSHIP

Basic standards:

7.4.1. The medical college **must** use medical research and scholarship as a basis for the educational curriculum.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.4.1.		
	Code no.	Comments
Present		
Applied		
effective		

7.4.2. The medical college **must** formulate and implement a policy that fosters the relationship between medical research and education.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.4.2.		
	Code no.	Comments
Present		
Applied		
effective		

7.4.3. The medical college **must** describe the research facilities and priorities at the institution.
Finding; (narrative statement)

Present and applied : ----------
---------- (Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.5.1.		
	Code no.	Comments
Present and applied		
effective		

Quality development standards:
7.4.4.
7.4.4.1.The medical college **should** ensure that the interaction between medical research and education influences current teaching.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 5.3.5.1.		
	Code no.	Comments
Present		
Applied		
effective		

7.4.4.2. The medical college **should** ensure that interaction between medical research and education encourages and prepares students to engage in medical research and development.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.4.4.2		
	Code no.	Comments
Present		
Applied		
effective		

7.5. EDUCATIONAL EXPERTISE

Basic standards:

7.5.1. The medical college **must** have access to educational expertise where required.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied and effective: : ----------
----------(Refer to each finding the related code no. of the documents.)

Table of annexes for 7.5.1.		
	Code no.	Comments
Present		
Applied effective:		

7.5.2.

7.5.2.1. The medical college **must** formulate and implement a policy on the use of educational expertise in curriculum development.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.5.2.1.		
	Code no.	Comments

Present		
Applied		
effective		

7.5.2.2. The medical college **must** formulate and implement a policy on the use of educational expertise in development of teaching and assessment methods.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.5.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

7.5.3. The medical college **should** demonstrate evidence of the use of in-house or external educational expertise in staff development.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.5.3.		
	Code no.	Comments
Present		
Applied		
effective		

7.5.4. The medical college **should** pay attention to current expertise in educational evaluation and in research in the discipline of medical education.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.5.4.		
	Code no.	Comments
Present		
Applied		
effective		

7.5.5. The medical college **should** allow staff to pursue educational research interests.
Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.5.5.		
	Code no.	Comments
Present		
Applied		
effective		

7.6 EDUCATIONAL EXCHANGES

Basic standards:

7.6.1.

7.6.1.1. The medical college **must** formulate and implement a policy for national and international collaboration with other educational institutions, including staff and student mobility.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.6.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

7.6.1.2. The medical college **must** formulate and implement a policy for transfer of educational credits.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.6.1.2.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

7.6.2. The medical college **should** facilitate the regional and international exchange of staff and students by providing appropriate resources.

Finding; (narrative statement)

Present and applied : ----------

---------- (Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.6.2.		
	Code no.	Comments
Present and applied		
effective		

7.6.3. The medical college **should** ensure that exchange is purposefully organized, taking into account the needs of staff and students, and respecting ethical principles.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 7.6.3.		
	Code no.	Comments
Present		
Applied		
effective		

8- Governance and administration

8.1 GOVERNANCE

Basic standard:

8.1.1. The medical college **must** define its governance structures and functions including their relationships within the university.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

8.1.2.

8.1.2.1. The medical college **should** in its governance structures set out the committee structure, and reflect representation from principal stakeholders.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective: ----------

----------(Refer to each finding the related code no. of the documents.)

Table of annexes for 8.1.2.1.		
	Code no.	Comments
Present		
Applied and effective		

8.1.2.2. The medical college **should** in its governance structures set out the committee structure, and reflect representation from other stakeholders.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied and effective: ----------
----------(Refer to each finding the related code no. of the documents.)

Table of annexes for 8.1.2.2.		
	Code no.	Comments
Present		
Applied and effective		

8.1.3. The medical college **should** ensure transparency of the work of governance and its decisions.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.1.3.		
	Code no.	Comments
Present		
Applied		
effective		

8.2 ACADEMIC LEADERSHIP

Basic standard:

8.2.1. The medical college **must** describe the responsibilities of its academic leadership for the definition and management of the medical education program.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.2.1.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:

8.2.2. The medical college **should** periodically evaluate its academic leadership in relation to the achievement of its mission and intended educational outcomes.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.2.2.		
	Code no.	Comments
Present		
Applied		
effective		

8.3 EDUCATIONAL BUDGET AND RESOURCE ALLOCATION

Basic standards:

8.3.1. The medical college **must** have a clear line of responsibility and authority for resourcing the curriculum, including a dedicated educational budget.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.3.1.		
	Code no.	Comments
Present		
Applied		
effective		

