

To ECAQA Accreditation Council

October 14, 2024

**REPORT OUTCOME
EXPERT COMMISSION ON THE RESULTS
EVALUATION OF THE BACHELOR'S DEGREE PROGRAM
«GENERAL MEDICINE»
OF ANDIJAN STATE MEDICAL INSTITUTE
FOR COMPLIANCE WITH THE STANDARDS FOR ACCREDITATION
OF THE EDUCATIONAL PROGRAMME OF
BASIC MEDICAL EDUCATION (BACHELOR'S DEGREE)**

**external expert evaluation period (site-visit):
September 24-26, 2024**

Andijan, Republic of Uzbekistan – 2024

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LIST OF ABBREVIATIONS

Abbreviations	Designation
ASMI	Andijan State Medical Institute
CBCR	Case-Based Clinical Reasoning
CEP	Committees on Educational Programmes
CBL	Case-Based Learning
CED	Catalog of Elective Disciplines
CMC	Central Methodological Council
CS	Case-study
DOPS	Directly Observed Procedural Skills
ECAQA	Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care
ECTS	European Credit Transfer and Accumulation System
EEC	External Expert Commission
EHEA	European Higher Education Area
EP	Educational programme
GOSO RU	State Educational Standards of the Republic of Uzbekistan
GM	General Medicine
LMS	Learning Management System
LO	Learning outcomes
MCQ	Multiple-Choice Question
NQFHE (HKPBO)	National Qualifications Framework for Higher Education
OSCE	Objective Structured Clinical Examination
PBL	Problem-Based Learning
PFD	Planning and Financial Department
TBL	Team-Based Learning
SAC	State Attestation Commission
SER	Self Evaluation Report
SES	State Educational Standard
SP	Standardized Patient
SWOT	Strengths, Weaknesses, Opportunities, Threats
WFME	World Federation of Medical Education
UNESCO	United Nations Educational, Scientific and Cultural Organization

Composition of the External Expert Commission (EEC)

In accordance with ECAQA Order No. 30 of September 2024, the External Expert Commission (hereinafter referred to as EEC) was formed to conduct in the period of 24-26 September 2024 an external evaluation within the framework of accreditation of the educational programme "General Medicine (in English)" in the following composition:

№	EEC position	Surname and first name	Degree, academic title, position, workplace
1	Chair	Shamsutdinova Alfiya Gumarovna	MD, MSc, BA, PhD candidate, Fogarty Fellow, Head of the Department of Science Asfendiyarov Kazakh National Medical University, Deputy Director of the B.Atchabarov Research Institute of Fundamental and Applied Medicine, President of the Association of Bioethics and Medical Law, Doctor of the highest category in Public Health.
2	International expert	Akhvlediani Leila Teymurovna	Dean of BAU International University Batumi (Turkey), PhD in immunology and allergology, Doctor of clinical laboratory diagnostics, Accreditation expert of National Center for Educational Quality Assurance, AMEE specialist
3	Expert	Sharipov Kamalidin Orynbayevich	Doctor of Biological Sciences, Professor, Director General of the Republican State Enterprise "Institute of Molecular Biology and Biochemistry named after M.A. Aitkhozhin". Associate member of the working group of the UNESCO Institute of Microelements. Member of the editorial board of the international scientific and practical journals "Microelements in Medicine", "Transport Medicine"
4	Expert	Zhabborova Feruza Uzokovna	Doctor of Medical Sciences, Lecturer in the specialty "Dentistry", Bukhara State Medical Institute
5	Expert	Eshonkulova Bakhriniso Dustmurodovna	PhD in Pediatrics, Senior Lecturer, Department of Pathological Physiology and Anatomy, Tashkent Pediatric Medical Institute
6	Expert	Bacheva Irina Viktorovna	PhD in Medicine, Associate Professor of Internal Medicine Department, Head of residency educational program in Nephrology (adult, pediatric), Medical University of Karaganda
7	Expert	Aldabergenova Taurzhan Kalibekovna	PhD, Associate Professor, Department of Orthopedic and Pediatric Dentistry, Astana Medical University
8	Expert - employer	Nasretdinova Shahida Davranbekovna	Chief physician of the 6th Family polyclinic of the Andijan city medical association
9	Expert - student	Turgunboeva Rakhshona Murodjon kizi	3rd year student, Faculty of General Medicine, Central Asian Medical University, Fergana city
10	Expert - student	Akchurin Evgeniy Andreevich	6th year student, Dentistry faculty, Kazakhstan-Russian Medical University

The work of the EEC was carried out in accordance with the Regulation on the EEC.

The report of the EEC includes a description of the results and conclusion on the external evaluation of the educational programme “General Medicine” for compliance with the Standards for Accreditation of Basic Medical Education Educational Programme (Bachelor's Degree) and Conclusions (hereinafter - Standards for Accreditation), recommendations of the EEC on further improvement of the quality of the educational Programme and recommendations on accreditation for the ECAQA Accreditation Council.

2. General part of the final report

2.1 Information about the educational programme

Name of HYEIs, legal form of ownership, BIN	“Andijan State Medical Institute”
Managing Authority	Ministry of Health
Full name of the first manager (rector)	Madazimov Madamin Muminovich
Date of establishment	Andijan State Medical Institute was established on the basis of the resolutions of the Council of Ministers of the former USSR No. 241 of August 2, 1955 and No. 639 of the Council of Ministers of the former Uzbek SSR of September 21, 1955.
Location contact details	Republic of Uzbekistan, Andijan region, 170100 1, Yu. Atabekov st., Andijan. Phone: +74 223 94 60 Fax: +74 223 94 50; e-mail: info@adti.uz
State license for educational activity at the bachelor's degree I	July 8, 2021 Serial number OT 5000040
Information about branches (if applicable)	There are no branches
Year of commencement of studies	2019-2020 academic year
Duration of study	6 years
Total number of graduates since the beginning of study	Bachelors – 20 Continued training in internship – 18 (in home country), 2 applied for Master program Total internship graduates - 0
Number of students at the beginning of the current year	751
Graduates' employment rate (%)	n/a
Full-time faculty/ Part-time staff involved in the implementation of the educational programme	Total number 157, among them 136 full-time faculty, part-time – 21. Percentage of faculty achieving a degree is 28.7%
Website Instagram Facebook with active pages	website: https://adti.uz/ Facebook - https://www.facebook.com/adtiuz/ Instagram - https://www.instagram.com/adtiuz/ ВКонтакте - https://vk.com/id656405606 Telegram - https://t.me/adtiuz_rasmiy Twitter - https://twitter.com/AndijonDavlat

Andijan State Medical Institute was founded in accordance with Resolution No. 241 of the Council of Ministers of the former USSR dated August 2, 1955, and Resolution No. 639 of the Council of Ministers of the former Uzbek SSR dated September 21, 1955. The Faculty of General Medicine was established based on the same Resolution No.639 with the aim of training doctors in specialized fields for healthcare and sanitary-epidemiological institutions.

The Institute educates specialists under valid state licenses across various levels and fields of study: offering bachelor's degrees in 9 educational programs, clinical residencies in 32 programs, master's degrees in 32 educational programs, and doctoral studies (PhD) in 9 educational programs. The General Medicine educational program offers instruction in the state language, Russian, and English. The program is delivered in a full-time format, with over 5,180 students currently enrolled. Enrollment for the first year of the General Medicine program is conducted annually during the summer by the Admissions Committee, in accordance with the resolution of the President of the Republic of Uzbekistan.

. In the 2023-2024 academic year, 20 students graduated from ASMI's foreign faculty. Out of these, 18 have started internships in their home countries, while 2 are in the process of preparing documents to apply for a master's program at ASMI.

2.2 Information about previous accreditation

The Bachelor's degree program "General Medicine" was developed and entered into the Register of educational programs of higher and postgraduate education in 2019. This is the first time the educational program "General Medicine" is being accredited; no previous accreditations have been conducted.

2.3 Brief description of the Self-evaluation Report of the educational programme

Before the visit, the EEC received a Self-Evaluation Report (SER), and as appendices several supporting documents for all standards in English. The EEC would like to express its gratitude for receiving a very detailed SER including identification of strengths and weaknesses in each area.

The Report on self-evaluation of the educational programme "General Medicine" (hereinafter referred to as the Report) is presented on 94 pages of the main text, annexes on 36 page(s), copies or electronic versions of 19 documents were located for the accreditation period at the link <https://drive.google.com/drive/folders/1OIMHhgfHboyf1r-URHb8iy6GFswUn9x>.. The link to internal documents contains confidential information intended exclusively for members of the accreditation committee; hence, they are provided with a login and password for access during the period of their work.

The report thoroughly addresses all nine key accreditation standards and criteria, organized in line with the recommendations outlined in the Guidelines for Conducting Self-Assessment of Educational Programs provided by the accreditation center, ECA. The document maintains internal consistency and coherence. A cover letter, signed by the Rector of Andijan State Medical Institute, Dr. Madazimov Madamin Muminovich, Professor of Medical Sciences, verifies the accuracy of the quantitative data and information included in the self-assessment report. Self-evaluation of the educational programme "General Medicine" was carried out on the basis of the order No. No.35-T dated 02.06.2022 "On the creation of a working group for specialized Self-evaluation and Report writing". The report also lists nine members of the internal self-assessment committee, specifying each member's area of responsibility. Additionally, it provides details about the representative overseeing the self-assessment process of the educational program, Pakirdinov Alisher Saifuddinovich, Head of the Department for Supervision of Education Quality.

The final version of the report was submitted to the ECA, incorporating data adjustments based on the recommendations mentioned. The report is written clearly and professionally, with each

standard articulated in a precise and comprehensible manner, aligned with the standards' criteria. Tables and figures are properly referenced within the text and are sequentially numbered. The high quality of the self-assessment report allowed the process to progress to the next stage of the accreditation procedure: external evaluation. The experts planned to validate the report's data by comparing it with information gathered during their visit to the educational institution, ensuring both the quantitative and qualitative indicators are verified. The EEC requested additional documents during the preparation phase, before the visit, to be provided by ASMI. Some of them were obtained during the preparatory phase of the site visit. There were also requests for additional documents and evidence during the site-visit.

3. Description of external expert evaluation steps and conclusion

The external expert review of the bachelor's degree program in "General Medicine" (in English) was conducted in accordance with the Guidelines for External Evaluation of Educational Organizations and Educational Programmes of the ECAQA. Dates of the site-visit: September 24 to 26, 2024.

The sequence of the 3-day site-visit is detailed in the Site-visit Program (hereinafter referred to as the Program), which can be found in Annex 3 to this Report.

