



Тамбовский
государственный
университет
имени
Г.Р. Державина



REPORT

ON EXTERNAL REVIEW

of the cluster of educational programmes

«Obstetrics and Gynaecology» (31.08.01),
«Ophthalmology» (31.08.59)

delivered by Derzhavin Tambov State University



Tambov, 2020

REPORT
ON EXTERNAL REVIEW

of the cluster of educational programmes:

«Obstetrics and Gynaecology» (31.08.01),

«Ophthalmology» (31.08.59)

delivered by Derzhavin Tambov State University



Chair of the Review Panel

Sidharth Verma

Tambov, 2020

CONTENTS

INTRODUCTION	4
1. CONTEXT AND MAIN STAGES OF THE REVIEW.....	4
1.1 Terms of Reference.....	4
1.2 Composition of the Review Panel	4
1.3 Purposes and objectives of the review	5
1.4 Stages of the review	6
2. DESCRIPTION OF THE STUDY PROGRAMMES.....	9
3. FINDINGS	11
3.1 Standard 1. Mission and educational outcomes	11
3.2 Standard 2. Educational programmes	12
3.3 Standard 3. Assessment of trainees	13
3.4 Standard 4. Trainees	14
3.5 Standard 5. Trainers	15
3.6 Standard 6. Educational resources.....	17
3.7 Standard 7. Programme evaluation.....	18
3.8 Standard 8. Governance and administration	19
3.9 Standard 9. Continuous renewal.....	21
4. RECOMMENDATIONS FOR IMPROVEMENT	22
5. CONCLUSION	24
ANNEX A.....	25
ANNEX Б.....	27
ANNEX В.....	31

INTRODUCTION

External review of the cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) delivered by Derzhavin Tambov State University (hereinafter – Derzhavin TSU, University) was conducted on November 25-27, 2020 and included the analysis of the self-evaluation report, site visit to the University and preparation of the present report.

The main goal of the external review is to determine the correspondence of the reviewed cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) delivered by Derzhavin Tambov State University to the standards and criteria of public accreditation developed by the National Centre for Public Accreditation (hereinafter - NCPA) in compliance with the European Standards of Quality Assurance in Education ESG-ENQA, international standards of the World Federation for Medical Education (WFME), national requirements and priorities of the healthcare system in the Russian Federation.

The Final Report is the basis for decision making of the National Accreditation Board on public accreditation of the educational programmes in compliance with the standards and criteria of NCPA.

1. CONTEXT AND MAIN STAGES OF THE REVIEW

1.1 Terms of Reference

According to item 1, 3 article 96 of the Federal Law of the Russian Federation of December 29, 2012 No.273-FZ “On education in the Russian Federation” organizations, which implement educational activities, may apply for public accreditation in various national, foreign and international institutions. Employers, employer associations and designated organizations have the right to conduct public accreditation of professional educational programmes, which are delivered by an educational institution.

In order to conduct public accreditation of the cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) Derzhavin Tambov State University applied to NCPA, which operates on the national level and is recognized by leading international organizations of quality assurance in higher education.

1.2 Composition of the Review Panel

The international experts were nominated by foreign quality assurance agencies upon NCPA’s request.

The Russian experts were nominated by the Guild of Experts in Higher Education.

The employer representative was nominated by the Department of Healthcare of the Tambov Region.

The representative of the trainees’ community was suggested by Tambov State Technical University.

The composition of the External Review Panel was approved by NCPA.

The Review Panel included **2** foreign and **4** Russian experts:

- **Sidharth Verma** – M.D., Associate Professor at the Department of Anaesthesiology and Pain Medicine, Head of the Pain Clinic, DY Patil University School of Medicine (India), co-founder of the Mumbai Pain School, visiting expert lecturer (USA, Hungary, Russia, India), Founder Member and Joint Secretary of the Indian Society of Pain Clinicians, member of the Indian Society of Anaesthesiologists, Research Society of Anaesthesiology and Clinical Pharmacology, International Association for the Study of Pain, World Institute of Pain, Indian Society for Study of Pain, Professional Associate of the American Heart Association and American Stroke Association — foreign expert, Review Chair
- **Saule Sydykova** – Candidate of Medicine, First Vice-Rector, member of the Board of Astana Medical University, member of the Expert Board on Medical Education, Independent Agency for Accreditation and Rating, Kazakhstan — foreign expert, Panel member
- **Sergei Ryzhkin** – Doctor of Medicine, Associate Professor, Department of Diagnostic Radiology, Head of the Department of Further Professional Education, Kazan State Academy of Medicine, member of the Russian Society of Roentgenologists and Radiologists, Academic Secretary of the Division of Medical and Biological Sciences, Tatarstan Academy of Sciences — Russian expert, Deputy Review Chair
- **Nina Zhernakova** - Doctor of Medicine, Professor, Deputy Director for Research at the Institute of Medicine, supervisor of the field of study «General Medicine and Pediatrics», Belgorod State University, member of the Guild of Experts in Higher Education — Russian expert, Deputy Review Chair
- **Tatiana Vialtseva** - Deputy Head of the Department of Healthcare of the Tambov Region – representative of professional community, Panel member
- **Denis Novokhatkii** – Postgraduate 4th year student, field of study «Photonics, Instrumentation, Optical and Bioengineering Systems and Technologies», Tambov State Technical University — representative of students, Panel member

The participation of the Russian and foreign representatives of the higher education system gave an opportunity to analyze the activity of the programmes under evaluation in the context of the world trends in quality assurance and within the scope of the national educational system.

The focused expert knowledge of the Panel members, long-term experience of working in the system of higher education and profession, active position of students and employers became the basis for effective consideration of issues within the framework of evaluation.

1.3 Purposes and objectives of the review

The purpose of public accreditation is improving quality of education and forming quality culture in educational institutions, discovering best practices in continuous enhancing the educational quality and public information on educational institutions in accordance with the European educational quality standards and international standards of the World Federation for Medical Education (WFME).

The main goal of the peer review is to determine the correspondence of the reviewed cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) delivered by Derzhavin Tambov State University to the standards and criteria of public accreditation, which are developed by NCPA in compliance with the European Standards of Quality Assurance in Education ESG-ENQA, international standards of the World Federation for Medical Education (WFME); and to develop recommendations for the study programme with the purpose of improving the content and structure of the educational process.

1.4 Stages of the review

The review included three main stages:

1.4.1 Study of the self-evaluation report

Derzhavin Tambov State University was responsible for conducting the self-evaluation procedure, developing and timely submitting of the self-evaluation report to NCPA.

According to the "Guidelines on Self-evaluation of Educational Programmes", which were developed by NCPA, the self-evaluation report is written on **71** pages and included: introduction, findings, conclusions, **21** annexes. The self-evaluation procedure was conducted on the basis of SWOT-analysis according to every standard of NCPA.

According to the review schedule, the self-evaluation report of the cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) was submitted to NCPA and mailed to the members of the review panel 30 days before the site-visit.

While studying the self-evaluation report the Panel members formed a preliminary opinion about the reviewed educational programmes on compliance with the standards of NCPA and international standards of education quality.

The members of the Review Panel assessed the quality of preparation of the self-evaluation report with regards to its text structuring, compliance of information with the report's sections; quality of perception; sufficiency of analytical data; availability of references to supporting documents; completeness of information, which helped to make a preliminary expert opinion.

According to the standards and criteria of accreditation of NCPA the preliminary assessment of the cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) may be defined as **substantial compliance**.

The following issues were flagged for a special analysis during the site visit:

1. How foreign partners and stakeholders are involved in the definition and adjustment of learning outcomes? (Criterion 1.3 Standard 1)

2.-The panel would like to see evidence of using the research results of the Medical Institute in the reviewed educational programmes (Criterion 2.2 Standard 2)

3. How the content of the educational programmes is adapted to the changing conditions and requirements of the healthcare system?(Criterion 2.3 Standard 2)

4. The panel would like to see examples of trainees' involvement in research. Please, review corresponding research publications, conference materials, and other research materials.(Criterion 6.4 Standard 6)

5. Do foreign partners participate in reviewing the elements of the educational programmes (programmes of State Final Examinations, working programmes, etc.)? Provide evidence.(Criterion 6.5 Standard 6)

6. The panel would like to see examples of considering trainees' opinions in the issues of the University management (Criterion 4.4. Standard 4)

7. The panel would like to see evidence of trainees' participation in the development and adjustment of the educational programmes–(Criterion 4.4. Standard 4)

8. Does the Medical Institute cooperate with the graduates of postgraduate programmes? Could you provide examples of such cooperation with national and foreign students?

9. What are the ways of cooperation between the University and healthcare governing bodies and medical institutions in terms of the project «University-Region»?

During the preliminary meeting the Panel members made suggestions, which defined the main strategy of the site visit.

1.4.2 Site visit

The Review Panel held meetings at the University on November 25-27, 2020 with the purpose of confirming the accuracy of the information, which was presented in the self-evaluation report, collecting extra information on the implementation of the accredited programme and checking its compliance with the standards and criteria of NCPA developed in accordance with the European standards of education quality assurance and international standards of the World Federation for Medical Education (WFME).