8.3.2. The medical college **must** allocate the resources necessary for the implementation of the curriculum and distribute the educational resources in relation to educational needs.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.3.2.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

8.3.3. The medical college **should** have the autonomy to direct resources, including teaching staff remuneration, in an appropriate manner in order to achieve its intended educational outcomes.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.3.3.		
	Code no.	Comments
Present		
Applied		
effective		

8.3.4. The medical college **should** in the distribution of resources take into account the developments in medical sciences and the health needs of society.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.3.4.		
	Code no.	Comments
Present		
Applied		
effective		

8.4. ADMINISTRATION AND MANAGEMENT

Basic standards:

8.4.1.

8.4.1.1. The medical college **must** have an administrative and professional staff that is appropriate to support the implementation of its educational program and related activities.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.4.1.1.		
	Code no.	Comments
Present		
Applied		
effective		

8.4.1.2. The medical college **must** have an administrative and professional staff that is appropriate to ensure good management and resource deployment.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:

8.4.2. The medical college **should** formulate and implement an internal program for quality assurance of the management including regular review.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.4.2.		
	Code no.	Comments
Present		
Applied		
effective		

8.5 INTERACTION WITH HEALTH SECTOR

Basic standard:

8.5.1. The medical college **must** have constructive interaction with the health and health-related sectors of society and government.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------
----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.5.1.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standard:

8.5.2. The medical college **should** formalize its collaboration, including engagement of staff and students, with partners in the health sector.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------
----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 8.5.2.		
	Code no.	Comments
Present		
Applied		
effective		

9- Continuous renewal

Basic standards:

9.1. The medical college **must** as a dynamic and socially accountable institution initiate procedures for regularly reviewing and updating the process, structure, content, outcomes/competencies, assessment, and learning environment of the program.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.1.		
	Code no.	Comments
Present		
Applied		
effective		

9.2. The medical college **must** as a dynamic and socially accountable institution rectify documented deficiencies.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------

---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.2.		
	Code no.	Comments
Present		
Applied		
effective		

9.3. The medical college **must** as a dynamic and socially accountable institution allocate resources for continuous renewal.

Finding; (narrative statement)

Present : ----------

---------- (Refer to each finding the related code no. of the documents.)

Applied : ----------

----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.3.		
	Code no.	Comments
Present		
Applied		
effective		

Quality development standards:

9.4. The medical college **should** base the process of renewal on prospective studies and analyses and on results of the local evaluation and the medical education literature.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.4.		
	Code no.	Comments
Present		
Applied		
effective		

9.5. The medical college **should** ensure that the process of renewal and restructuring leads to the revision of its policies and practices in accordance with past experience, present activities, and future perspectives.

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.5.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.

9.6.1. The medical college **should** address the following issues in its process of renewal: adaptation of mission statement to the scientific, socio-economic and cultural development of the society. (cf. 1.1)

Finding; (narrative statement)

Present : ---
--- (Refer to each finding the related code no. of the documents.)
Applied : ---
---(Refer to each finding the related code no. of the documents.)
effective: ---------- ---
--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.1.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.2. The medical college **should** address the following issues in its process of renewal: modification of the intended educational outcomes of the graduating students in accordance with documented needs of the environment they will enter. The modification might include clinical skills, public health training, and involvement in patient care appropriate to responsibilities encountered upon graduation. (cf. 1.3)

Finding; (narrative statement)

Present : ---
--- (Refer to each finding the related code no. of the documents.)
Applied : ---
---(Refer to each finding the related code no. of the documents.)
effective: ---------- ---
--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.2.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.3. The medical college **should** address the following issues in its process of renewal: adaptation of the curriculum model and instructional methods to ensure that these are appropriate and relevant. (cf. 2.1)

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.3.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.4. The medical college **should** address the following issues in its process of renewal: adjustment of curricular elements and their relationships in keeping with developments in the basic biomedical, clinical, behavioral, and social sciences, changes in the demographic profile and health/disease pattern of the population, and socioeconomic and cultural conditions. The adjustment would ensure that new relevant knowledge, concepts, and methods are included, and outdated ones discarded. (cf. 2.2 - 2.6)

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.4.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.5. The medical college **should** address the following issues in its process of renewal: development of assessment principles, and the methods and the number of examinations according to changes in intended educational outcomes and instructional methods. (cf. 3.1 and 3.2)