The following methods and their results were used by EEC members to obtain objective information:

- interview with management and administrative staff - 30 total persons;
- interviews with students - 55 total persons, including international students (from India, Pakistan, Russian Federation, Ukraine, Kyrgyzstan);
- exploring the website <https://adi.uz/>;
- interviewing 28 staff, 15 faculty; 36 employers;
- questionnaire survey of faculty and international students - 400 and 82 respectively;
- observation of student learning, including attendance 5 of practical classes:
 - topic "Physiology of muscles & synapses", instructor Akbarova Saida Bakhtiyarovna, student's group #204,205,206, Department of Normal Physiology, ASMI main building, Andijan city, 1, Yu. Atabekova str;
 - topic "Pathophysiology of cell damage", instructor Dzhalalova Ozodakhon Kasimzhanovna, student's group #304,305,306,307, Department of Pathological Physiology, ASMI main building, Andijan city, 1, Yu. Atabekova str;
 - topic "Anatomical structure of the medulla oblongata", instructor Khaidarov ulirano Adbugan kizi, student group # 202a, Department of Anatomy and Clinical Anatomy, ASMI main building, Andijan city, 1, Yu. Atabekova str;
 - topic "Infections in the postpartum period", instructor Mamatova Malika Rustamovna, group #414, Department of Obstetrics and Gynecology, Andijan Regional Perinatal Center, Andijan, 42 Tashkent str.
 - topic "Methods of examination of the esophagus, stomach, intestines", instructor Khalikova Dilrabo Sobirzhanovna, group #301c, Department of Propaedeutics of Internal Diseases, ASMI main building, Andijan city, 1. Yu. Atabekova str.
- review of resources in the context of meeting the standards for accreditation: visited bases of practice/clinical engagement, including ASMI main building, Andijan Regional Perinatal Center, ASMI multidisciplinary clinic, Andijan Regional Psychoneurological Dispensary, where training on "General Medicine" (in English) educational programme is conducted with the participation of 136/21 full-time faculty/ part-time faculty.
- study of educational and methodological documents in the amount of 123 units both before the visit to the institution and during the visit to the subdivisions (the list of studied documents is in Annex 2).

On the part of the staff of the accredited ASMI presence of all persons specified in the site-visit program and according to the lists of interview and interview sites (table 1).

Table 1 - Information on the number and category of participants of meetings, interviews, interviews with EEC members

#	Name	Position
1.	Madazimov Madamin Muminovich	Rector
2.	Abdullazhanov Bakhrom Rustamzhonovich	Vice-Rector for Academic Affairs
3.	Salakhiddinov Kamoliddin Zukhriddinovich	Vice-Rector for Research
4.	Rakhmanov Bakhodirzhon Zhaffaralievich	Vice-rector for Medical Care
5.	Johongirov Jovohirmirzo Akbarmirzo ugli	Vice-rector for information technologies
6.	Salakhidinov Sarvarzhon Zainabidinovich	Vice-Rector for Youth Affairs
7.	Mamajonov Zafar Abdujalilovich	Vice-rector for financial and economic affairs.
8.	Mamatkhuzhaeva Gulnarakhon Nazhmidinovna	Head of Research and Innovation Department
9.	Abdurakhmonov Farrukh Saidazim ugli	Head of Department of Clinical and Educational Training Facilities
10.	Rasulov Farrukhbek Bakhtiyorovich	Head of International Relations Department
11.	Bustanov Sherzodbek Yakubovich	Head of Department for Work with Gifted Students
12.	Kuchkarov Khumoyun Ismoilzhon	Chairman of the "Youth Union"
13.	Abdukhalimov Abdurakhmon Abdumuminovich	Head of the Department of Youth Affairs, Spirituality and Education
14.	Rakhmanov Bakhrom Mutalibzhanovich	Head of the Center for Digital Educational Technologies
15.	Turahonov Nurillokhon	Head of Information Systems Implementation Department
16.	Rakhmanov Bakhromzhon	Head of Information Security Department
17.	Akhmedova Mukhtaram Sanzharovna	Head of the Library
18.	Isakov Kobilzhon Komiljon ugli	Head of the Educational and Methodical Department
19.	Usmonov Umidjon Donakuzievich	Head of the training and simulation center for dentists
20.	Soliev Anvar Alizhonovich	Head of Career Center
21.	Tursunov Botir Kodirovich	Head of the Postgraduate Education Faculty
22.	Butaboev Zhasurbek Makhmudzhonovich	Specialist of the Postgraduate Education Faculty Specialist
23.	Mamatkhuzhaeva Gulnarakhon Nazhmidinovna	Specialist of the Postgraduate Education Faculty
24.	Bustanov Sherzodbek Yakubovich	Chairman of the Student Scientific Society
25.	Nasirdinova Nargiza Askarovna	Secretary of the Academic Council
26.	Abdurakhmanov Akmalbek Khashimovich	Head of Human Resources
27.	Jalilov Rakhmanzhon Latibovich	Head of Monitoring and Internal Control Department
28.	Pakirdinov Alisher Saifitdinovich	Head of the Department of Education Quality Control
29.	Tulanov Dilshodbek Shomirzaevich	Dean of the Dentistry Faculty
30.	Mamatoov Bakhtiyar Yusufovich	Dean of General Medicine Faculty

№	Position	Number
1	Top management	7
2	Head of department	16
3	Specialist of the department	2
4	Leaders of youth organizations	2
5	Dean	2
6	Faculty	13
7	Secretary of the Academic Council	1
8	Students	55
9	Employers	36
10	Total	134

In the last day of the site-visit a meeting of the EEC members convened to discuss the results of the external evaluation. They conducted a comprehensive review of the assessment outcomes, including document analysis, interviews, and survey responses. EEC members started designing the final report of EC. The results of the external evaluation were summarized.

Experts individually filled in the "Profile of quality and criteria of external evaluation of the educational programme "General Medicine" (in English) for compliance with the ECAQA Standards for Accreditation". Recommendations for the improvement of the educational programme were discussed and A.G. Shamsutdinova, EEC chairperson, held the final open voting to recommend a 5-year accreditation period to the ECAQA Accreditation Council.

Throughout the visit, the EEC members had access to all necessary resources and information, and the conditions for their work were comfortable. The Commission commended the Institute's strong corporate culture and the team's transparency in providing information to the ECA members.

In a student survey, 96.6% rated the work of the External Expert Commission for Accreditation very satisfactory, while 3.4% rated it as satisfactory. The majority, 95% of the students, expressed that accreditation of educational organizations or programs is essential. Additionally, all surveyed faculty (100%) agreed that the ECAQA survey is valuable for generating recommendations to enhance key aspects of the accredited educational organization.

At the end of the site-visit program A.G. Shamsutdinova, EEC chairperson, announced recommendations on the results of external evaluation within the framework of specialized accreditation to the management and staff of ASMI.



4. Analysis for compliance with the Standards for accreditation based on the results of external evaluation of the educational programme

Standard 1. MISSION AND VALUES

1.1 Stating the mission

The mission of the "General Medicine" (in English) educational programme is to train highly qualified specialists with advanced medical education in general medicine. The programme also focus on cultivating skilled scientists with a proactive approach to life. Guided by the principles of continuous professional education, they aim to address health protection issues and enhance the quality of life, both within the republic and globally. Additionally, the programme is committed to preserving and advancing the achievements of the national medical school. The mission of the programme is posted at <https://adti.uz/wp-content/uploads/2024/01/missions.pdf>

ASMI clearly outlines its strategic goals, values, educational objectives, emphasis on research activities, and its relationships with the healthcare system and society, along with its connections to healthcare provision.

During the site visit, based on interviews with organizational leaders, undergraduate students, faculty, and employers, compliance with the criteria of Standard 1 was confirmed. The mission of the educational program is articulated in line with available resources and capabilities, addressing labor market demands while incorporating a clear sense of social responsibility. The mission and goals of the program are discussed at all levels of the University's advisory commissions, approved by the faculty's Academic Council, the Central Methodological Council, and the Institute's Academic Council, in accordance with legal and regulatory frameworks. Additionally, there is a systematic process in place for gathering, accumulating, and analyzing information on the departments implementing the bachelor's program, including a SWOT analysis to assess strengths and weaknesses, which informs strategic and tactical planning.

All participants in the educational process are familiar with the mission of the educational program and contributed to formulating its mission, which has been communicated to all stakeholders. To verify compliance with Standard 1, a meeting was held with the Vice-Rector for Academic Affairs, Abdullazhanov Bakhrom Rustamzhanovich, and the Vice-Rector for Research, Salakhiddinov Kamoliddin Zukhriddinovich. This interview provided evidence that the mission of the Bachelor's program in "General Medicine" (in English) is fully aligned with ASMI's mission. The vice-rectors also shared the strategy for the development of postgraduate education, including bachelor's programs, highlighting the ASMI's clear vision and commitment to enhancing these programs in line with the needs of healthcare.

An interview with faculty confirmed that the mission is communicated to the teaching staff during departmental meetings and gatherings with deans. Conversations with students revealed that they are informed about the mission during curatorial hours, meetings with deans, and through postings on information boards in the university's academic buildings, as well as on the official website (<https://adti.uz/>) and the "General Medicine Faculty" web page (<https://adti.uz/ru/institut/fakultetlar/>). During the site-visit, based on interviews with the ASMI administration, department heads, graduates, students, and employers, it was confirmed that all parties are aware of the mission and the intended outcomes of the bachelor's programs and have participated in their formation.

The analysis of the Institute's compliance with this Standard indicates the existence of a strategic plan for ASMI for 2023-2030 (as per Academic Council minutes No. 2, dated September 27, 2022). This strategic plan aligns with the mission and vision of the institution, and the ASMI's management regularly analyzes target indicators, monitoring performance, and implementing improvement measures.

1.2 Participation in Formulation of Mission

The bachelor's degree program in "General Medicine"(in English) was developed and discussed during departmental meetings and later approved by the Academic Council of the General Medicine Faculty, the Central Methodological Council, and the Institute's Academic Council. The mission of the program was communicated to all department staff, students, and stakeholders through postings on notice boards in academic buildings, the institute's website (<https://adti.uz/>), and the "Faculty of General Medicine" web page (<https://adti.uz/ru/institut/fakultetlar/>).

Health authorities were informed of the educational program's mission through the active involvement of department staff and students in scientific and practical conferences, joint charity clinical events with clinical partners, and the promotion of the discipline via flash mobs, volunteer initiatives, and medical organizations' online platforms. Additionally, information about the program's mission was shared with international partners during scientific conferences, joint masterclasses, and through the "academic mobility" program for teachers and students.

In discussions with students and employers, when asked, "Do you participate in formulating the mission and goals of the organization and the educational program?" and "What is your personal contribution to improving the educational program?" they responded that they actively contribute ideas and take part in discussions on the mission and goals of the educational program at various levels of the ASMI's advisory committess, serving as members of these committees.

1.3 Institutional Autonomy and Academic Freedom

ASMI received institutional, academic and financial autonomy in accordance with the Decree of the President of the Republic of Uzbekistan. No. PP-61 dated 12/24/2021 "On measures to provide financial independence to state higher educational institutions".

The bachelor's degree program in "General Medicine" (in English) at the Institute is structured around its mission and aligned with the requirements set by the Ministry of Higher Secondary Specialized Education of the Republic of Uzbekistan, as per the October 19, 2021 directive No. 35-2021, "On the Approval of the State Standard of the Republic of Uzbekistan" for higher education, as well as the Ministry of Health's protocol No. 4, dated August 31, 2021.