The time line and the agenda of the site-visit were determined by NCPA and approved by the administration of the University and the members of the Review Panel.

During the site-visit the Review Panel members conducted a number of meetings and interviews with:

- The University administration, people responsible for accreditation;
- Heads of subdivisions, Institute Director, Deputy Directors and Heads of Departments;
- Teachers;
- Students;
- Graduates;
- Employers.

During the site visit the External Review Panel visited the library, assembly hall, Museum of Anatomy, dormitories, sports complex (stadium, ice rink, sports hall «Manezh»), classrooms: №30, №77, №1, №88, Laboratory for Improvement of Human Functional State №82, classroom of Pharmacology №107, Museum of Medicine, educational and practical centre «Razvitie», classroom – Laboratory of Biochemistry №X9, Laboratory of Organic Synthesis and High Molecular Mass Compounds, accreditation and simulation centre.

The Chair of the Review Panel managed the Panel's work.

The Panel considers that the self-evaluation report, which was presented by the University provided the experts with an opportunity to form an integral view on specific features of delivery of the reviewed cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59).

The Review Panel considers it necessary to highlight the effective cooperation of the experts and NCPA employees during the site-visit and its preparation.

The Review Panel notes the highest level of organizational provision and constructive work.

The executive staff of the University provided the administrative support, which included arrangement of meetings and interviews, provision with the rooms, computers with an access to the Internet, necessary research, academic and methodological documents.

The Review Panel members requested additional documents during the site-visit to the University.

The experts reviewed the following additional materials:

- Educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) with the main components: working programmes of disciplines, programmes of work placement, pools of assessment tools;
- Contracts with the facilities for work placement;
- Documents on trainees' participation in research;
- Free use agreements with clinical facilities;
- Documents of the point rating system;
- Regulatory documents;
- Orders on work placement;
- Guidelines on support of the work placement;
- Regulatory documents on Russian language testing of foreign students.

On the last day of the site-visit the Chair of the Review Panel presented an oral report on the general conclusions to the executive staff of the University, Institute Directors, teaching staff and students.

The agenda of the site-visit can be found in Annex A.

1.4.3 Conclusion on the findings of the external review

Based on the results of the external review of Derzhavin Tambov State University BЭK the Review Panel submitted the Report on the results of the external review of the cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) delivered by the educational institution.

The draft report of 24 pages excluding Annexes was developed by the Chair of the Review Panel, approved by the other Review panel members and submitted to the National Centre for Public Accreditation. Then the Report was mailed to the University's administration for making factual amendments.

2. DESCRIPTION OF THE STUDY PROGRAMMES

According to the Statutes approved by the order of 25.12.2018 № 1267, Derzhavin Tambov State University of the Ministry of Science and Higher Education of the Russian Federation is an educational institution of higher education; its main goal is to carry out educational activities by delivering higher education programmes and research activities in order to perform educational, research, social and other functions of a non-commercial nature.

Currently, the University offers 224 programmes:

- 81 Bachelor programmes,
- 10 Specialist programmes,
- 71 Master programmes,
- 16 residency programmes,
- 34 postgraduate programmes,
- 7 secondary vocational education programmes,
- 5 secondary general education programmes.

The educational programme 31.08.01 «Obstetrics and Gynaecology» is delivered by 6 Candidates and 1 Doctor of Sciences, and the programme 31.08.59 «Ophthalmology» is delivered by 2 Candidates and 4 Doctors of Sciences.

The postgraduate students are involved in research carried out by the teaching staff. For the last three years 2 monographs and 59 research articles were published; 14 of them were published in the journals of Scopus, 40 articles were published in the journals of the Higher Attestation Commission; 4 articles were published in the journals of the Russian Science Citation Index, and 11 articles are placed in electronic resources. 16 research conferences were organized. 2 patents were registered. 2 monographs, 1 coursebook and 6 study guides were published. The average Hirsch index of the teachers of the Medical Institute is 4.7.

Postgraduate students annually participate in the competitions of research works, including the competition of innovation projects of the programme «Umnik» of the Innovation Promotion Fund.

Clinical facilities for work placement (Tambov Ophthalmology Hospital; Fedorov National Medical Research Centre «Eye Microsurgery»; Tambov Regional Hospital for Children; Tambov Hospital №3, Babenko Tambov Regional Hospital, etc.) allow students to inform themselves about the main tendencies and latest developments in Ophthalmology, Obstetrics and Gynaecology.

Material and technical resources include:

- rooms for healthcare delivery for patients provided with special equipment and (or) medical products and consumable materials allowing students to master their skills necessary for professional activities, and other equipment necessary for delivery of the postgraduate programme (5 rooms in the Fedorov National Medical Research Centre «Eye Microsurgery» of the Ministry of Healthcare of the Russian Federation, Tambov branch (Tambov Region, Tambov, Rasskazovskoe Shosse Street, 1) and 4 rooms in the Tambov Regional Hospital for Children (Tambov Region, Tambov, Ryleeva Str., 80));
- rooms provided with model and simulation equipment, which imitates medical procedures and interventions and allows students to master their skills necessary for professional activities (12 stations and 2 debriefing rooms in the

Accreditation and Simulation Centre of the University (Tambov Region, Tambov, Moskovskaia Str., 1 A));

- Hall of Anatomy and (or) rooms for work with biological models (Classroom № 1 A; Tambov Region, Tambov, Sovetskaia/Kommunalnaia Str., 93/2);

- rooms for delivering lectures, seminars, group and individual consultations, conducting formative assessment (conference hall in the Fedorov National Medical Research Centre «Eye Microsurgery» (Tambov Region, Tambov, Rasskazovskoe Shosse Street, 1), 5 rooms in the Tambov Regional Hospital for Children (Tambov Region, Tambov, Ryleeva Str., 80); 4 classrooms (№ 99, 103, 107, 112; Tambov Region, Tambov, Sovetskaia/Kommunalnaia Str., 93/2);

- rooms for individual work of students with an access to the Internet and the electronic educational environment Moodle (classroom № 53 provided with 14 computers).

The rooms for delivering lectures and holding seminars are provided with the multimedia equipment, computers and licensed software.

In 2019 the University was ranked 137th among 327 HEIs according to the National Ranking of Universities Interfax. The University is a leader in the region by the parameters «Internationalization» and «Brand».

In the National Ranking of Russian HEIs the University is ranked 34th in the category «Classical HEIs».

The University is one of 39 Russian HEIs, which carry out the priority project «Development of Export Capacity of the Russian Education System». The project aims at raising attractiveness and competitiveness of Russian education on the international market.

The University carries out international activities: agreements on joint research and educational activities were signed with the Martin Luther University (Germany), Baghdad University (Iraq), Al-Farabi Kazakh National University (Almaty), Karaganda State Medical University (Kazakhstan), Qingdao University (China), Xi'an Jiaotong University (China), Kyrgyz-Russian Slavic University named after the first President of Russia B.N. Yeltsin (Kyrgyzstan), the University of Luxembourg, Abuali-ibni-Sino Tajik State Medical University, Tunis El Manar University, Bulent Esevit University (Turkey), Samarkand State Medical Institute (Uzbekistan), Bukhara State Medical University named after I. Abuali-ibni-Sino of the Ministry of Health of the Republic of Uzbekistan, Charles University (Czech Republic).

Graduates' employability is 80-90%; 97% of the graduates find jobs in the medical institutions of the Tambov Region.

3. FINDINGS

3.1 Standard 1. Mission and educational outcomes

Compliance with the standard: substantial compliance

Table 1 - Criteria to Standard 1

Nº	Subject of evaluation	Mark
1.	Mission and participation of stakeholders in its development	B
2.	Professionalism and professional autonomy	B
3.	Educational outcomes and participation of stakeholders in their assessment	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the Strategic developmental plan of Derzhavin Tambov State University till 2025, the results of the meetings with the University administration, Director of the Medical Institute, Deputy Directors, Heads of Departments, representatives of professional community, and graduates showed substantial compliance of the University with the requirements.

The mission of the Medical Institute is clearly defined; the majority of stakeholders and the healthcare system are informed about it. The mission outlines the aims and the educational strategy resulting in a medical doctor who is competent to undertake comprehensive appropriate medical practice in the defined field of medicine and is capable of undertaking the roles of doctors as defined by the health sector, able to work within a professional team, committed and prepared to life-long learning and participation in continuing medical education/continuing professional development.

However, the analysis of the documents and meetings with the University administration, Director of the Medical Institute, Deputy Directors, Heads of Departments, representatives of professional community, and graduates showed that the mission should be reviewed with the account of education internationalization.

Achievements:

1. The mission is defined; the majority of stakeholders and the healthcare system are informed about it; it reflects medical needs of the society and the healthcare system, as well as aims and educational strategy.

2. Stakeholders (University administration, teaching staff, students) are involved in the development of the mission and expected learning outcomes.