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)

effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.5.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.6. The medical college **should** address the following issues in its process of renewal: adaptation of student recruitment policy, selection methods, and student intake to changing expectations and circumstances, human resource needs, changes in the premedical education system, and the requirements of the educational program. (cf. 5.1 and 5.2)

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.6.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.7. The medical college **should** address the following issues in its process of renewal: adaptation of academic staff recruitment and development policy according to changing needs. (cf. 6.1 and 6.2)

Finding; (narrative statement)

Present : ----------
---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.7.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.8. The medical college **should** address the following issues in its process of renewal: updating of educational resources according to changing needs, i.e. the student intake, size and profile of academic staff, and the educational program. (cf. 7.1 - 7.3)

Finding; (narrative statement)

Present : ---

--- (Refer to each finding the related code no. of the documents.)

Applied : ---

---(Refer to each finding the related code no. of the documents.)

effective: ---------- ---

--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.8.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.9. The medical college **should** address the following issues in its process of renewal: refinement of the process of program monitoring and evaluation. (cf. 4.1 – 4.4)

Finding; (narrative statement)

Present : ---

--- (Refer to each finding the related code no. of the documents.)

Applied : ---

---(Refer to each finding the related code no. of the documents.)

effective: ---------- ---

--- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.9.		
	Code no.	Comments
Present		
Applied		
effective		

9.6.10. The medical college **should** address the following issues in its process of renewal: development of the organizational structure and of governance and management to cope with changing circumstances and needs and, over time, accommodating the interests of the different groups of stakeholders. (cf. 8.1 – 8.5)

Finding; (narrative statement)

Present : ---

---------- (Refer to each finding the related code no. of the documents.)
Applied : ----------
----------(Refer to each finding the related code no. of the documents.)
effective: ---------- ----------
---------- (Refer to each finding the related code no. of the documents.)

Table of annexes for 9.6.10.		
	Code no.	Comments
Present		
Applied		
effective		

Appendix VI … Template of

EXIT MEETING

The Site-Visit to NAME OF THE COLLEGE AND UNIVERSITY by the SVT on VISIT DATE

During this site visit, team members assessed the medical education program at the NAME OF THE COLLEGE AND UNIVERSITY using the national standard for accreditation of medical colleges and include compliance recommendations.

The team expresses its sincere appreciation to the dean NAME OF THE DEAN, Faculty, staff, and students of the NAME OF THE COLLEGE AND UNIVERSITY for their high courtesy and warm welcoming and accommodations during the site visit.

NAMES OF THE CONTACT PERSON AT THE COLLEGE merit special recognition and commendation for the thoughtful visit preparations and professional support during the conduct of the site visit.

The SVT had enjoyed this experience with you and will report the findings and documents to the NCAMC within the next two weeks.

Once the NCAMC reaches its decision, the college will receive a copy of the final report and the letter of accreditation (that specifies the accreditation status of the medical education program).

"This concludes the Exit Session.

Please be advised there is no discussion of the findings after the exit statement has been read. The SVT leader can clarify the subsequent steps but should not engage in conversations about what the NCAMC is likely to do with respect to accreditation status or follow-up. There can be no discussion or debate about the team findings."

Appendix VII…Template of

Examples of questionnaire

These are Examples of the questionnaire the college may use for self-assessment study (shouldn't be used as copy and paste). These should be modified according to the college size, the number of staff, and stakeholders (Dean, faculty, students, health and education authorities, health association, and community representative**).**

1. **MISSION**

Please, respond to the following questions as part of your contribution to improving your college performance.

Please choose one; faculty member ( ), graduate ( ), student ( ), administrator ( ),

Target	Questions	Presentation
Curriculum committee faculty	Are mission and objectives used for planning and monitoring?	yes ( ), no( ) , I do not know ( )
Stakeholders	Do you participate in the setting of vision, mission, and objectives?	yes ( ), no ( ), I do not know ( )
stakeholders	Have mission and objectives been made known to you?	yes ( ) ,no( ), I do not know ( )
Faculty students	Are you aware of the change in program, policies, and procedures?	Strongly agree ( ), Agree( ) I do not know (),disagree( ), strongly disagree ( )
stakeholders	The mission and objectives are used to select curriculum content, for the learning experience	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( )
stakeholders	The mission and objectives are used in the evaluation of the effectiveness of the curriculum.	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( )
stakeholders	The linkage of the learning and curriculum objective are well defined.	Strongly agree ( ), Agree( ), I do not know () disagree( ),strongly disagree ( )