During visits to the ASMI's Multidisciplinary Clinic and Simulation Center, along with meetings with department heads, faculty, and tutors, it was evident that the program is student-centered, enabling the training of dentists who are skilled in medical, organizational, managerial, and research activities. Based on the 2021 State Educational Standard of Uzbekistan, the ASMI Charter, ASMI Strategic Development Plan, regulations for assessing student knowledge, admission rules for bachelor's programs, and the ASMI Academic Policy (from August 26, 2024), ASMI independently developed the "General Medicine" (in English) program. This includes conducting assessments, selecting teachers, setting employment conditions, and allocating resources. The development of syllabi, the elective course catalog, and working curricula, as well as the form, structure, and procedure for creating these documents, are determined independently by ASMI. All educational and methodological documentation has been reviewed and approved at various levels, including department meetings, the Academic Council of the faculty, the Central Methodological Council, and the Institute's Academic Council, in compliance with relevant legislation and regulations. The program also includes a list of practical skills recommended by the State Educational Standard, specifying the number of skills and the level of competency required for each. a first-year student

A survey conducted on the platform <https://webanketa.com/> included responses from 82 students, with the following distribution: 40.2% were 1st-year students, 32.9% were 2nd-year students - 7.3% were 3rd-year students, 10.9% were 4th-year students, 8.5% were 5th-year students, and none were 6th-year students. These students answered 65 questions, covering aspects of the educational process and program quality. The survey revealed that 83.4% of respondents believe that the heads of the educational program and teachers are aware of students' training-related issues. When asked, "In your opinion, how adequate is student participation in key committees of the medical educational

institution?" 71.9% responded positively, while 3.78% were unsure. Regarding career counselling at ASMI, 68.4% of students felt it was sufficient, though 2.4% found it difficult to answer. Overall, 79.3% of students expressed satisfaction with the quality of their medical education, 3.4% were dissatisfied. Additionally,

When asked whether the student understand the ethical and professional values that were expected of the profession 81.7% provide positive result. When asked about their readiness to begin a residency program, 73.1% were confident they had gained the necessary clinical knowledge and skills.

The faculty survey included 400 teachers and consisted of 27 questions. Among the respondents, 42.5% had over 10 years of teaching experience, 17.3% had up to 10 years, and 5.9% had up to 5 years of experience. The specialties represented were as follows: 23.7% from therapeutic fields, 9.3% from surgical fields, 25% from pediatrics, 2.5% from obstetrics and gynecology, 9.5% from general medicine, and 30% from other areas. When asked if they were satisfied with their work organization and workplace, 86.5% of teachers were fully satisfied, while 8.8% partially agreed. Survey data showed that 79.4% of teachers observed a healthy working atmosphere at ASMI, and 87.5% indicated that the management regularly listens to their opinions regarding the educational process, research, and clinical work, with 26.6% noting this happens sometimes, and 4.7% giving no answer. Furthermore, 87% of teachers felt they had full opportunities to realize their professional potential, while 8.5% partially agreed, and 1% partially disagreed.

EEC conclusions on criteria. Compliant of 11 standards: fully - 11, partially - 0, not compliant - 0.

Recommendations for improvement: none. The standard has been fully implemented.

Standard 2. CURRICULUM

The undergraduate program in "General Medicine" is the institute's flagship program, drawing 53% of the student body, which totals 4,918 students. The Faculty of General Medicine was established in October 1955. In 2019-2020 academic year EP "General Medicine" (in English) was introduced. In 2021, ASMI successfully underwent an external evaluation by the State Inspectorate for Quality Control in Education of the Republic of Uzbekistan. The results of this evaluation confirmed the accreditation of the educational programs in General Medicine, for which the appropriate certificates were issued.

Student training is conducted in accordance with the directives issued by the Acting Minister of Secondary Special Education of the Republic of Uzbekistan on October 19, 2021, No. 35-2021, titled "On the Approval of the State Standard of the Republic of Uzbekistan: State Standard of Higher Education. Basic Rules," as well as Protocol No. 4 from the Ministry of Health of the Republic of Uzbekistan dated August 31, 2021. The educational process at the Institute is structured according to the "Regulations on the implementation of the credit-modular education system at ASMI. "The Faculty of General Medicine is responsible for the implementation and effectiveness of undergraduate educational programs, reporting to the Office of the Vice-Rector for Academic Affairs.

2.1 Intended curriculum outcomes

Individuals who have completed the "General Medicine" educational program at the higher education level and successfully passed the final certification are granted the degree of "Bachelor" / "Bachelor of General Medicine" after a 6-year course of study. They also receive the qualification of "general practitioner" in the specialty of "General Medical Practice."

Upon completing the full cycle of training (bachelor's degree plus clinical residency or master's degree), the student is awarded the degree of "General Practitioner" and is qualified to perform the duties of a doctor in their specialty.

The Ministry of Education and Science regulates the learning outcomes in general education disciplines. Competencies and learning outcomes for specific disciplines within the educational program are outlined in syllabuses, which are provided to students at the start of each discipline.

As we read in the self-evaluation report, the program serves to develop knowledge, skills and professional attitudes. This is based on the chain of processes, such as: Need - Motive - Purpose - Content - Means - Result.

2.1.1 The medical school has defined the learning outcomes that students should have achieved by graduation, as well as the intended learning outcomes for each part of the course.

2.1.2 The medical school's intended curriculum outcomes can be set out in any manner that clearly describes what is intended in terms of values, behaviours, skills, knowledge, and preparedness for being a doctor.

The curriculum "General Medicine" (in English) includes theoretical and practical components to strengthen medical knowledge via application in clinical practice, as knowledge in the basic field of natural (social, humanitarian, economic), biomedical, and clinical sciences; ability and readiness to acquire new knowledge necessary for daily work in medical practice, as well as for further professional training and development.

Core general field specific competencies of Program of ASMI include various aspects: the field of general education, which provides students with the use of knowledge in the professional area of medical practice;

The medical field specific learning outcomes are follows:

1. Ability to make a diagnose, developing skills in disease diagnosis.
2. Interpretation of results of modern instrumental, laboratory and functional research methods and ability to prescribe drugs.
3. Treatment planning: ability to diagnose and develop a treatment plan for patients of all ages, taking into account their needs and preferences. In case of necessity refer patients to appropriate specialists.
4. Diagnosis of major diseases: ability to diagnose underlying diseases in patients of all ages.
5. Medical activity: building competence to provide primary and emergency care in life-threatening situations.

The program fosters research skills and competencies aimed at developing the following learning outcomes:

1. Analysis of scientific literature: ability to critically evaluate and analyze scientific materials.
2. Conducting research: capability to independently carry out scientific research.
3. Participation in solving scientific and applied problems: involvement in addressing specific tasks related to developing new methods and technologies in the healthcare field.

In addition, graduates must exhibit professionalism in line with public moral and legal standards, adhere to the rules of medical ethics, academic integrity, and comply with laws and regulations regarding working with confidential information. Basic competencies also include knowledge and the ability to maintain medical confidentiality, work in a team, adequately defend one's point of view, find compromises, align one's opinions with those of the team, and propose new solutions.

The program also aims to achieve general learning outcomes such as socio-ethical basic competence, which provides students with the skills and readiness for logical analysis, reasoned speech, participation in discussions and debates. This part of competences outlines a comprehensive set of professional and ethical skills that the program expects graduates to develop. These include the ability to engage in critical thinking, logical reasoning, and effective communication, which are crucial for participating in professional and ethical discussions. The emphasis on tolerance and conflict resolution suggests a focus on interpersonal skills necessary for working in diverse and potentially challenging environments.

The LO of the program include also the ability to adapt to changing environmental conditions related to professional activity, as well as the ability to communicate with people of different cultures, religions, nationalities, and traditions. The learning outcomes also specify the skills of gathering and interpreting information, and using informational and innovative technologies in the professional field. To summarize the ultimate outcomes of the "General Medicine" program (in English) at Andijan State Medical Institute are as follows:

1. Practice-oriented and patient-centered education: Emphasizing the practical application of knowledge and direct patient interaction;
2. Enhancing the quality of education and the educational process: Ensuring the achievement of high-quality standards during education;
3. Graduate achievements: Producing doctors with strong communication skills, managerial competencies, and research potential.

The mentioned learning outcomes are achievable and the achievement of these outcomes is ensured by various departments of the institution. As a result of an interview with the Central methodical commission of the institution it becomes clear that based on the learning outcomes and the government-approved typical curriculum, the institution is creating a working learning plan outlining the study courses, credits, academic calendar, and other relevant details. Additionally, ASMI is preparing a work plan, course programs, and annual syllabi with specific LO taking into account current trends in the field of medicine.

We reviewed the syllabi provided by the institution for basic and clinical subjects for confirmation of the information gathered through the interview to ensure that they include more detailed learning outcomes. The interview with the dean overseeing the English language program revealed that both the department and the dean's office regularly assess the achievement of learning outcomes by students via interviews and surveys, providing feedback for continuous improvement.

2.1.3. The medical school considers whether the defined outcomes align with its mission.

The program's learning outcomes clearly reflect competencies such as maintaining a high level of expertise, mastering information literacy, adhering to ethical standards, fostering personal integrity, demonstrating honesty, altruism, and a commitment to serving others, upholding a professional code of conduct, promoting justice, and showing respect for others. These competencies align with the institution's mission and serve as the foundation for its development.

2.1.4. The medical school reviews and analyses how the defined outcomes map on to relevant national regulatory standards or government and employer requirements.

Educational programs "General Medicine" at ASMI comply with the State Educational Standards of the Republic of Uzbekistan (GOSO RU) and express the mission and goals of institute. Unfortunately, this document is currently available only in Uzbek language, which limits access to its contents for non-Uzbek speakers. The whole program and learning outcomes too are developed at the national level, approved by the Ministry of Education, and approved with the Ministry of Health. Then it is disseminated to educational institutions, where they are permitted to implement up to 10% of modifications and additions to tailor the program to their specific needs.

The LO of ASMI align with the National Qualifications Framework for Higher Education (HPY BO) Republic of Uzbekistan are tailored to meet the demands of the job market. The institution has conducted labor market research, and the findings have been used to adjust the learning outcomes within the institution's academic autonomy.

The self-evaluation report states that Employers, who represent the interested party in the process, take part in the formation of learning outcomes. Institution conducted Labor market research (approximately 12 documents were presented) and it showed that graduates of higher education institutions must be ready for various situations, the highly qualified specialists of the new generation should be able effectively cope with challenges in the conditions of increasing competition. Employers expect specialists to understand their role in the professional community and possess the necessary skills and personal qualities for successful work. The institution incorporates these requirements when developing the learning outcomes for its syllabi. Since the program learning outcomes are not solely determined by the institution and are provided in a standardized form by the state, ASMI integrates job market demands within the permitted scope of modifications. Employer interviews confirmed their participation in adapting the learning outcomes.

2.1.5. The medical school analyses whether the specified learning outcomes address the knowledge, skills, and behaviours that each part of the course intends its students to attain. These

curriculum outcomes can be expressed in a variety of different ways that are amenable to judgement (assessment).

The institute's departments systematically monitor students' academic progress throughout the learning process. The medical school analyzes the achievement of the learning outcomes, via the academic progress of the students, and tries to find out whether the learning outcomes defined by the program correspond to the knowledge, skills, and behavior that each learning course develops in the student.

However, we would like to point out here that ASMI does not have a clear system for evaluating the achievement of learning outcomes, and it would be desirable to develop an LO benchmark map, which would allow the institution to more easily and transparently assess how achievable and measurable the learning outcomes are.

Based on the results of the analysis benchmark map, departments, and the Dean may adjust educational programs to be able to find and correct the weak points of the program implementation.

2.1.6. The medical school considers how the outcomes can be used as the basis for the design and delivery of content, as well as the assessment of learning and evaluation of the course.

In the institution's self-evaluation report concerning this sub-standard, it is highlighted that it is considering the possibility of using the final learning outcomes as a foundation for developing and defining the content of the educational program, but at this moment, based on the learning outcomes of the program, the design of the program cannot be developed, because the ready program is offered by the state itself.

In its self-evaluation, ASMI reports that modern assessment methods (Innovative educational method of evaluation such as Case-study, Team-Oriented Learning (TBL), Case-Based Learning (CBL), Problem-Oriented Learning (PBL), simulations, and traditional, interactive, vertical and horizontal integrated lectures) have been developed based on the learning outcomes and are applied in the program's implementation. However, it was noted during interviews with the Dean's Office staff and faculty involved in implementing the English-language program that some instructors are not fully acquainted with these modern assessment methods and lack a comprehensive understanding of them.