Recommendations:

1. The mission should be reviewed with the account of internationalization of medical education.

2. The teachers and employers should be involved in the development of the mission and learning outcomes.

3.2 Standard 2. Educational programmes

Compliance with the standard: substantial compliance

Table 2 - Criteria to Standard 2

Nº	Subject of evaluation	Mark
1.	Development of the educational programme	B
2.	Scientific method	B
3.	Content of the curriculum	B
4.	Programme structure, composition and duration	B
5.	Programme management	B
6.	The relation between PME and service	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the University regulatory documents on the development and delivery of the educational programmes 31.08.01 Obstetrics and Gynaecology, 31.08.59 Ophthalmology (syllabi of disciplines, programmes of work placement, state final attestation, and pools of assessment tools), the results of the meetings with the administration of the University, Medical Institute, Heads of Departments, teachers, students, employers, and graduates showed that:

- the educational programmes are developed in compliance with the Federal State Educational Standards and are based on a student-centered approach and integrate theoretical and practical components;

- the educational programmes are delivered in accordance with the principles of equality at the Medical Institute;

- practice-oriented training is used, which includes personal contribution of the students to the delivery of services for the patients and shared responsibility for the results of these services;

- training of students is carried out under guidance of a supervisor, which includes regular assessment and feedback;

- during the whole period of training the teaching of the principles of scientific method is provided, which is used in medical research, including research into clinical medicine and epidemiology;

- the educational programmes comprise the results of modern research, clinical work, theory and practice of basic biomedical, clinical, behavioural and social sciences and preventive medicine, clinical decision-making, communication skills, medical ethics, public health and managerial disciplines;

- the content, composition and structure of the courses/modules; the relation between the main and elective components of the educational programmes is in compliance with the requirements of the Federal State Educational Standards.

The Panel noted that the Medical Institute approved the procedures of the development, approval and adjustment of the postgraduate educational programmes; there are subdivisions responsible for planning and delivery of the educational programmes in order to achieve expected learning outcomes.

Clinical training is carried out in hospitals (Fedorov National Medical Research Centre «Eye Microsurgery»; Tambov Ophthalmology Hospital, Tambov Regional Hospital for Children, Tambov Hospital №3, «Archbishop

Luke Hospital for Children №1 »); the opportunities of the healthcare system are effectively used in the educational process.

Work placement of the trainees is carried out on the basis of these medical institutions, where the students have a possibility to supervise patients, study the disease state and approaches to effective treatment.

Achievements:

1. The students do research, which is carried out on the basis of modern clinical facilities.

2. The 1st year students are rotated between the hospital divisions every month; the 2nd year students work in a certain division most of their time (2-3 months) for deeper learning. Their supervisors are heads of hospital divisions and leading physicians.

3. The trainees take part in online and offline research and educational conferences on the basis of the Fedorov National Medical Research Centre «Eye Microsurgery». The information of the conferences is published in the WhatsApp chat «Science» every day.

4. The trainees publish articles in the journals of the Higher Attestation Commission and carry out projects to receive grants.

Recommendations:

1. Basic education of the trainers should correspond to the disciplines they teach.

2. The training of the students should be enhanced by developing their communication skills and medical ethics.

3. The students should have greater access to the simulation equipment in order to train practical skills.

4. Mentorship should be more actively used in the educational process; and the mechanisms of trainers' incentives should be developed.

5. Teaching the principles of scientific method should be a required component of the educational programmes.

3.3 Standard 3. Assessment of trainees

Compliance with the standard: substantial compliance

Table 3 - Criteria to Standard 3

Nº	Subject of evaluation	Mark
1.	Assessment methods	B
2.	Relation between assessment and learning	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the University regulatory documents on the development and delivery of the educational programmes 31.08.01 Obstetrics and Gynaecology, 31.08.59 Ophthalmology (syllabi of disciplines, programmes of work placement, state final attestation, and pools of assessment tools, data on trainees' academic progress), the results of the meetings with the administration of the University, Medical Institute, Heads of Departments, teachers, students, and graduates showed that:

- the principles, methods and practices for assessment of the trainees are approved at the Medical Institute, including criteria for the exams and the number of allowed retakings of exams;
- the assessment procedures comprise knowledge, skills, relations and professional conduct;
- a wide range of assessment methods and ways is used depending on their relevance;
- there is no conflict of interest when using assessment methods and assessment results;
- the appeals and complaints system is in place;
- the assessment procedures and their results are open; the students are informed about the criteria and assessment procedures.

Achievements:

1. The Panel members commend high academic progress of the trainees.
2. Modern methods are used for assessment of trainees' achievements: multifunctional simulation technologies, case-study, stations of the objective standardized clinical exam.
3. The system of appeals and complaints is effectively used.
4. The assessment procedures and their results are open and transparent.

Recommendations:

The University should continue work on updating the procedures of knowledge, skills, and competences assessment, pools of assessment tools and assessment methods. Practitioners from the healthcare system, foreign partners and external examiners should be involved in this process.

3.4 Standard 4. Trainees

Compliance with the standard: substantial compliance

Table 4 - Criteria to Standard 4

Nº	Subject of evaluation	Mark
1.	Admission policy and selection	B
2.	Number of trainees	B
3.	Trainee counselling and support	B
4.	Trainee representation	B
5.	Working conditions	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the regulatory documents of the Medical Institute, the results of the meetings with the administration of the Institute, Heads of Departments, teachers, students, and graduates showed high compliance with the requirements of the standard.

The policy on trainees' admission is based on the principals of objectivity and includes clear procedures of the trainees' selection process.

There are 38 trainees on the Programme 31.08.01 Obstetrics and Gynaecology and 31.08.59 Ophthalmology, 8 of them are foreign students.

There is a system of appeals on trainees' admission.

The admission quotas are determined on the basis of the results of the competition process with the account of material, technical and educational resources of the University.

The University has a programme of trainees' support on social, financial and personal issues and allocates corresponding resources. There is a multifunctional centre working on the principle of a «single window system», where trainees can receive various documents; thus, they do not need to go through time consuming bureaucratic procedures.

There is a feedback system from the trainees on the conditions and organization of the educational process.

There are financial support programmes for the trainees. There is an opportunity for trainees to have a gap year.

Achievements:

1. There is a system of academic counseling of trainees. The University has a programme of trainees' support on social, financial and personal issues and allocates corresponding resources. Confidentiality of counseling and support is provided.

2. When delivering the educational programmes, the requirements of various groups of trainees are taken into account. The trainees have a possibility to choose an individual learning path.

3. There is a regional office of the Russian public movement «Medical Volunteers» and other public organizations on the basis of the University.

Recommendations:

1. The feedback system from the trainees on the conditions and organization of the educational process should be regularly and more comprehensively used. The results of these surveys should be comprehensively and regularly used in the review of the educational programmes, including social support, conditions and organization of the educational process.

2. The trainees should be represented in the collegiate and consultative bodies of the University management.

3. The trainees should be involved in the development, management and assessment of educational programmes.

4. The trainees' council should enhance its activities in the sphere of trainees' social support.

5. The language proficiency of the trainees should be improved in order to enhance academic mobility and work with foreign databases.

6. The association of graduates of the University medical programmes should be established.

3.5 Standard 5. Trainers

Compliance with the standard: substantial compliance

Table 5 - Criteria to Standard 5

Nº	Subject of evaluation	Mark
1.	Recruitment and selection policy	C
2.	Staff activity and staff development	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the regulatory documents of the Medical Institute, the results of the meetings with the administration of the Institute, Heads of Departments, and teachers showed that:

- there is a policy on recruitment of the staff (trainers, supervisors and teachers), which specifies the expertise required, job duties and responsibilities;

- criteria for scientific, educational and clinical merit, including the balance of teaching, research and service qualifications and administrative work in the sphere of health care are established;

- the staff policy is formulated and implemented and recognizes academic activities of the teachers (awards, promotion) with the account of research achievements, qualification and practice;

- There is a system of human resource development, which requires regular advance training for the staff.

- the Heads of Departments involve highly qualified researchers and managers from the practical sphere of the healthcare system, doctors and specialists from medical institutions in delivering the educational programmes.

However, it was found that out of 30 teachers of this Department only the Head of the Department of Obstetrics, Gynaecology and Pediatrics has an academic degree.

Achievements:

1. The academic degree holders' rate is high among teachers delivering the programme 31.08.59 Ophthalmology. It is taught by 11 trainers: 2 Doctors of Medicine and Professors (O. Fabrikantov, V. Machekhin); 5 Associate Professors, 4 of them are Candidates of Medicine (E. Krasiuk, S. Nikolashin, I. Lev, G. Manaenkova, A. Goydin); 4 senior teachers, 3 of them are Candidates of Medicine (Y. Matrosova, R. Osmanov, I. Ivolgina, A. Pilyagina)

2. The teaching staff carries out research and clinical work in medical institutions. The research areas of the Department of Ophthalmology are the following: development and improvement of diagnostic methods and treatment of cataract, glaucoma, retina diseases, keratoderma pathologies and child ophthalmologic pathology.