2. EDUCATIONAL PROGRAM

Target	Components	presentation
Students graduates	The curriculum provides you with learning opportunities in all disciplines to practice safely.	Strongly satisfied( ), moderately satisfied( ), I do not know (), unsatisfied ( ), unsatisfied at all( )
graduates	The curriculum prepare you for critical thinking and lifelong learning.	Yes( ), No( ), I do not know ()
Stakeholders	Satisfaction with Curriculum objectives content	Strongly satisfied( ), moderately satisfied( ), unsatisfied( ), unsatisfied at all( )
Stakeholders	The curriculum contains all items.	Strongly agree ( ), Agree( ), I do not know (), disagree( ),strongly disagree ( )
Faculty Students graduates	The students acquire knowledge, skills, attitude in health promotion and other disciplines	Strongly agree ( ), Agree( ), I do not know (), disagree( ),strongly disagree ( )
Faculty, students, graduates	How do you describe the relevance of the content of basic science to objectives?	Strongly satisfied( ), moderately satisfied( ), I do not know ( ),unsatisfied( ), unsatisfied at all( )
Faculty, students, graduates	Are you satisfied with Humanitarian values taught in clinical science?	Strongly satisfied( ), moderately satisfied( ), I do not know (), unsatisfied( ), unsatisfied at all( )
Faculty, students, graduates	Are the level of knowledge and understanding . skills and attitudes expected of the students at each phase of the curriculum known to Faculty /, students, / graduates?	Yes( ),No( ), I do not know ()
Faculty, students, graduates	The teaching methods foster students-center teaching, analytic thinking and life-long learning.	Yes( ),No( ), I do not know ()
Students	The students have adequate knowledge about new technologies.	Yes( ),No( ), I do not know ()
Students	To what extent are they adequate to new technology?	Strongly satisfied( ), moderately satisfied( ), I do not know (), unsatisfied( ), unsatisfied at all( )
Students graduates	There is early exposure of student to clinical setting.	Strongly satisfied( ), moderately satisfied( ), I do not know (), unsatisfied( ), unsatisfied at all( )
Faculty and student	What are the settings in which the training is conducted?	Open question
Faculty and student	There are training in PHCC, community clinics on common transient conditions.	Yes( ),No( ), I do not know (),
Students	Does have a project	Yes( ),No( )
Students graduates	Do you have training on medical ethics	Yes( ),No( )

3. ASSESSMENT OF STUDENT

Target	Components	presentation
students	Are assessment methods made known to students?	Strongly agree ( ), Agree( ) , I do not know ( ) ,disagree( ),strongly disagree ( )
Faculty students	Presence of continuous assessment (formative exam)	Yes( ), No( ) , I do not know (),
Students graduates	Presence of training on communication skills and attitude toward patient and team	Yes( ),No( ), I do not know ( ),
Students graduates	Presence of training on communication skills and attitude toward health care team	Yes( ), No( ), I do not know ( ).

4. PROGRAM EVALUATION

Target	Components	presentation
Faculty, students	the students and faculty have role in evaluation and feedback	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( ).
Document	feedback mechanism is important element in program evaluation	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( )
Curriculum committee faculty	The college have a mechanism to respond to community.	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( )

5. STUDENTS

Target	Components	presentation
Students	Presence of advisory board	Strongly satisfied( ), moderately satisfied( ), unsatisfied( ), unsatisfied at all( )
students	Availability of immunization program	Yes( ), No( ), I do not know ( ).
Faculty, students	Presence of elective activities	Yes( ), No( ), I do not know ().

6. ACADEMIC STAFF/ FACULTY

Target	Components	presentation Yes( ), No( )
Faculty ,students	Presence of recruitment and promotion university regulations	Yes( ), No( ), I do not know ( ),
Faculty	Presence of appointments between basic and clinical science	Yes( ), No( ), I do not know (),
Faculty	Presence of part time appointments	Yes( ), No( ), I do not know (),
Faculty	Presence of appointments between college and hospital	Yes( ), No( ), I do not know (),
Faculty	Staff have access to the development program	Yes( ), No( ), I do not know (),
Faculty	Presence of evidence-based Teaching facilities	Yes( ), No( ), I do not know (),

7. EDUCATIONAL RESOURCES

Target	Components	presentation
Faculty curriculum committee	The physical resources respond to curriculum changes	Strongly agree ( ), Agree( ), I do not know (), disagree ( ), strongly disagree ( )
Hospital administrators	Are affiliated health institutions are accredited	Yes( ), No( ), I do not know ( ).
Faculty, students	All specialties are present at affiliated hospitals	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( ).
Faculty , students	Presence of ambulatory care services	%opinion Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( ).
Faculty , students	Availability of educational facilities in hospitals	Yes( ), No( ), I do not know ().
Students, graduates	Availability of welfare facilities	Yes( ), No( ), I do not know ( ).
Students, graduates	Spaces for sport and elective activities	Yes( ), No( ), I do not know (),