2.1.7. The medical school ensures that the educational programme has a clearly formulated set of intended learning outcomes, conducive to the development of competences in public health and which are responsive to changing environment, health needs and demands of populations.

ASMI has incorporated both local and global public health challenges into its learning outcomes, such as the response to COVID-19. This is demonstrated through the learning outcomes of learning courses: "public health" and "particularly dangerous diseases - COVID-19 infection" on the 4th year of education.

2.1.8. The medical school ensures appropriate student conduct with respect to fellow students, physicians, faculty members, other health care personnel, patients and their relatives.

ASMI has established documents, including the "Code of Ethics for Medical Personnel" and the "Regulation on the Procedure for Assessing Knowledge," which outline the ethical behavior and responsibilities of students, as well as the ethical standards to be upheld when interacting with patients and their families. These documents also govern the relationships between students and teachers, defining the obligations of teachers toward their students.

Although students gain foundational communication skills with patients, their families, and healthcare professionals during practical classes in clinical subjects and further develop these skills in real-world clinical settings, where their performance is evaluated according to the evaluation sheet. It is recommended that a dedicated course be added to the curriculum, within the institution's academic autonomy, to specifically focus on enhancing students' communication skills.

Furthermore, ASMI has an "Academic Policy" document that outlines a policy on academic honesty, emphasizing the teacher's role as a mentor who fosters academic culture and encourages all participants in the educational process to uphold and protect academic integrity. However, this policy should be explicitly reflected both in the program and in individual syllabi, which serve as the primary

information source for students. It is recommended that academic integrity be clearly stated within the syllabi to ensure its visibility and application.

2.1.9. The medical school has defined and coordinated the linkage of acquired outcomes by graduation with acquired outcomes in postgraduate training; defining the outcomes of student engagement in medical research.

The learning outcomes of most clinical subjects of the program of "General Medicine" equip graduates to progress into relevant clinical master's degree programs or residency postgraduate training. For instance, in bachelor's degrees, subjects like general surgery, pediatrics, and obstetrics and gynecology, the learning outcomes are structured to align with further study, enabling students to seamlessly continue education into master's programs or residency training in these respective specialties.

According to the self-evaluation report, fostering student engagement in medical research is primarily achieved by promoting analytical and critical thinking across all disciplines. The Council of Young Scientists and the Student Scientific Society actively support student involvement in research. Additionally, the Student Scientific Society, a voluntary organization for medical students, aims to develop, support, and encourage scientific activities, contributing to the overall improvement of specialist training quality.

However, developing critical thinking and analytical skills alone is insufficient for students to conduct medical research effectively. Students must also acquire knowledge of modern scientific research methods, biostatistics, and academic writing. This includes understanding how to prepare and publish articles, identifying credible academic sources, and adhering to academic integrity standards. These skills are essential for successful participation in the research process.

It is recommended that the institution introduce a basic course in scientific research skills, utilizing its academic autonomy and the 10% flexibility for program modifications. This course would equip students with essential research competencies, enhancing their ability to conduct and contribute to medical research.

When asked whether they were satisfied with the level of students' prior training upon admission to their educational programs, 55.3% of surveyed teachers responded that they were fully satisfied, while 33.5% expressed partial satisfaction. Additionally, 75.3% of the teachers believe that students of this institution possess a high level of knowledge and practical skills upon completing the program, 20% partially agree, and 3.25% do not fully agree with this assessment.

2.2 Curriculum organisation and structure

The structure of the "General Medicine" educational program for the first year consists of a compulsory module of disciplines totaling 302 credits, an elective module worth 23 credits, and practice amounting to 31 credits. In the second and third years, the program includes a clinical disciplines module (223 credits), a preclinical disciplines module (80 credits), a humanities and socio-economic module (11.5 credits), an elective module (9.5 credits), and practice (40 credits)/ Integration with patients begins in the first year through the course "Introduction to the Specialty."

2.2.1. The medical school has developed and documented the overall organisation of the curriculum, outcomes (knowledge, skills, professional values and attitude), disciplines, service and clinical preparation including the principles underlying the curriculum model employed and the relationships among the component disciplines.

According to the "Academic Policy" document, when developing a new educational program at ASMI, as well as a working educational plan, which the institute creates independently based on a basic or standard curriculum, a working group is formed. This group includes the head of the educational program (typically the faculty dean), experienced faculty members involved in delivering the program, current students, and employers. Key factors considered in developing the program include staffing, access to information resources, logistical support, access to practical training bases, and adequate information and methodological support for program implementation. To ensure quality, the program undergoes an internal evaluation by the Public Council before being submitted for external review by employer representatives. Once the program development is complete, the decision

made by the cycle-subject council is submitted for review and further discussion by the central methodological council. If it receives approval, the decision is then forwarded to the Institute's Board for consideration and finalized during a meeting of the Supervisory Board.

2.2.2. *The medical school describes the content, extent and sequencing of courses and other curricular elements to ensure appropriate coordination between basic biomedical, behavioural and social and clinical subjects.*

The structure and content of the working curricula for the "General Medicine" program adhere to State Educational Standards approved by order of the Ministry of Health of the Republic of Uzbekistan of 08.09.2021 No. 236 "On approval of regulatory documents on the organization of the educational process in medical and pharmaceutical higher and secondary specialized educational institutions" and aligned with the National Qualifications Framework of republic of Uzbekistan,

The LO is designed to reflect the appropriate level of education and is articulated through specific competencies. In this context, the primary learning outcomes are identified as follows:

- Knowledge and understanding
- Application of knowledge and understanding
- Development of judgment
- Communication skills
- Learning skills or ability to learn

The curriculum is developed with consideration for prerequisite and subsequent course requirements. The educational program of ASMI includes standard curricula, a catalog of elective disciplines, individual student curricula, working curricula, and educational-methodological complexes for various subjects. The working curricula and syllabi provide detailed information, including the course codes, titles, distribution across semesters, volume in hours and credits, and types of classes such as lectures, seminars, practical exercises, and independent student work. The labor intensity of one academic credit (30 academic hours) corresponds to the 1 ECTS credit and the 1 academic hour is equal to 40 minutes.

The AMSI program ensures effective coordination between basic biomedical and clinical subjects; however, it would be beneficial to enhance the curriculum by incorporating behavioral and social sciences, if feasible within the allowed program modifications.

2.2.3. *The medical school in the curriculum ensures horizontal integration of associated sciences and vertical integration of the clinical sciences with the basic biomedical and the behavioural and social sciences, and allow optional (elective) content and define the balance between the core and optional content as part of the educational programme and describes the interface with complementary medicine.*

The current medical program includes all the essential subjects necessary for the General Doctor specialty. However, upon reviewing the self-assessment, it becomes evident that the program lacks a clear and robust demonstration of both horizontal and vertical integration. Horizontal integration, which typically involves linking subjects within the same academic year (e.g., integrating clinical skills with biomedical sciences), and vertical integration, which spans across different academic years (e.g., revisiting foundational topics at more advanced clinical levels), are only weakly represented. The most visible form of integration in the program occurs in clinical and non-clinical subjects, where market-related topics are sometimes intertwined with clinical ones, though this integration appears somewhat superficial.

If ASMI aims to improve the integration of its curriculum, *these changes can be implemented within the framework of state-approved program modifications. A more cohesive and integrated curriculum should incorporate seamless connections between foundational, clinical, and market-related subjects across the various years of study.*

By ensuring this alignment, the curriculum would foster a deeper understanding of core topics while preparing students for complex real-world applications, especially in clinical and healthcare-related market scenarios. To align with regulatory standards, any proposed changes should be submitted for approval under the Uzbek Republic educational guidelines, ensuring that updates maintain compliance with broader national educational objectives. Faculty from both clinical and foundational disciplines should collaborate to design this integrated curriculum, with an emphasis on continuous development throughout the program. This approach not only improves curriculum quality but also ensures that changes are made systematically and are state-compliant.

2.2.4. The medical school ensures that the qualification resulting from a programme is clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area. (ESG I.2)

The National Qualifications Framework of the Republic of Uzbekistan was approved in accordance with Appendix No. 1 to the Resolution of the President of the Republic of Uzbekistan No. PP-345 dated September 30, 2024.

According to the National Qualifications Framework of the Republic of Uzbekistan and the European Qualifications Framework:

Bachelor's degree corresponds to qualification level 6,

Master's degree corresponds to qualification levels 7-8,

PhD and DSc degrees correspond to qualification level 8.

The development of the educational program using credit-modular technology and aligning it with ECTS standards represents an important step in improving education quality. The adoption of ECTS credits not only complies with European standards but also enhances student mobility and fosters international academic recognition. The program features well-structured modules, ensuring that students receive comprehensive education, building on foundational knowledge and applying it in various contexts. This approach supports continuous learning and development throughout the program, preparing students for diverse professional opportunities.

Upon completing the bachelor's degree in "General Medicine," students receive the qualification of "General Practitioner." This qualification is clearly defined and communicated, aligning with the appropriate level of the national qualifications framework for higher education and, by extension, with the Framework for Qualifications of the European Higher Education Area.

2.2.5. The medical school's programmes provides students with both academic knowledge and skills including those that are transferable, which may influence their personal development and may be applied in their future careers. (ESG G 1.2)

The program equips students with the knowledge and skills necessary for both personal development and future career success. Through specialized disciplines, students gain essential competencies such as conducting professional activities in line with accepted moral and legal standards. They are trained to adhere to medical ethics, maintain academic integrity, and understand the legal framework for handling confidential information. Students develop the ability to safeguard medical confidentiality, while also honing teamwork skills, learning to present and defend their views, find compromises, and engage in constructive collaboration. Additionally, these courses foster critical thinking, effective communication, creative problem-solving, initiative, and leadership abilities, all of which are essential for both personal and professional growth.

The program also prepares students to adapt to changing circumstances, promoting flexibility and agility in various scenarios related to their future professional roles. The evaluation of these skills allows the institution to verify that students have genuinely achieved the desired outcomes. A point-rating system is used to assess students' progress in mastering professional qualities and interpersonal skills. This system not only evaluates their grasp of core educational subjects but also measures other key attributes essential for shaping the future doctor's character. It serves as a motivational tool, encouraging active engagement in learning and professional development.

2.2.6. The medical school's programme:

- *designed with overall programme objectives that are in line with the institutional strategy and have explicit intended learning outcomes;*
- *designed by involving students and other stakeholders in the work;*
- *benefit from external expertise and reference points;*
- *designed so that they enable constant promotion, smooth student progression;*
- *defined the expected student workload, e.g. in ECTS;*
- *included well-structured placement opportunities where appropriate;*
- *and it is subject to a formal institutional approval process. (ESG G 1.2)*

AMSI's strategy focuses on improving the quality of education by maintaining high standards of educational services and consistently monitoring the institute's performance. Upholding these standards helps ensure the training of highly skilled specialists capable of delivering quality medical care to the public. This strategy aligns with the program's goals, which emphasize professional development while addressing labor market demands and adhering to the ASMI strategy.

Although the institution is constrained in making significant changes to the state-approved program, it remains important to provide opportunities for staff and students to participate in any allowable modifications. Interviews and meetings revealed that while the Central Methodical Commission is involved in this process, faculty members responsible for implementing the program have less engagement, and student involvement is minimal. To promote academic autonomy, it would be beneficial to involve relevant stakeholders in the development of the educational program through participation in the Faculty Council, the Central Methodological Commission, and the Academic Council of the institute.