Recommendations:

1. Work on advancement of the teaching staff should be continued in compliance with the qualification requirements.

2. Work on involvement of foreign teachers should be continued, including the use of the electronic educational and informational environment.

3. The incentives system should be developed and introduced to involve practitioners acting as supervisors.

4. The teachers should enhance their qualification; their professional, personal and pedagogic competences should be regularly assessed.

3.6 Standard 6. Educational resources

Compliance with the standard: substantial compliance

Table 6 - Criteria to Standard 6

Nº	Subject of evaluation	Mark
1.	Physical facilities	B
2.	Clinical training resources	B
3.	Information technologies and library resources	B
4.	Medical research and scholarship	C
5.	Educational expertise	B
6.	Academic mobility	B
7.	Clinical teams	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the material and technical resources of the University; the results of the meetings with the administration of the Medical Institute, Heads of Departments, teachers and trainees; the results of the site-visit to the Departments, Accreditation and Simulation Centre, sports complex, and clinical facilities allowed the External Review Panel to establish compliance with the requirements of the standard.

The material and technical resources of the Department of Obstetrics, Gynaecology and Pediatrics and the Department of Ophthalmology ensure that the educational programmes are delivered adequately and ensure a learning environment, which is safe for the staff, trainees, and patients.

The Department of Obstetrics, Gynaecology and Pediatrics and the Department of Ophthalmology provide trainees with sufficient clinical/practical facilities; an appropriate case-mix of patients and patient materials to meet intended educational outcomes, including the use of both inpatient and outpatient (ambulatory) care and on-duty activity.

The Department of Ophthalmology uses the following equipment (including contract-based use):

- diagnostic: refractometer, chart panel, set of eyeglass, phoropter, working place of an ophthalmologist, pneumotonometer, Maklakov tonometer, computer perimeter, ultrasound biometer, ultrasound pachymeter, exophthalmometer, ultrasound biomicroscope, ultrasound B-scan, optical coherent tomograph, fundus-camera, slit lamp, electric ophthalmoscope for direct ophthalmoscopy, binocular electric ophthalmoscope for indirect ophthalmoscopy, etc.

- surgical and laser: lasers for laser photocoagulation of different diapasons, YAG Lasers, excimer laser, femtosecond laser, surgical equipment for phacoemulsification and vitrectomy, surgical microscope, etc.

The Department of Obstetrics, Gynaecology and Pediatrics uses the following equipment: academic demonstration model of a woman's hipbone; demonstration set of models of episiotomy; demonstration model of making surgeon's knots; Kocher's clamp; laryngoscope for children; emesis basin; reflex hammer, etc.

However, the teachers and students should have access to electronic devices, library and information resources.

A policy that fosters the relationship between medical research and education is formulated and implemented; the students are encouraged to engage in medical research.

Grant activities of the teachers of the Department of Ophthalmology should be noted:

1. Grant of the Innovation Promotion Fund of the programme «UMNIK» in the field «Medicine of the Future» according to the contracts №5192ГҮ1/2014, №11193ГҮ2/2016. Supervisor: O. Fabrikantov. Provider: A. Sukhorukova. The grant remained in force till December, 2018.

2. Grant of the Innovation Promotion Fund of the programme «UMNIK» in the field «Medicine of the Future» according to the contracts № 7321ГҮ/2015. Supervisor: O. Fabrikantov. Provider: E. Pirogova. The grant remained in force till December, 2019.

3. Grant of the Innovation Promotion Fund of the programme «UMNIK», according to the contract № 15415ГҮ/2020 of 21.06.2020. The grant remains in force till June, 2021. Supervisor: O. Fabrikantov. Provider: D. Goydin.

Achievements:

1. Work placement of the trainees is carried out on the basis of the hospitals provided with modern equipment. The clinical facilities are the largest in the region.

2. Publication and grant activities of the teachers and trainees: the overall number of publications for 2018-2020 is 86; 3 grants have been implemented.

Recommendations:

1. Foreign partners should be involved in review of educational programmes for their improvement and promotion on the international market of educational services.

2. The research results should be used in the educational process.

3. The students should participate in medical research.

4. The system of monitoring of the teaching quality should be developed and introduced: analysis of the assessment methods.

5. The programmes of internal and external academic mobility for teachers and trainees should be developed.

3.7 Standard 7. Programme evaluation

Compliance with the standard: substantial compliance

Table 7 - Criteria to Standard 7

Nº	Subject of evaluation	Mark
1.	Mechanisms for programme monitoring and evaluation	B
2.	Trainer and trainee feedback	B
3.	Performance of qualified doctors	B
4.	Involvement of stakeholders	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the regulatory documents of the Medical Institute, survey results, the results of the meetings with the administration of the Institute, Heads of Departments, teachers, students, employers, and graduates showed that:

- there are regulatory procedures of monitoring, periodical assessment of the educational programmes, learning outcomes, and academic progress of trainees;
- internal and external mechanisms are used for assessment of the educational programmes;
- external mechanisms involve evaluation of the programmes at the stage of licensing, follow-up reviews by Rosobrnadzor, state accreditation, first subject-specific accreditation of graduates, University representation in international and national rankings;
- internal mechanisms involve control by the Department, University self-evaluation, internal audit of subdivisions, formative and summative control, and final attestation, survey of stakeholders;
- the educational programmes are improved and adjusted on the basis of the evaluation results.

Achievements:

1. The University has regulatory procedures of monitoring, periodical assessment of the educational programmes, learning outcomes, and academic progress of trainees; the educational programmes are updated and adjusted on the basis of the evaluation results.

Recommendations:

1. More employers, representatives of insurance companies, professional associations, students, and foreign partners should be involved in monitoring and evaluation of the educational programmes.

2. The results of monitoring and evaluation of the educational programmes, learning outcomes, academic progress of trainees should be published. The University should provide reports about the adjustments to the educational programmes on the basis of the evaluation results and feedback.

3. The teachers and staff of the administrative subdivisions should advance their qualification in the field of review of medical education.

3.8 Standard 8. Governance and administration

Compliance with the standard: substantial compliance

Table 8 - Criteria to Standard 8

Nº	Subject of evaluation	Mark
1.	Governance	B
2.	Academic leadership	B
3.	Educational budget and financial resources	C
4.	Administration and management	B
5.	Requirements, regulations and public information	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the regulatory documents and strategic plan of the University till 2025, the results of the meetings with the administration of the Institute, Heads of Departments, employers, and graduates showed that:

- the educational programmes are delivered in compliance with the regulations concerning admission of trainees, education process, assessment, and intended educational outcomes;
- completion of education is documented by the issue of diplomas, certificate on the first subject-specific accreditation for approval of the received qualification;
- the leadership of subdivisions take responsibility for the development and management of the educational programmes;
- the subdivisions have defined responsibilities and authority for managing the budgets of the programmes;
- the resources necessary for the implementation of the programme are allocated and distributed in relation to educational and research needs;
- there is an administrative and professional staff that is appropriate to support the implementation of the educational programme and related activities, as well as good management and resource deployment.

Achievements:

1. The University has an effective management system: administrative subdivisions, Departments and other subdivisions. Communication between them is effective.

2. The Heads take responsibility for the development and management of the educational programmes. The subdivisions have defined responsibilities and authority for managing the necessary resources, including budgets of the programmes.

3. There is sufficient autonomy in allocating resources in order to achieve the intended learning outcomes, including financial incentives for the teachers.

4. All subdivisions of the educational institution participate in all processes and procedures of the internal quality assurance system.

5. The demand for the graduates is up to 97%.

Recommendations:

1. The content of the English version of the website should be enhanced in order to inform and attract foreign students; the website of the subdivisions should place information about the educational programmes (main characteristics of the programme, workload, competences, staff, material and technical resources, delivery conditions, for example, in the form of a Handbook).

2. More financial resources should be used in order to improve the quality of the educational process in compliance with the international standards (not less than 10% a year).

3. The autonomy of the Medical Institute should be expanded to develop and introduce the quality assurance policy in decision-making and allocation of resources necessary for the delivery of the educational programmes.

4. The programme of budget management on support of the educational programmes should be introduced.

3.9 Standard 9. Continuous renewal

Compliance with the standard: substantial compliance

Table 9 - Criteria to Standard 9

Nº	Subject of evaluation	Mark
1.	Modifying and renewal of the programme	B
2.	Cyclical external review	B

Analysis of the cluster of educational programmes' compliance with the standard:

The analysis of the documents, the results of the meetings with the administration of the University, Medical Institute, Heads of Departments, and employers showed that:

- the University has carried out the procedures for the evaluation and review of the structure, content of the educational programmes, learning outcomes, competences, assessment methods and learning environment, making amendments and allocating resources for continuous renewal of the programmes.

Achievements:

The University regularly carries out the procedures of external review of the educational programmes in terms of the license control, scheduled and unscheduled reviews, state and public accreditation of the educational programmes.