8. GOVERNANCE AND ADMINISTRATION OF THE MEDICAL COLLEGE.

Target	Components	presentation
Curriculum committee	Obvious line for control over curriculum	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( )
Faculty and senior hospital administration	Sharing of college objectives	Strongly agree ( ), Agree( ) , I do not know (), disagree( ),strongly disagree ( )
College administrator	Other sources of funding if present?	%opinion Strongly agree ( ), Agree( ), I do not know (), disagree( ),strongly disagree ( )
Staff	Are you informed about responsibilities	Strongly agree ( ), Agree( ), I do not know (), disagree( ),strongly disagree ( )
Staff, students	Presence of a site for all policies and regulations	Yes( ), No( ), I do not know (),
faculty	The college is committed to Iraqi regulations	Yes( ), No( ), I do not know (),

1. CONTINUOUS RENEWAL

Target	Components	presentation
stakeholders	Presence of mechanism review of mission	Strongly satisfied( ), moderately satisfied( ), I do not know (), unsatisfied( ), unsatisfied at all( )
Faculty	The college responds to the community requirements	Strongly agree ( ), Agree( ), I do not know ( ), disagree ( ),strongly disagree ( )

Appendix VIII… Template of
Stakeholders Interview

Instructions to the interviewer

1. Introduce yourself
2. Explain the reason for the interview
3. Agree on time limits and keep to them. Interviews should be kept to around an hour in length.
4. Ask factual questions before opinion ones
5. Use probes or exploratory issues as needed. Probes include:
6. Would you give me an example?
7. Can you elaborate on that idea?
8. Would you explain that further?
9. I'm not sure I understand what you're saying.
10. Is there anything else?
11. Do not read out the choices mentioned below some of the explanatory questions. Use them as suggestions and as a guide for recording responses.
12. Inform about conditions of confidentiality.
13. Ask permission for use of a tape recorder and/or note-taking if you are to use it.
14. Paraphrase: let the respondent see a summary of the findings of the interview.

General information:

- Interviewer(s):
- Date of interview:
- Name of person interviewed:
- Position:

Introduction (Including informed consent)

I want to thank you for taking the time to meet with me today. My name is _____. In an attempt for self-assessment and improvement of the educational program, this structured interview was designed for key stakeholders for evaluation of their satisfaction and level of participation in addition to assessment of various educational activities relevance to later practice. The interview should take less than an hour. I will be taping the session because I don't want to miss any of your comments. Although I will be taking some notes during the session, I can't possibly write fast enough to get it all down. Because we're on tape, please be sure to speak up so that we don't miss your comments. All responses will be kept confidential. This means that your interview responses will only be shared with research team members, and we will ensure that any information we include in our report does not identify you as the respondent, if this is your wish. Remember, you don't have to talk about anything you don't want to, and you may end the interview at any time. Are there any questions about what I have just explained? Are you willing to participate in this interview?

Signed Interviewee Signed Interviewer
Date

Core questions and Exploratory Issues

- ❖ This interview guide identifies core questions that should be covered in stakeholder interviews in each review site. While each individual stakeholder may not be able to address each core question, the combination of interviews in each site should cover the core questions. However, reviewers will need to make judgments about which of the questions to be covered should be pursued with each individual stakeholder.
- ❖ Each core question is followed by a list of exploratory issues that reviewers should pursue, as appropriate, in the interview. As with the core questions, some of the exploratory issues will be more or less applicable to individual stakeholders.
- ❖ Notes from the interview are recorded on the Stakeholder Interview Guide form to be later summarized and interpreted by the survey team.