It is worth noting that in 2021, ASMI successfully underwent an external evaluation by the State Inspectorate for Quality Control of Education of the Republic of Uzbekistan. The results confirmed the accreditation of educational programs in "General Medicine," and corresponding certificates were issued. Additionally, the institution has clear guidelines for calculating student workload using the European Credit Transfer and Accumulation System (ECTS). This process involves determining learning outcomes, assessment methods, and the time students are expected to spend on coursework, including lectures, assignments, and self-study.

The newly constructed institute building, which meets modern standards, is located near newly established clinical bases that also adhere to contemporary requirements. These facilities support the program's goals and learning outcomes, allowing students to participate in clinical practice. While the new bases are not yet accepting students, students have been placed at other clinical bases, where they successfully complete their clinical training, as verified during the visit. Interviews also highlighted high student satisfaction with their clinical practice experience.

The institution regularly collects feedback from both students and placement supervisors, which is actively used to continually improve the structure and quality of the placements.

2.2.7. The medical school ensures that learning and teaching are student-centred with students encouraged and supported in taking responsibility for self-directed learning in order to encourage a culture of life-long learning.

The findings reveal that ASMI's medical program emphasizes a student-centered approach to both learning and teaching. This focus on student-centered learning is reflected in limiting the number of students per group. In the first year, groups are capped at 15 students, an optimal size for discussions, team-based teaching, press conferences, seminars, and role-playing activities led by instructors. In the second year, when the focus shifts to basic biomedical disciplines, the group size is further reduced to 12 students, allowing for a more in-depth study of the material and the introduction of new teaching and assessment methods. By the 3rd and 4th years, as students begin studying clinical disciplines, the group size is reduced to a maximum of 10 students. During this phase, students engage in clinical settings, working directly with patients.

Additionally, both the administration and faculty show strong dedication to student success. For instance, if a student misses a clinical practice or seminar, instructors offer a complete makeup of these hours without extra compensation. Mentors are also available around the clock to provide guidance and information. Students benefit from excellent living and study conditions in the dormitory, including access to a dormitory library, which further enhances their overall educational experience..

2.2.8. The medical school ensures that the curriculum is delivered in accordance with principles of equality.

ASMI is committed to upholding equality for both staff and students. Its training objectives emphasize promoting ethical behavior, personal integrity, honesty, altruism, community service, adherence to the professional code, fairness, and respect for others. The institution also ensures equality, regardless of gender, ethnicity, religion, sexual orientation, or socioeconomic background

2.3 Curriculum content

2.3.1. The medical school can justify inclusion in the curriculum of the content needed to prepare students for their role as competent junior doctors and for their subsequent further training.

The "General Medicine" curriculum at ASMI includes subjects such as Propaedeutics of Pediatrics and Internal Medicine, General Surgery, Primary Care Surgery, Pulmonology, Neonatology, Pediatric Surgery, Obstetrics and Gynecology, Dermatovenereology, Medical Radiology, Urology, Traumatology and Orthopedics, Endocrinology, Anesthesiology, Neurology, Neurosurgery, Oncology, Otorhinolaryngology, Psychiatry, Epidemiology, Infectious Diseases, Outpatient Pediatric Care, and more. The learning outcomes of these courses equip students with the knowledge and skills necessary to fulfill the role of a junior doctor and pursue postgraduate education. In addition, graduates will be prepared for independent professional practice in their chosen specialty, with competencies that qualify them to hold positions in state, municipal, and private healthcare institutions.

2.3.2. The medical school's curriculum content in at least three principal domains is described: basic biomedical sciences, clinical sciences and skills, and relevant behavioral and social sciences.

The program comprises a preclinical disciplines module worth 80 credits, a humanitarian and socio-economic module of 11.5 credits, and a practical training component totaling 40 credits. In the second and third years, the program structure includes a clinical disciplines module amounting to 223 credits. The program includes all three domains with a sufficient number of credits.

2.3.3. The medical school's curriculum contents in all domains are sufficient to enable the student to achieve the intended outcomes of the curriculum, and to progress safely to the next stage of training or practice after graduation.

The program begins with biomedical preclinical subjects, progresses to natural sciences, and gradually advances in complexity to clinical subjects. However, students are introduced to the clinical setting from the very first year through the 4-credit course "Introduction to the Medical Profession".

Different levels of mastering clinical skills align with the stages of the educational program and the clinical base, depending on the complexity of medical care. The curriculum is structured according to the principle of "from simple to complex," allowing students to gradually increase their knowledge and clinical skill and clinical reasoning level and be prepared for independent clinical practice upon graduation.

2.3.4. The medical school's curriculum content includes the principal domains:

- ***Basic biomedical sciences which are the disciplines fundamental to the understanding and application of clinical science;***
- ***Clinical sciences and skills which include the knowledge and related professional skills required for the student to assume appropriate responsibility for patient care after graduation;***
- ***Behavioural and social sciences which are relevant to the local context and culture, and include principles of professional practice including ethics;***

The ASMI medical program is thoughtfully structured to meet accreditation standards, incorporating several essential components.

It begins with Basic Sciences, covering subjects such as medical biology and chemistry, medical and biological physics, human anatomy, cytology, histology, embryology, microbiology, virology, immunology, and normal physiology. These foundational disciplines provide the scientific knowledge necessary for students to grasp preclinical concepts and develop a strong basis for future clinical reasoning.

Following the basic sciences, the program introduces pre-clinical subjects, including clinical anatomy, pathological anatomy, pathological physiology, pharmacology, and medical radiology, which lay the groundwork for understanding clinical topics.

From the third year onward, the focus shifts to Clinical Sciences, offering integrated, comprehensive clinical knowledge and practical skills. This portion of the curriculum includes training in diagnosis, treatment, patient care, and clinical decision-making, ensuring that students are well-prepared to assume responsibilities in patient care upon graduation.

The program also includes Behavioral and Social Sciences, addressing subjects relevant to the local context and culture, such as philosophy, psychology, and bioethics. While communication skills are not taught as a standalone course, they are partially integrated into the clinical subjects. However, it would be beneficial to introduce communication skills as a separate subject.

The curriculum emphasizes professional practice principles, including ethical decision-making, cultural competence, and patient-centered care. By integrating these elements, the program ensures that students are thoroughly prepared for clinical responsibilities and professional practice, with a strong focus on ethical and culturally sensitive care. ASMI medical program is well-designed and includes the following key components to meet accreditation standards:

The program starts with Basic Sciences: medical biology and chemistry, medical and biological physics, human anatomy, cytology, histology, embryology, microbiology, virology, immunology, and normal physiology, these disciplines provide the foundational knowledge to understand and apply preclinical sciences and ensure that students will develop a strong scientific basis for their future clinical reasoning skills.

Next in the program comes pre-clinical subjects such as clinical anatomy, pathological anatomy, pathological physiology, pharmacology, medical radiology, The mentioned subjects prepare the base for the clinical subjects.

From 3rd year of the education program includes Clinical Sciences: There is integrated comprehensive clinical knowledge and hands-on skills. This includes training in diagnosis, treatment, patient care, and clinical decision-making, which ensures that students are prepared to take on appropriate responsibilities in patient care upon graduation.

Program contains as well Behavioral and Social Sciences: Courses that address topics relevant to the local context and culture, including philosophy, psychology, and bioethics, but the program does not contain separate "communication skills". The development of this skill is partially embedded within the clinical subjects. However, it would be preferable if it was included in the program as a separate subject.

So the curriculum emphasizes the principles of professional practice, including ethical decision-making, cultural competence, and patient-centered care.

By integrating these domains, the program ensures that students are well-prepared for clinical responsibilities and professional practice in a culturally sensitive and ethical manner.

2.3.5. The medical school's curriculum content also includes:

- ***Health systems science which includes population health and local healthcare delivery systems;***
- ***Humanities and arts which might include literature, drama, philosophy, history, art, and spiritual disciplines.***

The medical program provides a comprehensive curriculum designed to equip students to navigate the complexities of healthcare across various contexts. A key component is the inclusion of public health, which delivers a strong foundation in health systems science. This subject focuses on key areas such as population health and local healthcare systems, offering students insight into healthcare structures and their functions within different population groups. It also covers the social determinants of health, health policy, and the broader impact of healthcare systems on community well-being. Additionally, students explore healthcare resource management, healthcare economics, and the delivery of care in diverse settings, including urban, rural, and underserved communities.

Through this approach, the program prepares students to participate in public health initiatives and improve healthcare delivery by addressing systemic challenges and promoting equity. However, the curriculum lacks subjects related to the humanities and arts, which are essential for fostering empathy, ethical reasoning, and cultural awareness. Integrating literature, drama, and art could enhance emotional intelligence and communication skills, which are crucial for patient interactions.

The program does, however, include philosophy and history, which promote critical thinking, ethical decision-making, and a deeper understanding of the evolution of medical practice.

Additionally, it would be beneficial to integrate spiritual disciplines where applicable, allowing students to appreciate diverse cultural perspectives on health, healing, and patient care. By combining health systems science with elements of the humanities and arts, the program would better equip students to navigate the technical, ethical, and interpersonal dimensions of modern medical practice.

2.4 Basic Biomedical Sciences

The General Medicine educational programs incorporate the latest advancements in biomedical disciplines to build a foundational understanding of scientific knowledge for students. Essential modules such as “Morphology and Physiology” (encompassing anatomy, physiology, histology, and biochemistry), “Microbiology,” “General Immunology,” “General Pathology,” “Organ and System Pathology,” “Fundamentals of Pathological Physiology,” and “Pharmacology” are included in the curricula.

2.4.1. The medical school identifies and incorporates in the curriculum the contributions of the basic biomedical sciences to create understanding of scientific knowledge, concepts and methods fundamental to acquiring and applying clinical science.

The program equips students with foundational biomedical knowledge essential for application in clinical practice. The Basic Learning Courses in “General Medicine” are structured to address key clinical concepts. For example, Human Anatomy is taught in the 1st and 2nd years, followed by Clinical Anatomy and Pathological Anatomy in the 3rd year, with a focus on clinical relevance. Normal Physiology in the 2nd year and Pathological Physiology in the 3rd year provide essential insights into body functions and their role in disease states. Additionally, Medical Biology and Medical Chemistry in the 1st year cover molecular mechanisms of health and disease, metabolic pathways, and their clinical applications, such as laboratory diagnostic methods in clinical chemistry.

Histology, Cytology, and Embryology, taught in the 1st year, provide essential knowledge of microscopic structures and developmental processes, with a focus on their clinical implications. Pharmacology, covered in the 3rd year, explains the mechanisms of drug action, side effects, and interactions that are critical for clinical care. Additionally, Pathology offers an understanding of disease processes, tissue responses, and diagnostic criteria, laying the groundwork for accurate diagnosis and treatment.

Microbiology, Virology, and Immunology taught in the 2nd year, provide insights into pathogen biology, host defense mechanisms, diagnostic methods, vaccination, and immunotherapy. The basic biomedical sciences are well-structured and include clinical correlations, laying a strong foundation for clinical courses. However, the teaching and evaluation methods needed to enhance clinical integration are lacking. For instance, integrating case-based learning, where basic biomedical sciences are taught alongside clinical cases, would help students understand their relevance to patient care. Additionally, introducing early exposure to clinical problem-solving using basic science concepts, such as solving clinical vignettes based on physiological principles, would further reinforce the clinical application of these sciences.

In addition, the program lacks a dedicated course on Research Methodology and Scientific Principles. While Biostatistics and Epidemiology provide students with the tools to critically analyze medical literature and understand evidence-based practice, student involvement in research projects is encouraged through various activities but is not mandatory for all.