The educational programmes are regularly updated on the basis of advanced research and analysis, internal evaluation and literature on medical education.

Recommendations:

The University should continue participating in independent evaluation procedures (international accreditation, joint accreditation, etc.), discuss the results, and apply corrective measures to improve the quality of educational activities, as well as for promotion in international rankings.

4. RECOMMENDATIONS FOR IMPROVEMENT

Thus, based on the analyses of the presented documents, meetings and interviews, conducted during the site-visit, with the purpose of enhancing the quality of delivering the educational programmes under review the Review Panel recommends:

1. The mission should be reviewed with the account of internationalization of medical education.
2. The teachers and employers should be involved in the development of the mission and learning outcomes.
3. Basic education of the trainers should correspond to the disciplines they teach.
4. The training of the students should be enhanced by developing their communication skills and medical ethics.
5. The students should have greater access to the simulation equipment in order to train practical skills.
6. Mentorship should be more actively used in the educational process; and the mechanisms of trainers' incentives should be developed.
7. Teaching the principles of scientific method should be a required component of the educational programmes.
8. The University should continue work on updating the procedures of knowledge, skills, and competences assessment, pools of assessment tools and assessment methods. Practitioners from the healthcare system, foreign partners and external examiners should be involved in this process.
9. The feedback system from the trainees on the conditions and organization of the educational process should be regularly and more comprehensively used. The results of these surveys should be comprehensively and regularly used in the review of the educational programmes, including social support, conditions and organization of the educational process.
10. The trainees should be represented in the collegiate and consultative bodies of the University management.
11. The trainees should be involved in the development, management and assessment of educational programmes.
12. The trainees' council should enhance its activities in the sphere of trainees' social support.
13. The language proficiency of the trainees should be improved in order to enhance academic mobility and work with foreign databases.
14. The association of graduates of the University medical programmes should be established.
15. Work on involvement of foreign teachers should be continued, including the use of the electronic educational and informational environment.
16. The incentives system should be developed and introduced to involve practitioners acting as supervisors.
17. The teachers should enhance their qualification; their professional, personal and pedagogic competences should be regularly assessed.
18. Foreign partners should be involved in review of educational programmes for their improvement and promotion on the international market of educational services.
19. The research results should be used in the educational process.
20. The students should participate in medical research.

21. The system of monitoring of the teaching quality should be developed and introduced: analysis of the assessment methods.

22. The programmes of internal and external academic mobility for teachers and trainees should be developed.

23. More employers, representatives of insurance companies, professional associations, students, and foreign partners should be involved in monitoring and evaluation of the educational programmes.

24. The results of monitoring and evaluation of the educational programmes, learning outcomes, academic progress of trainees should be published. The University should provide reports about the adjustments to the educational programmes on the basis of the evaluation results and feedback.

25. The teachers and staff of the administrative subdivisions should improve their qualification in the field of review of medical education.

26. The content of the English version of the website should be enhanced in order to inform and attract foreign students; the website of the subdivisions should place information about the educational programmes (main characteristics of the programme, workload, competences, staff, material and technical resources, delivery conditions, for example, in the form of a Handbook).

27. More financial resources should be used in order to improve the quality of the educational process in compliance with the international standards (not less than 10% a year).

28. The autonomy of the Medical Institute should be expanded to develop and introduce the quality assurance policy in decision-making and allocation of resources necessary for the delivery of the educational programmes.

29. The programme of budget management on support of the educational programmes should be introduced.

30. The University should continue participating in independent evaluation procedures (international accreditation, joint accreditation, etc.), discuss the results, and apply corrective measures to improve the quality of educational activities, as well as for promotion in international rankings.

5. CONCLUSION

Based on the self-evaluation report analysis, documents and data submitted the External Review Panel has come to the conclusion that the cluster of educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) **substantially** complies with the accreditation standards and criteria of the National Centre for Public Accreditation.

The Panel recommends that the National Accreditation Board accredit the postgraduate educational programmes «Obstetrics and Gynaecology» (31.08.01), «Ophthalmology» (31.08.59) delivered by Derzhavin Tambov State University for the period of **6 (six)** years.

ANNEX A

SCHEDULE OF THE SITE VISIT OF THE EXTERNAL REVIEW PANEL

Time	Activity	Participants	Venue
November 24, Tuesday			
Experts' arrival, meeting at the airport			
November 25, Wednesday			
11.15	Arrival at the University		
11.30 – 11.50	First meeting of the External Review Panel		Room 212, 33, Internatcionalnaia Str.
11.30 – 11.50	<i>Break</i>		
12.00 – 13.15	Meeting of the ERP with the University administration and people responsible for accreditation	Rector, Vice-Rectors, people responsible for accreditation, ERP	Room 212
13.15 – 13.30	<i>Break</i>		
13.30 – 14.45	Meeting with Institute Directors, Deputy Directors, Heads of Departments	Institute Directors, Deputy Directors, Heads of Departments, ERP	Room 212
14.45 – 15.00	Transfer to Komsomolskaia Square (University Dining Room)		
15.00 – 16.00	Lunch		University Dining Room
16.00 – 16.15	Transfer to 33, Internatcionalnaia Str.		
16.15 – 16.30	<i>Break</i>		
16.30 – 17.45	Meeting with graduates		Room 212
17.45 – 18.15	Internal meeting of the Panel, summing up the 1st day		
18.15 – 18.30	Work with documents (Russian experts) Work with the website, self-evaluation report, filling in individual assessment forms (foreign experts) 18.15 – 20.00		
18.30-18.45 Transfer to 93, Sovetskaia Str.			
18.45 – 20.30	Tour of the Medical Institute: 1) classroom №30, 2) assembly hall, 3) classroom №77, 4) Museum of Medicine №92, 5) educational and practical centre «Razvitie» №91, 6) classroom №88, 7) classroom – Laboratory for Improvement of Human Functional State №82, 8) classroom of Pharmacology №107, 9) classroom – Laboratory of Biochemistry №X9, 9) classroom – Laboratory of Organic Synthesis and High Molecular Mass Compounds №X4, 10) Museum of Anatomy №A3, 11) library, 12) classroom №1. * Visit to the academic building on 2B, Stroitelei Boulevard (vocational professional training)		

November 26, Thursday

11.30	Arrival at the University		
11.45 – 13.15	Tour of the University: library, dormitories, sports complex (stadium, ice rink, sports hall «Manezh»), Simulation and Accreditation Centre (1A, Moskovskaia Str.)	People responsible for accreditation, ERP	
Transfer to 33, Internatcionalnaia Str.			
13.15 – 14.00	Internal meeting of the Panel	ERP	Room 211
14.00 – 14.30	*Work with documents, individual assessment form	ERP	
14.30 – 15.45	Meeting with teachers	Teachers, ERP	Room 211
15.45 – 16.00	Transfer to Komsomolskaia Square (University Dining Room)		
16.00 – 17.00	Lunch		
17.00 – 17.15	Transfer to 33, Internatcionalnaia Str.		
17.15 – 18.15	Meeting with trainees	Trainees, ERP	Room 211
18.15 – 18.30	<i>Break</i>		
18.30 – 19.30	Meeting with employers	Employers, ERP	Room 211
19.30 – 20.00	Internal meeting of the Panel, summing up the 2 nd day		Room 211

November 27, Friday

9.00	Arrival at the University		
09.15 – 12.00	Internal meeting of the Panel: discussion of preliminary results of the site visit, preparation of the oral report of the Panel	ERP	Room 211
12.00 – 13.00	Closing meeting of ERP with the representatives of the University	ERP, University administration, Heads of Departments, teachers, trainees	Room 211
13.00 – 14.00	Lunch		University Dining Room

ANNEX B

PARTICIPANTS OF THE MEETINGS

University administration, people responsible for accreditation:

№	Name	Position
1.	Irina Naletova	Vice-Rector for Academic Affairs
2.	Elena Yurina	Vice-Rector for Research
3.	Svetlana Konchakova	Vice-Rector for Corporate Policy and Educational Work
4.	Marina Kakushkina	Head of the Department for Quality Management of the Educational Programmes
5.	Nikita Voronin	Acting Director of the Medical Institute

Institute Director, Deputy Directors, Heads of Departments, people responsible for work with foreign trainees:

№	Name	Position	Contact details
1.	Nikita Voronin	Acting Director of the Medical Institute	89202331199
2.	Natalia Kopytova	Deputy Director of the Medical Institute for Academic Affairs, Candidate of Chemistry, Associate Professor	89107516792
3.	Dmitrii Gritckov	Deputy Director of the Medical Institute for Work with Foreign Trainees, Candidate of Pedagogics, Associate Professor	89158880799
4.	Viacheslav Peredkov	Deputy Director of the Medical Institute for Research, Candidate of Pedagogics, Associate Professor	89537030129
5.	Irina Popova	Deputy Director of the Medical Institute for Methodological Work, Candidate of Philology	89107509216
6.	Anna Shubina	Deputy Director of the Medical Institute for Accreditation and Postgraduate Education, Candidate of Chemistry, Associate Professor	89027333477
7.	Irina Nemkova	Deputy Director of the Medical Institute for Educational Work, Candidate of Pedagogics, Associate Professor	89107552117
8.	Elena Davydova	Head of the Department of Foreign Languages and Translation, Candidate of Philology, Associate Professor	89158624124
9.	Svetlana Siniutina	Head of the Department of Biochemistry and Pharmacology, Candidate of Chemistry, Associate Professor	89106503346
10.	Yulia Zeleneva	Head of the Department of General Patient Care and Nursing, Doctor of Biology, Associate Professor	89158830175
11.	Andrei Chernyshev	Head of the Department of Public Health and Healthcare, Candidate of Medicine, Associate Professor	<u>89622345510</u>