1. Educational program.
Core Question: Describe the extent to which the college educational program is appropriate to produce a competent basic doctor and lifelong learner?
Probing and Exploratory Issues would you describe the curriculum of the college? (More than one item may be chosen) □ Discipline-based □ Integrated □ Community-based □ Problem-based □ Systematic □ Hospital-based □ Student-centered □ Teacher-centered □ Were you ever a member of the curriculum committee of the college? □ If yes, what was your contribution? □ Are you aware of the competencies required from the graduates of the college? Show the interviewed stakeholder the list of college competencies then ask: □ Do you think that the college's educational program will lead to achievement of those competencies? Elaborate □ Do you think that those competencies are sufficient to produce competent physicians? Elaborate □ Do the competencies expected from the college student upon graduation match your expectations for a safe basic doctor practice? □ Would you like to add any other competencies to those predetermined by the college? □ How would you judge the alumni readiness for postgraduate medical training upon graduation? □ To what extent does the curriculum encourage the development of each of the following scientific methods? **Critical thinking** □To a great extent □To some extent □To little extent □No existence of such methods **Analytical thinking** □To a great extent □To some extent □To little extent □No existence of such methods **Evidence-based medicine** □To a great extent □To some extent □To little extent □No existence of such methods **Life long learning** □To a great extent □To some extent □To little extent □No existence of such methods
Please use separate paper for feedback

3. Students

Core Question: In your opinion, are the size and nature of student intake decided in consultation with the relevant stakeholders and reviewed periodically to meet the needs of the community and society.

Probing and Exploratory Issues
- Do you know the student admission policy of the college?
- Are you satisfied with this students' admission policy? Elaborate
- Have you ever been consulted about the size and nature of student intake?
- If yes, what was your opinion? And was it taken into consideration in the actions of the college or relevant decision-making authorities?
- Is the admission policy regulated periodically to meet the needs of the community and society? If yes, elaborate.
- If not, what are the obstacles in your opinion to such a periodical review?

Please use a separate paper for feedback

2. Program evaluation

Core Question: How are the principal stakeholders within the medical college involved in program evaluation?

Probing and Exploratory Issues
- Have you been ever asked to give your feedback about the educational program of the college?
- Have you ever been asked to share in the program evaluation of the college?
- If yes, how? To what extent or in which parts of the evaluations were stakeholders involved?
- Have you ever been informed of the results of the program evaluation of the college?
- If yes, how?
- To what extent are stakeholders involved in the evaluation and development of the program? (Ask about numbers and positions of those involved)
- What difficulties were encountered in the nearest evaluation you shared in? What actions were taken to resolve them?

Please use a separate paper for feedback

3. Governance and administration

Core Question: How are the principal stakeholders within the medical college involved in the governance and organizational structure of the college?

Probing and Exploratory Issues
- Are you a member of any of the college committees?
- Are you a member of the College Board?
- Is there any sort of collaboration between you and the college? Elaborate
- In your opinion, is the stakeholders' representation and contribution to the governance and administration of the college adequate?

Please use a separate paper for feedback
4. Overall satisfaction of program quality
Core Question: Are you satisfied with the overall quality of the educational program?
How would you describe the college graduate's performance in the workplace as compared to other college graduates? □ Would you recommend this program to prospective students? □ In your opinion, what are the most important points of strength about the medical college? □ In your opinion, what are the most important points of weakness about your medical college? □ Mention threats (if any). □ Mention opportunities (if any).
Please use separate paper for feedback

Students' interview guide

The interview guide used for the self-study can be used during the various targeted populations during the site visit. The following areas may be added as relevant:

Assessment of Students
Core Question: In your opinion, are the assessment methods clearly compatible with educational objectives and can promote learning? Probing and Exploratory Issues □ As far as you know, are there any new assessment methods introduced recently to your assessment system? □ Are the number and nature of examinations assessing the various curricular elements to encourage integrated learning? □ As regards the methods of students' students, is there a balance between formative and summative assessment?
Educational resources
Core Question: Does the college have sufficient resources to ensure that the curriculum can be delivered adequately? . Probing and Exploratory Issues □ Do you think …… is available sufficiently as an educational resource □ Physical facilities □ Clinical experience □ Clinical training facilities □ Educational expertise □ Information technology □ Does the college have a policy that fosters the relationship between research and education? □ Please describe the research facilities and areas of research priorities at the college □ Does the college provide appropriate resources to facilitate regional and international exchange of academic staff?

5. Mission and Objectives

Core Question: How has the college involved its principal stakeholders in formulating and reviewing the mission and objective statements?

Probing and Exploratory Issues

- Do you know the mission of the medical college?
- Do you think …… is well represented in the mission?

  a- Social responsibility. b- Research attainment. c- Community involvement. d. Readiness for postgraduate training

- Have you participated in either mission formulation or review?
- If yes, what was your share?
- What actions did the college take to encourage stakeholder involvement in formulating and reviewing the mission and objective statements?

Show the college ***general objectives to the interviewed stakeholder then ask:***

- In your opinion, do the school general objectives reflect the mission?

Please use separate paper for feedback

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