It would be highly beneficial to include a course in the program specifically focused on developing research skills in biomedical sciences, with an emphasis on clinical investigation. This would better equip students to engage in scientific inquiry and apply research principles to clinical practice.

In addition, incorporating teaching methods such as Problem-Based Learning (PBL), where students are presented with scenarios that require them to apply basic science knowledge to solve clinical problems, would be valuable. By integrating these approaches into the curriculum, the program would better align with the standard of bridging basic biomedical sciences with clinical education, ultimately enhancing students' understanding and application of scientific concepts in real-world clinical settings.

2.4.2. The medical school in the curriculum (educational programme) adjust and modify new advances in the biomedical sciences for:

- **scientific, technological and clinical developments;**
- **current and anticipated needs of the society and the health care system.**

The educational programs "General Medicine" integrate the latest achievements of biomedical disciplines in order to form a basic understanding of scientific knowledge among students. Key modules such as Morphology and Physiology (including Anatomy, Physiology, Histology, and Biochemistry), Microbiology, General Immunology, General Pathology, Organ and System Pathology, Fundamentals of Pathological Physiology, and Pharmacology are included in the curricula.

Regarding the statement, *"The basic scientific course included a sufficient number of clinically relevant examples,"* 43.3% of students completely agreed, 32.1% partially agreed, and 3.7% disagreed. Similarly, 44.9% of students fully agreed that mandatory clinical practices effectively integrated basic scientific content, while 32.1% partially agreed, and 2.8% disagreed. Additionally, 44.5% of students expressed complete satisfaction with the quality of preclinical training during the first and second years, 28.04% partially agreed, and 4.6% were dissatisfied.

2.5 Clinical Sciences and Skills

2.5.1. The medical school identifies and incorporates in the curriculum the contributions of the clinical sciences to ensure that students

- **acquire sufficient knowledge and clinical and professional skills to assume appropriate responsibility after graduation;**
- **spend a reasonable part of the programme in planned contact with patients in relevant clinical settings;**
- **have experience in health promotion and preventive medicine;**
- **spend sufficient time in contacts with appropriate number of patients to study at the clinical sites, including internal medicine, surgery, psychiatry, family medicine, obstetrics and gynecology, pediatrics.**

In the "General Medicine" curriculum a significant portion of the program involves planned and supervised patient interactions in diverse clinical settings. Students are exposed to real-world medical scenarios, enabling them to apply theoretical knowledge and hone their clinical skills. This contact spans various stages of their education to ensure a gradual increase in complexity and responsibility.

The curriculum ensures that students spend adequate time interacting with a diverse range of patients in core clinical disciplines, including surgery and surgical diseases, pediatric surgery, psychiatry-narcology, outpatient polyclinic therapy, outpatient polyclinic pediatrics, internal diseases, obstetrics and gynecology, and pediatrics. Through these experiences, students gain the exposure necessary to develop a broad understanding of different medical specialties, enabling them to make informed career choices and meet the demands of the healthcare system.

This structured approach, aligned with ECTS standards, guarantees that graduates are well-equipped to begin their careers with the necessary competencies, clinical experience, and professional readiness.

2.5.2. The medical school organises clinical training with appropriate attention to patient safety that would require supervision of clinical activities conducted by students.

Tutors and instructors ensure that students are thoroughly prepared before starting clinical practice, with a strong emphasis on understanding and applying patient safety protocols outlined in the Regulation "On Internal Regulations." Additionally, ASMI provides clinical skills labs equipped with mannequins and simulators, where students develop fundamental clinical and communication skills. This training is designed to enhance patient safety by allowing students to practice in a controlled environment before interacting with real patients.

According to the ASMI agreements with clinical bases students have to be strictly adhere to safety regulations, exercise caution when using equipment, and maintain ethical standards in patient interactions. A key aspect of the "knowledge to practice" approach is used by the institution, that

ensure the development of manual skills and the use of diagnostic tools. For instance, in the 3rd year of education, students practice patient communication and conduct clinical examinations of general patients. By the 4th year, they perform clinical exams in areas such as Surgical Diseases, Pediatrics, Obstetrics and Gynecology, and Internal Medicine, and make treatment decisions according to established protocols.

Students or volunteers often play as practice patients, allowing their peers to apply clinical skills in a supervised environment, ensuring hands-on experience under the guidance of an instructor.

2.5.3. The medical school in the curriculum (educational programme) adjust and modify new advances in the clinical sciences to the:

- scientific, technological and clinical developments;

-current and anticipated needs of the society and the health care system.

The Faculty and the Central Methodological Commission make changes to the contents of the syllabuses of clinical disciplines, taking into account the latest scientific achievements, innovative research methods, as well as new perspectives for understanding the mechanisms of disease pathogenesis studied in clinical disciplines.

ASMI noted in an interview that an audit of educational programs is conducted every year, which makes it possible to introduce the latest achievements of biomedical sciences into the syllabi of disciplines. ASMI actively offers various medical researches to the population, and also promotes the establishment of a healthy lifestyle in order to maintain the health of the population.

2.5.4. The medical school ensures that every student has early patient contact gradually including participation in patient care, including consistent involvement in the medical care to the patient, responsibility for the examination and / or treatment of the patient under the supervision of a faculty at appropriate clinical sites.

The curriculum is designed to immerse students in the professional environment early on. For instance, first-year students participate in the Assistant Training of the Junior Health Professional, and the course "Introduction to the Medical Profession" offers paramedicine training in pre-hospital settings, where they acquire essential emergency first aid skills.

From the outset, students engage with patients as part of their vocational training, which includes practical experience in hospitals, medical centers, and both inpatient and outpatient settings. During this phase, they receive professional orientation, gain exposure to the clinical environment, and develop communication skills with healthcare personnel.

Guided by their instructors, students practice techniques and procedures as outlined in the curriculum. This clinical approach enables them to assist in surgeries, collaborate closely with teachers during patient consultations ("working in four hands"), and, in advanced years, perform independent consultations under teacher supervision. This structured exposure prepares them for real-world medical practice.

When asked, "Did you have sufficient access to a variety of patients and procedures necessary to complete the visit log?" 44.2% of students responded "yes, completely," 32.4% said "partially," and 3.7% answered "no." Additionally, 47.0% of students feel adequately prepared to advocate for future patients and address their health needs, 28.9% feel partially prepared, while 4.7% consider themselves unprepared.

2.5.5. The medical school has a structure the different components of clinical skills training according to the stage of the study programme.

As a result of the site visit and interviews, it was confirmed that the newly constructed campus plans to include a multi-disciplinary simulation and accreditation center with a capacity for 2,000 students. This center will be located on the second floor of an eight-story building. During the visit, we were able to see the building as well as the models and project plans. Currently, the institution operates simulation labs in the older building, which are equipped with adequate mannequins and medical equipment.

In the Center, there were following classrooms: Anesthesiology-reanimatology; surgery Otorhinolaryngology; Obstetrics and Gynecology; Pediatrics and neonatology; Therapy; Nursing care; Ophthalmology; Neurosurgery; Traumatology ; Endosurgery and «Virtual patient» office.

During our visit, classes were actively taking place in the center, where students practiced suturing, laparoscopic procedures, and providing first aid to newborns with asphyxia.

The self-assessment report states that the center focuses on key aspects of simulation training, including feedback, re-evaluation, and virtual simulations, all of which significantly enhance the quality of education. Students acquire practical experience with simulated patients, while experts and peers can observe the learning process and offer guidance through a remote control center. However, it is important to note that the interview with the staff did not provide sufficient assurance that the institution conducts OSCE exams in full accordance with established standards. Given that OSCE is a critical evaluation method, ensuring its proper implementation is essential to validate that students are receiving comprehensive training and demonstrating continuous improvement in their clinical skills. Achieving this would reassure the faculty that the educational outcomes are meeting the required benchmarks for clinical competence.

Among the students surveyed, 46.4% stated they are fully capable of interpreting educational activities' results to identify common health issues, while 32.4% said they can do so partially, and only 2.8% reported they cannot. Additionally, 46.4% of students can fully develop an appropriate differential diagnosis, 29.5% can do so partially, and 3.4% cannot. Furthermore, 45.5% of students indicated they can create a comprehensive management plan, and 47.7% feel confident in providing care for patients in an outpatient setting. Meanwhile, 82.3% of the teaching staff affirmed that students have unrestricted access to patients at clinical sites, with all necessary conditions to enhance their practical skills.

2.6 Scientific Method

2.6.1. The medical school throughout the curriculum teach:

-the principles of scientific method, including analytical and critical thinking;

-medical research methods;

- evidence-based medicine, which require the appropriate faculty competence and will be a mandatory part of the educational programme and will involve students in small research projects.

- elements of original or advanced research as optional component, including mandatory or elective analytical and experimental research, thereby facilitating the participation of students and faculty in the scientific development of healthcare as professionals and colleagues.

The fundamental principles of the scientific method, along with analytical and critical thinking, are currently addressed only through epidemiology. However, the curriculum lacks essential components such as biostatistics and other subjects that focus on developing medical research methods, evidence-based medicine, academic writing, and research project preparation skills. While some active students participate in scientific activities like student research competitions, this is insufficient, as all students should acquire research skills, not just the most engaged ones.

In light of this, it is recommended that the faculty and central methodological commission develop a course that covers medical research methods, project writing and planning, and biostatistical techniques to ensure that all students gain the necessary research competencies.

A student survey revealed that the educational organization provides opportunities for students to participate in research activities, with 44.9% of respondents expressing complete satisfaction and 26.5% reporting partial satisfaction. When asked about the level of support for research participation, 45.8% of students indicated that full support is available, 29.6% noted partial support, and 3.7% said there is no support. Additionally, 87.5% of teachers fully agree that the institution offers opportunities to engage in scientific work and publish research findings, 8.8% partially agree, and 1.3% (5 individuals) completely disagree.

2.7 Behavioural and Social Sciences, Medical Ethics and Jurisprudence

2.7.1. The medical school identifies and incorporates in the curriculum the contributions of the: behavioural sciences, social sciences, medical ethics, medical jurisprudence that would provide

the knowledge, concepts, methods, skills and attitudes necessary for understanding socio-economic, demographic and cultural determinants of causes, distribution and consequences of health problems as well as knowledge about the national health care system and patients' rights. This would enable analysis of health needs of the community and society, effective communication, clinical decision making and ethical practices.

A medical program should incorporate courses that address the psychological, cognitive, and emotional factors affecting future physicians' behavior, as well as essential skills in physician-patient communication, empathy, and understanding of patient psychology. These courses should also cover topics such as mental health, stress management, and behavior change strategies. In ASMI medical program, courses in behavioral sciences include psychology, philosophy and psychiatry.

The program offers courses in public health and epidemiology that equip students with essential skills in population health management. These courses provide practical experience in assessing community health needs, designing interventions, and evaluating health outcomes.

Future doctors must uphold medical ethical principles such as autonomy, beneficence, non-discrimination based on gender, race, or creed, and justice. Developing competencies in ethical decision-making, confidentiality, informed consent, and professional responsibility in clinical practice is essential. While these skills are incorporated into the clinical subjects in the current program, introducing a spiral integration of these principles from the first to the sixth year would greatly enhance the program's value.

According to the questionnaire analysis, 47.0% of students have a full understanding of the ethical and professional values expected in their profession, while 43.3% have a partial understanding, and 2.8% do not fully grasp these values. Additionally, 45.8% of students feel they possess the communication skills necessary for interacting with patients and healthcare professionals, 30.5% partially agree, and 2.8% (3 individuals) disagree. Furthermore, 44.6% of respondents believe their clinical experience emphasized the importance of understanding and considering diversity and culture in patient care, 32.1% partially agree, and 2.8% (9 individuals) disagree.