Teachers:

№	Name	Position	Contact details
1.	Oleg Fabrikantov	Doctor of Medicine, Head of the Department of Ophthalmology, Professor, Director of the Fedorov National Medical Research Centre «Eye Microsurgery», Tambov Branch	<u>89622380000</u>
2.	Vladimir Machekhin	Doctor of Medicine, Visiting Professor of the Department of Ophthalmology, Professor, Chief Research Consultant of the Fedorov National Medical Research Centre «Eye Microsurgery», Tambov Branch	<u>89156604206</u>
3.	Igor Voronin	Doctor of Medicine, Head of the Department of Propedeutics of Internal Diseases and Intermediate Level Therapy, Professor	<u>89004945755</u>
4.	Oleg Yamschikov	Doctor of Medicine, Head of the Department of Hospital Surgery with a Course in Traumatology, Associate Professor, Chief Physician of the Kotovsk City Hospital	89107502507
5.	Elena Nevzorova	Doctor of Biology, Head of the Department of Medical Biology with a Course in Contagious Diseases, Associate Professor	<u>89155510005</u>
6.	Oksana Nizovibatko	Candidate of Medicine, Head of the Department of Anatomy and Topographic Anatomy, Associate Professor	89158628128
7.	Svetlana Romantcova	Candidate of Chemistry, Associate Professor, Department of Biochemistry and Pharmacology, Candidate of Medicine	<u>89156671360</u>
8.	Ekaterina Zvonareva	Candidate of Biology, Associate Professor, Department of Pathology	<u>89537077366</u>
9.	Aleksei Prokopov	Associate Professor, Department of Obstetrics, Gynaecology and Pediatrics, Deputy Chief Physician of Tambov Regional Hospital for Children	<u>89106530000</u>
10.	Arkadii Antonian	Associate Professor, Department of Public Health and Healthcare	<u>89027200473</u>
11.	Godage Prashan Pandurang	Senior teacher, Department of Anatomy and Topographic Anatomy	<u>89027305161</u>

Trainees:

№	Name	Field of Study	Year	Contact details
1.	Marina Podkhvatilina	31.08.01 Obstetrics and Gynaecology	1	89997259935
2.	Natalia Abdullaeva	31.08.01 Obstetrics and Gynaecology	2	89204748762
3.	Dmitrii Misiurev	31.08.59 Ophthalmology	1	89106571534
4.	Denis Goidin	31.08.59 Ophthalmology	2	89106584103
5.	Svetlana Glushkova	31.05.01 General Medicine, Head of the Student Council of the Medical Institute	6	89202389096
6.	Patimat Gasanova	31.05.01 General Medicine, member of the regional headquarters of the public movement «Medical Volunteers»	6	89050486035
7.	Natalia Balybina	31.05.01 General Medicine, member of the Council of the Student Research Community	6	89204881318
8.	Yaroslav Vozniuk	31.05.01 General Medicine, Deputy Chair of the Student Council of the Medical Institute, Head of the Press Centre of the Medical Institute, member of the regional headquarters of the public movement «Medical Volunteers»	5	89204836456
9.	Alina Khvorostova	31.05.01 General Medicine, Head of the Student Creative Community	3	89158898137
10.	Yulia Shirshova	31.05.01 General Medicine	3	89304704049
11.	Anastasia Nuzha	31.05.01 General Medicine, regional coordinator of the Tambov branch of the public movement «Medical Volunteers»	3	89622362373
12.	Sarvar Dadabaev	31.05.01 General Medicine	6	89065976956
13.	Mvanza Petros	31.05.01 General Medicine	6	89806778772
14.	Saidi Reda Mohammed	31.05.01 General Medicine	3	89027266937

Representatives of the professional community:

№	Name	Position	Contact details
1.	Tatiana Misheneva	Head of the Division of Medical Preventive Care, Tambov Central Regional Hospital, Secretary of the Accreditation Commission	89027233578
2.	Galina Kholodovich	Chief Physician, Valerii Koval Tambov City Hospital for Children	89158744888
3.	Vera Shustova	Chief Physician, Tambov Regional Dermatovenerologic Clinic	89051225355
4.	Sergei Emelianov	Deputy Chief Physician for Medicine, Kotovsk City Hospital	89158842363
5.	Andrei Tatarintcev	Chief Physician, Tambov Regional Antitubercular Clinic	89051239236
6.	Elena Krasiuk	Chief Physician, Tambov Ophthalmology Hospital	89106566455

Graduates:

№	Name	Place of work	Position	Year of graduation	Contact details
1.	Marianna Shindina	Tambov Regional Hospital for Children	Anesthesiologist, Resuscitator, Transfusiologist	2015	89106537983
2.	Viktor Chang	Tambov Regional Oncological Clinic	Oncologist	2013	89531242580
3.	Ivan Frolov	Tambov Central Regional Hospital	Surgeon	2016	89537171336
4.	Anna Koptenkova	Tambov Clinic «Avtomobilist»	Dermatovenerologist	2015	89537017328
5.	Anton Petrukhin	Kotovsk City Hospital	Trauma Orthopaedist	2016	89537181230
6.	Ivan Solopanov	Babenko Tambov Regional Hospital	Cardiologist	2014	89065968848
7.	Yulia Nenasheva	Fedorov National Medical Research Centre «Eye Microsurgery»	Ophthalmologist	2018	89106585267
8.	Elena Kulagina	Fedorov National Medical Research Centre «Eye Microsurgery»	Ophthalmologist	2019	89156744830

ANNEX B

THE SCALE OF ASSESSMENT PARAMETERS OF EDUCATIONAL PROGRAMMES

Nº	Standards	Assessment of the cluster of educational programmes			
		Full compliance	Substantial compliance	Partial compliance	Non-compliance
1.	Mission and educational outcomes		+		
2.	Educational programmes		+		
3.	Assessment of		+		
4.			+		
5.	Trainers		+		
6.	Educational resources		+		
7.	Programme evaluation		+		
8.	Governance and administration		+		
9.	Continuous renewal		+		

STANDARD 1. MISSION AND EDUCATIONAL OUTCOMES

№	Assessment criteria	Mark			
		A	B	C	D
Mission and participation of stakeholders in its development			+		
The programme provider must :					
1	B 1.1.1	state its mission and make it known to all stakeholders and the health sector it serves		+	
2	B 1.1.2	consider that the mission encompasses the health needs of the community, the needs of the health care delivery system; in its mission outline the aims and the educational strategy resulting in a medical doctor who is competent to undertake comprehensive appropriate medical practice in the defined field of medicine and is capable of undertaking the roles of doctors as defined by the health sector, able to work within a professional team, committed and prepared to life-long learning and participation in continuing medical education/continuing professional development		+	
3	B 1.1.3	make sure that key stakeholders participate in formulating the mission and expected learning outcomes		+	
The programme provider should encourage:					
4	Q 1.1.1	appropriate innovation in the education process allowing for development of broader and more specialised competencies than those identified within the basic required competencies		+	
5	Q 1.1.2	doctors to become scholars/researchers within their chosen field of medicine, active involvement in the development of the discipline including academic development and enhancement of education and research in medicine		+	
6	Q 1.1.3	doctors to become active participants in facing social determinants of health related to the aspects of global healthcare		+	
1.2. Professionalism and professional autonomy			+		
The programme provider must :					
7	B 1.2.1	include professionalism in the education of doctors and foster the professional autonomy necessary to enable the doctor to act in the best interests of the patient and the community		+	
The programme provider should :					
8	Q 1.2.1	ensure a collaborative relationship with government and other counterparts, whilst maintaining appropriate independence from them in making decisions in such key areas as development of curriculum, assessment of learning outcomes, admission, hiring the teachers, employment conditions and allocation of resources		+	
9	Q 1.2.2	ensure academic freedom to the staff and for the implementation of the educational programme		+	