2.8 Educational technology, instructional methods and experiences

2.8.1. *The medical school employs a range of educational technologies, instructional methods and experiences to ensure that students achieve the intended outcomes of the curriculum.*

A variety of learning methods used in syllabi to assess learning outcomes. In addition to traditional approaches, there is a strong emphasis on innovative, practice-oriented techniques. The methods listed below are used for teaching and assessment: Case studies' Blitz surveys; Small group work; Communicative techniques; Role-playing activities; Brainstorming sessions; Group discussions; Training in small groups; Bedside teaching; Clinical training involving real patients; Instruction in clinical skills at training and clinical centers (UCC); Training in primary health care settings; Teaching utilizing web technologies.

In self-evaluation report is mentioned that: teaching methods cover various approaches, including the following when conducting lectures: press conferences, problem-oriented, overview, informational, interactive, binary. In the field of modern educational technologies with the application of evidence-based practice for clinical and non-clinical training, such methods as TBL, CBL, RBL, PBL, SBL, GOSKE, analysis of concrete situations, use of standardized patients (SP), mixed hybrid simulation. Interview with teachers showed, that not all of them are familiar with methods listed above.

Besides the methods already mentioned, incorporating artificial intelligence and digital simulation of patient cases would be beneficial. Additionally, evaluation methods, such as Directly Observed Procedural Skills (DOPS) and Case-Based Clinical Reasoning (CBCR), along with other methods, should also be considered.

2.8.2. *The medical school uses instructional/learning methods, including virtual learning methods (digital, distancr, electoronic), that stimulate, prepare and support students to take responsibility for their learning process (2.1.2 WFME).*

In the context of the remote format, lectures are conducted with the involvement of professors and associate professors from partner universities.

ASMI has facilitated the adoption of modern teaching methods such as Moodle, Zoom, and Google Classroom. A wide array of information technology tools is extensively utilized throughout the learning, teaching, and assessment processes. Students develop relevant competencies in using these tools through courses in "Information and Communication Technologies" and "IT in Practical Healthcare."

In response to the question, "How accessible are library resources and collections?", survey results indicate that 47.4% of students are fully satisfied, while 2.8% are not satisfied. Additionally, 50.8% of students report having full access to online educational resources, 29.9% have partial access, and 1.9% do not have access at all.

According to the survey, 45.8% of students feel they possess all the necessary communication skills to interact with patients and healthcare professionals, while 30.5% report having these skills partially, and 2.8% do not. Additionally, 45.2% of students believe they have gained the clinical knowledge and skills required to start a residency program, with 30.5% partially agreeing. Furthermore, 46.7% of students state they have all the essential skills for making clinical decisions and applying evidence-based information in medical practice, 32.1% partially agree, and 3.7% feel they lack these skills.

2.9 Programme Management

2.9.1. The medical school has a curriculum committee, which has the responsibility and authority for planning and implementing the curriculum to secure its intended educational outcomes and in its curriculum committee ensure representation of staff and students.

The educational program is managed through the Central Methodical Commission and Educational Methodological Department, which analyzes experience in the field of medical education, both national and international, as well as making adaptations of educational programs of strategic partners and leading medical schools within the educational process of the institute; planning, organization and coordination of work on the creation and implementation of educational programs, taking into account their compliance with the requirements of the State standards of higher professional, postgraduate and additional education, as well as compliance with the regulations of the Ministry of Education and Science and the Ministry of Health of the Republic of Uzbekistan; planning, regulation, control and improvement of organizational and methodological processes related to the use of innovative educational technologies.

When considering the changes allowed in the program by ASMI, it is necessary to take into account the opinions of the students and their intensive involvement.

2.9.2. The medical school has a structural unit that has authority to plan and implement innovations in the educational programme and ensures in its structural unit representatives of other stakeholders.

The working group, organized by the educational and methodological department of ASMI, constantly monitors the opening of new educational areas. This group includes department heads, deans, employees, employer representatives and members of the primary organization of the Youth Union. The educational and methodological department then sends the relevant educational directions to the Ministry of Health, and their opening is carried out on the basis of the corresponding order of the Ministry of Health.

2.9.3. The medical school has a process and procedure for the programme development and approval (ESG G1.2).

Given that the program is state-approved and the university can only implement 20% of the changes, departments play a crucial role in this process. They endorse these minor modifications at the faculty council level and then submit them to the central methodological commission for acceptance before passing them to the institute council.

2.10 Linkage with medical practice and the health sector

The Coworking Office Center was established within the Career Center, based on the rector's order No. 120-T dated March 25, 2022 in regarding to secure employment for students of higher educational institutions. ASMI has its own clinical base, a university multidisciplinary clinic currently under renovation, and has established 68 partnership agreements with medical organizations..

2.10.1. The medical school ensures operational linkage between the educational programme (curriculum) and the subsequent stages of education or practice after graduation (residency programme, CPD).

The "General Medicine" curriculum equips students with the competencies necessary for entry into internship programs, covering both clinical knowledge and skills as well as essential professional behaviors. Through this program, students gain foundational knowledge across various clinical specialties, enabling them to make informed choices for their future internship. Additionally, students participate in supervised clinical rotations that mirror real-world healthcare settings, providing valuable hands-on experience. Twenty (20) graduates successfully completed the final state certification and received their bachelor's degrees. They all return to their home country. In an online interview with graduates, we found out that the knowledge and clinical experience they received at ASMI are sufficient to continue their education further, in residency or clinical residency. During interviews with employers regarding the clinical training of ASMI graduates, they expressed the shared view that the graduates are well-prepared for the role of a physician within the healthcare system.

***2.10.2. The medical school ensures that the curriculum committee:
-explores the environment in which graduates will be expected to work, and modifies the programme accordingly;
-considers programme modification in response to opinions in the community and society.***

According to the self-evaluation report the institution representatives and the deputy dean of the city of Ferghana region and district medical institutions, held a meeting with students who are practicing and employed, as well as with responsible employees of the main health department. By the decision of the Cabinet of Ministers of the Republic of Uzbekistan "On improving the staffing system of state medical institutions," graduate students will be provided with work in permanent family clinics from November 1, 2022.

ASMI makes considerable efforts to support graduates in securing employment by organizing job fairs, holding meetings with employers, and maintaining a career center that liaises with the healthcare sector and clinics. However, these initiatives have not yet led to noticeable changes in the program. During a recent job fair, the Career Center and Personnel Department of Andijan State Medical Institute presented 175 vacancies, and 50 students expressed interest in employment post-graduation. The institute also participated in the event. Additionally, in collaboration with unitary state enterprises, job vacancies were identified, and the information was shared and posted on social media platforms.

The department regularly gathers feedback from employers about the institute's graduates, conducts surveys, and discusses future skill needs in practice sessions and meetings based on the suggestions received. While the institution collects employer feedback, it's unclear whether the survey results have influenced any updates to the program. Interviews reveal that ASMI maintains strong connections with its employed graduates and is aware of their working environments. However, it remains uncertain whether the program is adjusted in response to the graduates' work settings, societal needs, and community input, or if the institution consistently collects data from various stakeholders.

Program curriculum committee have to monitor trends in healthcare delivery, technology, policy changes, and societal health needs. In addition, it should establish ongoing dialogue with employers of medical graduates (e.g., hospitals, clinics, health systems) to understand their expectations and identify gaps between graduate skills and market needs. Develop partnerships with local health services, government agencies, to understand the evolving healthcare needs in the community and ensure the curriculum aligns with these changes and hold regular meetings with community representatives,

public health officials, and healthcare leaders to gather input on the curriculum's relevance and ensure that program modifications reflect both current and emerging health issues.

Strength:

- 1) ASMI has well-established learning outcomes that fully accomplish the mission of the institution and state standards;
- 2) A key strength of the program lies in its modern, high-standard clinical facilities and the high level of student satisfaction with clinical practice. The institution and program are further distinguished by their student-centered approach and continuous support for both academic and student life;
- 3) The program is designed to progress from basic to advanced concepts, incorporating clinical elements from the very beginning;
- 4) The program capacity to equip students with a strong foundation in biomedical knowledge, essential for effective application in clinical settings;
- 5) Newly constructed clinical training center, soon to be outfitted with advanced mannequins and state-of-the-art equipment;
- 6) Strong connection with alumni, fostering a supportive network that benefits both current students and graduates.

Areas to be improved:

- 1) Enhance the clarity and attainability of the learning outcomes related to medical communication and research skills.
- 2) Develop a clear system for evaluating the achievement of learning outcomes.
- 3) Enrich the curriculum by incorporating behavioral and social sciences within allowable program modifications to offer a more well-rounded education and better prepare students for the complexities of medical practice.
- 4) Strengthen the integration of basic and clinical sciences, research, communication, and professional skills to create a more cohesive program. This can be achieved by establishing seamless connections between biomedical, social, and clinical subjects throughout the six-year program.
- 5) Where relevant, include spiritual disciplines to broaden students' understanding of diverse cultural perspectives on health, healing, and patient care. Additionally, integrating health systems science with humanities and arts would better prepare students for the technical, ethical, and interpersonal aspects of modern medical practice.
- 6) Enhance communication skill development within the program.
- 7) Consider adding a specialized course to improve research skills in biomedical sciences, with a particular focus on clinical investigation. This would better equip students for active participation in scientific research and effective application of research principles. Integrating Problem-Based Learning (PBL) to encourage the application of foundational science knowledge to clinical scenarios would also be highly beneficial.
- 8) Recommend training for relevant faculty in organizing, administering, and evaluating OSCE exams, ensuring they adhere to best practices and improve the quality and consistency of assessment.
- 9) Further strengthen the development of scientific research skills within the program.
- 10) Expand the teaching of medical ethics.
- 11) Integrate virtual digital patient cases, especially in clinical courses, to enhance both teaching and assessment approaches.
- 12) Increase student involvement in updating or modifying the program.
- 13) Establish ongoing feedback channels between the institution, employers, and all stakeholders to refine and continuously improve the program.

EEC conclusions on criteria. Compliant of 38 standards: fully - 33, partially - 5, not compliant - 0.

Recommendations for improvement:

1) Enhance student involvement in scientific research by implementing a foundational course on research skills to ensure that all students acquire essential competencies in research methodologies (2.1.9, 2.6.1).

2) Engage stakeholders in the development of educational programs by including them in the Faculty Council, the Center for Multidisciplinary Studies, and the Institute's Academic Council, under the framework of academic autonomy (2.2.6).

3) Enhance the involvement of relevant stakeholders in the development of the educational program by encouraging participation in the Faculty Council, Central Methodological Commission (CMC), and the Academic Council of the institute. (2.2.8):

Standard 3. ASSESSMENT

3.1.1. The medical school developed and implemented a policy that describes its assessment practices.

The student assessment system and policy at ASMI is developed in accordance with Article 12,13,14, 15 and 16 of the Academic Policy document. Knowledge assessment and student assessment policy are based on the "Regulation on the implementation of a credit-modular training system," approved on June 26, 2023

The primary internal regulatory documents include the charter, which was developed in alignment with the Cabinet of Ministers of the Republic of Uzbekistan's decree from December 31, 2020, aimed at enhancing the management of educational processes in higher education institutions. In accordance with this decree, students' academic performance is evaluated using a point-rating system. The departments within the Faculty of General Medicine design learning outcomes for the educational program to measure the level of competency mastery. These outcomes are reviewed by the methodological council and approved by the institute's academic council. The final evaluation is based on the cumulative results of ongoing, midterm, and final assessments.