1.3. Educational outcomes and participation of stakeholders in their assessment				+		
The programme provider must :						
10	B 1.3.1	with the participation of stakeholders define the intended educational outcomes that trainees should exhibit upon graduation in relation to: <ul style="list-style-type: none"> - their achievements at a post graduate level regarding knowledge, skills, and attitudes; - appropriate foundation for future career in any branch of medicine and healthcare; - their commitment to life-long learning; - the needs of the health care delivery system - professional conduct 		+		
11	B 1.3.2	make the intended educational outcomes publicly known		+		
12	B 1.3.3	take into consideration the requirements of occupational standards (if available) and the labour market		+		
The programme provider should :						
13	Q 1.3.1	ensure the continuity of acquired outcomes by graduation with acquired outcomes of basic education and training		+		
14	Q 1.3.2	use procedures of independent evaluation of learning outcomes, e.g. accreditation of specialists, contests and competitions (ESG 1.3)		+		
Final mark				+		

STANDARD 2. EDUCATIONAL PROGRAMMES

№		Assessment criteria	Mark			
			A	B	C	D
2.1. Development of the educational programme				+		
The programme provider must :						
1	B 2.1.1	define the qualification obtained as a result of acquiring the programme in accordance with the descriptors of the National and European Qualifications Framework (ESG 1.2)		+		
2	B 2.1.2	develop the curriculum and instructional/learning methods that are based on the student centered approach		+		
3	B 2.1.3	ensure that the curriculum is delivered in accordance with principles of equality		+		
4	B 2.1.4	use a trainee-centred approach that stimulates, prepares and supports to take responsibility for their own learning process and to reflect on their own practice		+		
5	B 2.1.5	guide the trainee by means of supervision and regular appraisal and feedback		+		
The programme provider should :						
6	Q 2.1.1	increase the degree of independent responsibility of the trainee as skills, knowledge and experience grow		+		
2.2. Scientific method				+		
The programme provider must throughout the curriculum:						
7	B 2.2.1	teach the principles of scientific method, including analytical and critical thinking, medical research methods and evidence-based medicine in clinical research and clinical epidemiology		+		
8	B 2.2.2	ensure that the trainee becomes able to use scientific reasoning		+		
The programme provider should :						
9	Q 2.2.1	include formal teaching on critical appraisal of the literature and scientific data		+		
2.3. Programme content				+		
The programme provider must :						
10	B 2.3.1	define and include in the programme clinical work and relevant theory or experience of basic biomedical, clinical, behavioural		+		

		and social sciences and preventive medicine, clinical decision-making, communication skills, medical ethics, public health, medical jurisprudence and forensic medicine, managerial disciplines, the interface with complementary and alternative medicine				
11	B 2.3.2	spend a reasonable part of the programme in planned contact with patients in relevant clinical settings		+		
12	B 2.3.3	organise the programme with appropriate attention to patient safety and autonomy		+		
The programme provider should :						
13	Q 2.3.1	improve the content regarding knowledge, skills and attitudes related to the various roles of the doctor		+		
14	Q 2.3.2	adjust the content to changing contexts and needs of the health care delivery system		+		
2.4. Programme structure, composition and duration				+		
The programme provider must :						
15	B 2.4.1	describe the overall structure, composition and duration of the programme, courses/modules; state compulsory and optional components of the programme; integrate practice and theory; consider national regulations; provide adequate exposure to how local, national or regional health systems address the health care needs of populations		+		
The programme provider should :						
16	Q 2.4.1	in making a decision about the duration of the programme, take into consideration the acquired outcomes of basic medical education related to the chosen field of medicine		+		
17	Q 2.4.2	define the requirements of the different roles of the trained doctor in the health sector		+		
2.5. Programme management				+		
The programme provider must :						
18	B 2.5.1	have processes for the design, approval and review of an educational programme (ESG 1.2)		+		
19	B 2.5.2	have a structural subdivision which has the responsibility and authority for planning and implementing the curriculum to secure its intended educational outcomes		+		
20	B 2.5.3	coordinate multi-site education to gain adequate exposure to different aspects of the chosen field of medicine		+		
The programme provider should :						
21	Q 2.5.1	ensure that trainees are trained in different settings: hospitals, clinics, polyclinics, primary health care, advanced technology health care, in-patient and outpatient		+		
2.6. The relation between PME and service				+		
The programme provider must :						
22	B 2.6.1	describe and respect the apprenticeship nature of professional development, integrate training and service (on the job training), ensure that training is complementary to and integrated with service demands		+		
The programme provider should :						
23	Q 2.6.1	effectively organise use of the capacity of the health care system for service based training purposes		+		
Final mark				+		

STANDARD 3. ASSESSMENT OF

№	Assessment criteria	Mark			
		A	B	C	D
3.1. Assessment methods			+		
The programme provider must :					
1	B 3.1.1	define, state and publish the principles, methods and practices used for assessment of its trainees, including the criteria for setting pass marks, grade boundaries and number of allowed retakes		+	
2	B 3.1.2	ensure that assessments cover knowledge, skills and attitudes and professional conduct		+	
3	B 3.1.3	use a wide range of assessment methods and formats according to their "assessment utility"		+	
4	B 3.1.4	ensure that methods and results of assessments avoid conflicts of interest		+	
5	B 3.1.5	use a system of appeal of assessment results		+	
6	B 3.1.6	ensure that assessments are open to scrutiny by external expertise and trainees are informed in advance about criteria and methods of assessment (ESG 1.3)		+	
The programme provider should :					
7	Q 3.1.1	evaluate and document the reliability and validity of assessment methods and encourage the use of external examiners		+	
3.2. Relation between assessment and learning			+		
The programme provider must :					
8	B 3.2.1	use assessment principles, methods and practices that are clearly compatible with intended educational outcomes and instructional methods and ensure that the intended educational outcomes are met by the trainees, provide an appropriate balance of formative and summative assessment to guide both learning and decisions about academic progress and promote student learning		+	
The programme provider should :					
9	Q 3.2.1	adjust the number and nature of examinations of curricular elements to encourage both acquisition of the knowledge base and integrated learning		+	
10	Q 3.2.2	ensure timely, specific, constructive and fair feedback to trainees on basis of assessment results		+	
11	Q 3.2.3	encourage participation of in clinical work		+	
Final mark				+	

STANDARD 4.

№	Assessment criteria	Mark			
		A	B	C	D
4.1. Admission policy and selection			+		
The programme provider must :					
1	B 4.1.1	formulate and implement an admission policy based on principles of objectivity, including a clear statement on the process of selection of ensuring a high level in understanding of basic biomedical sciences achieved at the undergraduate level before starting postgraduate education		+	
2	B 4.1.2	have and implement a policy on admission of with disabilities		+	
3	B 4.1.3	have and implement a policy on transfer of from other national or international programmes and institutions (ESG 1.4)		+	
The programme provider should :					
4	Q 4.1.1	state the relationship between selection and the mission of the school, the educational programme and desired qualities of graduates; periodically review the admission policy		+	
5	Q 4.1.2	use a system for appeal of admission decisions		+	
6	Q 4.1.3	include ' organisations and other stakeholders in the formulation of the selection policy and process		+	
4.2. Number of			+		
The programme provider must :					
7	B 4.2.1	set a number of education positions that is proportionate to available material and technical resources; the clinical/practical training opportunities; the capacity for appropriate supervision		+	
The programme provider should :					
8	Q 4.2.1	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		+	
9	Q 4.2.2	set a number of education positions that is proportionate to available information about the health needs of the community and society with the consideration of the national and international labour market demands		+	
4.3. Trainee counselling and support			+		
The programme provider must :					
10	B 4.3.1	have a system for academic counselling of its student population		+	
11	B 4.3.2	offer a programme of student support, addressing social, financial and personal needs, allocate resources for student support and ensure confidentiality in relation to counselling and support		+	
12	B 4.3.3	have a feedback system from trainees on the assessment of conditions and organization of the academic process (ESG 1.3)		+	
13	B 4.3.4	consider the needs of diverse groups of student population and provide opportunities for creating individual learning paths (ESG 1.3)		+	
The programme provider should :					
14	Q 4.3.1	provide support in case of a professional crisis and involve ' organisations in solving problematic trainee situations		+	
4.4. Trainee representation			+		
The programme provider must :					
15	B 4.4.1	formulate and implement a policy on trainee representation and appropriate participation in the statement of mission and intended educational outcomes; design of the programme, planning of ' working conditions, management and evaluation of the programme		+	
The programme provider should :					
16	Q 4.4.1	encourage to be involved in decisions about education processes, conditions and regulations		+	

Criterion 4.5. Working conditions				+		
The programme provider must :						
17	B 4.5.1	have programmes of financial support for		+		
18	B 4.5.2	ensure participation by the trainee in all medical activities including on call duties - relevant for the education; define and make known the service conditions and responsibilities of		+		
19	B 4.5.3	replace interruptions of training caused by pregnancy (including maternity/paternity leave), sickness, military service, etc.)		+		
The programme provider should :						
20	Q 4.5.1	ensure that the service components of trainee positions are not dominating		+		
21	Q 4.5.2	take into account the needs of the patients, continuity of care and the educational needs of the trainee in the structuring of duty hours and on-call schedules		+		
Final mark				+		

STANDARD 5. TRAINERS

Nº		Assessment criteria	Mark			
			A	B	C	D
5.1. Recruitment and selection policy				+		
The programme provider must formulate and implement:						
1	B 5.1.1	a recruitment and selection policy for trainers, supervisors and teachers that specifies the expertise required, job duties and responsibilities		+		
2	B 5.1.2	criteria for scientific, educational and clinical merit, including the balance between teaching, research and service qualifications and administrative work in the sphere of health care		+		
The programme provider should :						
3	Q 5.1.1	in the formulation and implementation of its staff policy recognise the responsibility of all physicians as part of their professional obligations to participate in the practice-based postgraduate education of medical doctors		+		
4	Q 5.1.2	reward participation in programmes for developing their educational expertise		+		
5.2. Staff activity and staff development					+	
The programme provider must :						
5	B 5.2.1	ensure that trainers have time for teaching, supervision and learning; provide faculty development of trainers and supervisors; ensure periodic evaluation of trainers			+	
The programme provider should :						
6	Q 5.2.1	define a ratio between the number of recognised trainers and the number of ensuring close personal interaction and monitoring of the trainee		+		
7	Q 5.2.2	design and implement a staff promotion policy; include in staff development support for trainers regarding teacher education and further professional development, both in their speciality and in educational expertise			+	
Final mark				+		

STANDARD 6. EDUCATIONAL RESOURCES

№	Assessment criteria	Mark			
		A	B	C	D
6.1. Physical facilities			+		
The programme provider must :					
1	B 6.1.1	have sufficient physical facilities for staff and trainees to ensure that the curriculum can be delivered adequately and ensure a learning environment, which is safe for staff, , patients and their relatives		+	
The programme provider should :					
2	Q 6.1.1	improve the learning environment by regularly updating and modifying or extending the physical facilities to match developments in educational practices		+	
6.2. Clinical training resources			+		
The programme provider must :					
3	B 6.2.1	provide with sufficient clinical/practical facilities to support the delivery of learning to include access to a relevant number of patients; an appropriate case-mix of patients and patient materials to meet intended educational outcomes, including the use of both inpatient and outpatient (ambulatory) care and on-duty activity		+	
The programme provider should :					
4	Q 6.2.1	evaluate, adapt and improve the facilities for clinical training to meet the needs of the population it serves		+	
6.3. Information technologies and library resources			+		
The programme provider must :					
5	B 6.3.1	formulate and implement a policy which addresses effective and ethical use and evaluation of appropriate information and communication technology		+	
6	B 6.3.2	ensure access to library, web-based or other electronic media		+	
The programme provider should :					
7	Q 6.3.1	enable teachers and trainees to use existing and exploit appropriate new information and communication technology for independent learning, accessing information and data bases, managing patients and working in health care delivery systems		+	
6.4. Medical research and scholarship				+	
The programme provider must :					
8	B 6.4.1	ensure that the trainee achieves knowledge of and ability to apply the scientific basis and methods of the chosen field of medicine			+
9	B 6.4.2	formulate and implement a policy that fosters the relationship between medical research and education			+
The programme provider should :					
10	Q 6.4.1	encourage to engage in medical research and quality development of health and the health care system; provide sufficient time within the programme for to undertake research; give access to research facilities and activities in the training settings		+	
6.5. Educational expertise			+		
The programme provider must :					
11	B 6.5.1	have access to educational expertise (internal and external) where required on current issues, processes and practices of medical education involving specialists, to include international experts; formulate and implement a policy on the use of educational expertise in curriculum development and evaluation		+	
The programme provider should :					
12	Q 6.5.1	demonstrate evidence of the use of in-house or external educational expertise in staff development		+	

6.6. Academic mobility				+		
The programme provider must:						
13	B 6.6.1	formulate and implement a policy on accessibility of individual to education opportunities at alternative training settings within or outside the country		+		
14	B 6.6.2	establish a system for the transfer of the results of education		+		
The programme provider should:						
15	Q 6.6.1	facilitate regional and international exchange of trainers and by providing appropriate resources (ESG 1.4)		+		
6.7. Clinical teams				+		
The programme provider must:						
16	B 6.7.1	ensure experience of working in a team with colleagues and other health professionals		+		
The programme provider should:						
17	Q 6.7.1	encourage learning in a multi-disciplinary/multi-professional team; promote development of ability to guide and teach other health professionals		+		
Final mark				+		

STANDARD 7. PROGRAMME EVALUATION

№	Assessment criteria	Mark				
		A	B	C	D	
7.1. Mechanisms for programme monitoring and evaluation			+			
The programme provider must:						
1	B 7.1.1	routinely monitor the programme; establish and apply a mechanism for programme evaluation, methods of assessment; progress of		+		
2	B 7.1.2	ensure that relevant results of evaluation influence the programme		+		
3	B 7.1.3	involve principal stakeholders in evaluation		+		
The programme provider should:						
4	Q 7.1.1	make the process and results of evaluation transparent to principal as well as other stakeholders		+		
7.2. Trainer and trainee feedback			+			
The programme provider must:						
5	B 7.2.1	seek feedback about programmes from trainers, , employers		+		
The programme provider should:						
6	Q 7.2.1	use the results from feedback for programme development		+		
7.3. Performance of qualified doctors			+			
The programme provider must:						
7	B 7.3.1	routinely monitor performance of qualified doctors; seek feedback on performance of qualified doctors from employers; establish and apply a mechanism for programme evaluation using collected data on performance of qualified doctors		+		
The programme provider should:						
8	Q 7.3.1	inform about the results of the evaluation of the performance of qualified doctors to those responsible for selection of and programme development		+		
7.4. Involvement of stakeholders			+			
The programme provider must:						
9	B 7.4.1	involve the principal stakeholders in its programme for monitoring and evaluation		+		
The programme provider should:						
10	Q 7.4.1	allow access to results of course and programme evaluation for other stakeholders		+		
Final mark				+		

STANDARD 8. GOVERNANCE AND ADMINISTRATION

№	Assessment criteria	Mark			
		A	B	C	D
8.1. Governance			+		
The programme provider must:					
1	B 8.1.1	ensure that the programme is conducted in accordance with regulations concerning admission of (selection criteria and number), education process, assessment, intended educational outcomes		+	
2	B 8.1.2	document completion of education by the issue of degrees, diplomas, certificates or other evidence of formal qualifications for use by both national and international authorities; be responsible for a programme for quality development		+	
The programme provider should:					
3	Q 8.1.1	ensure transparency of the work of governance and its decisions through publishing the internal documents and decisions on the website		+	
8.2. Academic leadership			+		
The programme provider must:					
4	B 8.2.1	take responsibility for the leadership/staff and organisation of postgraduate medical education		+	
The programme provider should:					
5	Q 8.2.1	evaluate the leadership/staff at defined intervals with respect to the mission of the programme and the acquired outcomes		+	
8.3. Educational budget and financial resources				+	
The programme provider must:					
6	B 8.3.1	define responsibility and authority for managing the budgets of the programme			+
7	B 8.3.2	allocate the resources necessary for the implementation of the programme and distribute the educational resources in relation to educational and research needs			+
The programme provider should:					
8	Q 8.3.1	have autonomy to direct resources, including teaching staff remuneration, in an appropriate manner in order to achieve its intended educational outcomes			+
8.4. Administration and management			+		
The programme provider must:					
9	B 8.4.1	have an administrative and professional staff that is appropriate to support implementation of the educational programme and related activities; ensure good management and resource deployment		+	
The programme provider should:					
10	Q 8.4.1	ensure the participation of all structural subdivisions of the educational institutions in the processes and procedures of the internal quality assurance system (ESG 1.1)		+	
8.5. Requirements, regulations and public information			+		
The programme provider must:					
11	B 8.5.1	follow the definition by a national authority of the number and types of recognised medical specialities and other medical expert functions for which approved education programmes are developed		+	
12	B 8.5.2	publish on its official website and in mass media complete and accurate information about the educational programme and its achievements (ESG 1.8)		+	
Final mark			+		

STANDARD 9. CONTINUOUS RENEWAL

№	Assessment criteria	Mark				
		A	B	C	D	
9.1. Modifying and renewal of the programme			+			
The programme provider must:						
1	B 9.1.1	initiate procedures for regularly reviewing and updating the process, structure, content, outcomes/competencies, assessment methods and learning environment of the programme; identify and rectify documented deficiencies, allocate resources for continuous renewal of the programme		+		
The programme provider should:						
2	Q 9.1.1	base the process of renewal on prospective studies and analyses and on results of local evaluation and the medical education literature		+		
3	Q 9.1.2	ensure that the process of renewal and restructuring leads to the revision of the policies and practices of postgraduate medical education programmes in accordance with past experience, present activities and future perspectives		+		
9.2. Cyclical external review			+			
The programme provider must:						
4	B 9.2.1	initiate cyclical procedures of external quality assurance of the educational programmes		+		
The programme provider should:						
5	Q 9.2.1	develop corrective actions programmes as the follow up of external evaluation of educational programmes and inform stakeholders about the main outcomes of external evaluation of educational programmes		+		
Final mark			+			