3.1.2. The medical school defined, stated and published the policy, principles, methods and practices used for assessment of its students, including the criteria for setting pass marks, grade boundaries and number of allowed retakes and ensures that assessments cover knowledge, skills and attitudes.

The ASMI knowledge assessment system operates on a credit-modular framework, utilizing a point-based grading scale ranging from excellent, very good, good, and satisfactory, to average, unsatisfied, and unsatisfactory. Assessments encompass ongoing, midterm, and final evaluations of student performance. The Testing Center diligently upholds fair and standardized knowledge assessment, strictly following established protocols to ensure the integrity of testing. The Center's procedural responsibilities are distributed across various institutional levels and faculty members according to their specific roles. The test question bank includes diverse formats—single-answer, dual-answer, and multiple-answer questions—designed to account for time allocation during assessments.

The Academic Policy document specifies assessment methods such as written exams, oral examinations, practical tasks, and quantitative evaluations. Additionally, the OSCE (Objective Structured Clinical Examination) is used as a final exam format. During the on-site visit, we verified that the necessary infrastructure for OSCE exams is available in both the old and new buildings and that exams are being administered as scheduled.

3.1.3. The medical school ensures that methods and results of assessments avoid conflicts of interest and that assessments are open to scrutiny by external expertise, uses a system of appeal of assessment results.

ASMI has a state-mandated examination appeals procedure. The procedure of the appellation is outlined in detail in the order issued by the Minister of Health of the Republic of Uzbekistan, which approves the "Regulation on the Introduction of a Credit-Modular Training System in Higher and Secondary Specialized Educational Institutions in Medicine and Pharmaceuticals" (registered by the Ministry of Justice of the Republic of Uzbekistan on September 8, 2020). To initiate an appeal, a student who disputes the results of the final assessment (exam) in a discipline must submit an application in the specified format to the dean's office or department, addressed to the chair of the

appeal commission and signed by the dean or department head. The application should include information about the discipline and the exam stage (testing, written, oral, or practical skills).

For the final control exam, subject-specific appeal subcommittees are established by the dean's directive. Each subcommittee, comprising a minimum of three members, is specialized to the discipline concerned, though a single subcommittee may manage a block of related subjects. The subcommittee includes experts in the relevant field, specialists in assessment methods, and representatives from the dean's office. When necessary, department heads and the authors of test materials may also participate in the appeal process. The outcomes of subcommittee meetings are documented in an appeal protocol, signed by the chairperson and members, with the appeal result recorded in the "considering the appeal" column. In cases of assessment disputes, decisions are reached by majority vote. If a student fails to attend the meeting, a second review is not conducted, and appeals on the same issue are not reconsidered.

During on-site interviews, students reported that they had never submitted appeals and expressed a high level of satisfaction with the exams.

3.1.4. The medical school documents and evaluates the reliability and validity of assessment methods, incorporate new assessment methods where appropriate and encourage the use of external examiners to increase the fairness, quality and transparency of the assessment process.

To ensure the transparency and objectivity of the State Attestation Commission (SAC), examination commission chairpersons are appointed from regional medical institutions. We would like to note that, based on the analysis of exam results, the selection, updating, or replacement of examination methods could not be confirmed during the visit. Therefore, it is recommended to focus efforts in this direction and implement more case-based examination questions instead of relying primarily on multiple-choice questions (MCQs).

It will be necessary to conduct regular evaluations of existing assessment methods to verify their reliability and validity. Find emphasizing areas of strength and improvement, and establish protocols for continuous assessment review.

Rather than using MCQs which can assess only knowledge, in core clinical subjects, students should be evaluated in clinical reasoning skills through written or oral analysis of clinical cases. The gradual integration of new evaluation methods would be beneficial, ensuring they are evidence-based, enhance learning, and reflect real-life clinical scenarios.

3.1.5. The medical school has a centralized system for ensuring that the policy is realized through multiple, coordinated assessments that are aligned with its curriculum outcomes and instructional methods.

The methods for assessing student knowledge, including criteria for passing exams, reliability, and compliance, are comprehensively outlined in an internal regulatory document. In selecting assessment methods, attention is given to the balance between formative and summative assessments, the number of exams, and measures to ensure exam integrity, as well as the mix of written and oral exams. Specialized exams are employed, such as the OSCE for key clinical disciplines and the OSPE for foundational courses.

Assessment methods cover evaluations by course, discipline, and class topic. For example, in foundational clinical subjects, a single cumulative assessment gauges overall knowledge, whereas modular subjects are assessed by module, with scores combined into a final grade. In advanced core subjects, students are evaluated on knowledge, practical skills, and communication abilities, resulting in a comprehensive assessment. The institute's academic policy defines these assessment methods, which are approved by the department and coordinated with the dean's office.

The academic policy sets conditions to gauge the effectiveness of assessment methods by establishing standards for both ongoing and final evaluations, class analyses, and involving independent examiners for practical skills assessment. In the "General Medicine" program, required competencies define the essential knowledge and skills students must display in class and during certification. This structured approach ensures students meet the program's learning outcomes and align with professional standards.

3.1.6. The medical school ensures that its assessment policy is shared with all stakeholders

ASMI has a clearly formulated evaluation policy, with assessment information posted on its website and included in the syllabi. However, the assessment approach remains identical across all syllabi.

Although assessment methods are outlined in the syllabus, specific criteria are not detailed. Therefore, it is recommended to diversify assessment methods and clearly define the criteria for evaluation.

On site interviews with staff involved in the program indicate that educators may lack familiarity with the assessment methods, highlighting the need for regular information sessions or webinars. These sessions would help students, faculty, and other stakeholders understand the assessment policies, address questions, and communicate any updates or changes. Additionally, establish a feedback system for stakeholders to share their input on the evaluation policy would support continuous improvement and enhance transparency.

Of the students surveyed, 48.8% are fully confident that their knowledge and skills are assessed fairly and accurately, 32.9% are somewhat confident, while 3.4% believe otherwise. In response to the question, “Are exams and assessment methods fair?” 47.4% of students consider them entirely fair, 28.97% view them as partially fair, and 3.1% consider them unfair.

3.2. Assessment in support of learning (formative assessment)

3.2.1. The medical school has in place a system of assessment that regularly offers students actionable feedback that identifies their strengths and weaknesses, and helps them to consolidate their learning.

ASMI has established formative (current) and summative (intermediate/final) assessments, which allow for effectively managing the learning process and evaluating students' academic progress. Each discipline ends with an exam, and a grade is given. The student must pass the exam with a score of at least 55 points.

During formative assessments, the teacher has the opportunity to identify gaps in the student's knowledge and skills and provide feedback to the student. It will be good to design and standardize feedback forms or templates that provide specific, constructive insights on student performance in key areas. To ensure timely feedback, the institution should develop a schedule that allows for prompt feedback delivery after assessments, enabling students to address gaps in knowledge before subsequent evaluations.

If ASMI will utilize Digital Platforms for Implementing digital tools within the school's learning management system (LMS) for providing written and video feedback, which students can revisit as needed. By establishing these practices, the medical school can ensure that students receive meaningful, actionable feedback that supports their continuous learning and skill development.

3.2.2. The medical school adjusts the number and nature of examinations of curricular elements to encourage both acquisition of the knowledge base and integrated learning, and provide an appropriate balance of formative and summative assessment to guide both learning and decisions about academic progress.

ASMI uses the OSCE exam to assess clinical skills, but there is less formative assessment such as case-based assessments that assess clinical skills and knowledge application, but we think it should be Improved Integration of Clinical and Theoretical Assessments by designing exams that blend clinical reasoning, problem-solving, and foundational knowledge. For example, incorporating case-based questions in exams can encourage students to analyze clinical scenarios and draw upon knowledge from multiple disciplines.

3.3. Assessment in support of decision-making

3.3.1. The medical school has in place a system of assessment that informs decisions on progression and graduation.

3.3.2. The medical school has in place a system of assessment that informs decisions on progression and graduation.

ASMI has an electronic management system „Hemis“, where all information for the student is uploaded. Students can access their assessment results via their personal account in the Hemis program, which includes their data, individual curriculum, and academic achievement history. With their unique login credentials, they can view the curriculum, class and session schedules, and academic calendar to monitor their current academic progress. The Hermis allows faculty to manage and track student progress, assessment results, and performance trends. This data supports faculty in making informed decisions on student progression.

3.3.3. *The medical school has assessments that are well-designed, producing reliable and valid scores.*

ASMI establishes standardized assessment conditions, ensuring consistent instructions, uniform timing, and controlled testing environments across all assessments to minimize variability and enhance score reliability. However, regular reviews and updates of assessments are necessary to keep them aligned with the evolving medical curriculum.

Applying psychometric analyses, such as item analysis, is also recommended to assess the reliability and validity of assessment scores. Statistical measures should be used to identify and address any biases or inconsistencies.

3.4. *Quality control*

3.4.1. *The medical school has mechanisms in place to assure the quality of its assessment methods.*

ASMI employs mechanisms to maintain the quality of assessment procedures and methods. Central to this approach are the careful planning and execution of the educational process, including curriculum content, program structure, allocation of study hours, and the selection of teaching methods and technologies. Furthermore, the institute evaluates the effectiveness of these measures by considering students' acquired knowledge, competencies, and skills, ensuring transparency and objectivity in assessing student performance at ASMI.

3.4.2. *The medical school ensures that assessment data are used to improve the performance of academic staff, courses, and the institution.*

As it is written in the self-evaluation report Annual internal audits evaluate the planning, organization, and monitoring processes for compliance with the requirements of the Educational Program. The Committee for Educational Programs regularly reviews the overall monitoring and evaluation results, including the student evaluation results, and based on it, develops measures for their improvement.

3.4.3. *The medical school reviews its individual assessments regularly, as well as the whole assessment system and use data from the assessments, as well as feedback from stakeholders, for continuous quality improvement of the assessment methods, the assessment system, the course and the curriculum.*

The self-evaluation report indicates that site interviews revealed the institution's ongoing efforts to improve the quality of evaluation methods, assessment systems, training courses, and the educational program, with regular analysis and monitoring conducted in alignment with the program's mission and goals. Collecting feedback from students, stakeholders, and employers is a key part of this enhancement process. Teachers mentioned in interviews that the educational and methodological department holds seminars every three months to provide advanced training for teachers, students, and residents on new methods and tools.

Strength:

- 1) The institution has a well-defined evaluation policy.
- 2) The institution has an electronic student progress and achievement monitoring system, which enables monitoring of student achievement.
- 3) A strong commitment to continuous quality enhancement is shown through the regular training of teachers in assessment methods and systems.

Areas to be improved:

1) Broaden the assessment system with a greater focus on evaluating clinical reasoning rather than solely knowledge. Continuously monitor and collect feedback on the system's effectiveness, using these insights to refine and improve assessment methods as necessary.

2) Create Digital Platforms for Implementing digital tools within the school's learning management system (LMS) for providing written and video feedback, which students can revisit as needed.

3) Better integration of Clinical and Theoretical Assessments

4) Continuously review and update assessments to keep them aligned with the evolving medical curriculum.

5) Apply statistical methods to detect and address any biases or inconsistencies.

EEC conclusions on criteria. Compliant of 14 standards: fully -11 (9 – basic, 2 – for improvement), partially – 3 (3- basic), not compliant - 0.

Recommendations for improvement:

1) Specify and validate assessment methods to maintain educational quality (Standard 3, subparagraph 3.1.4).

2) Enhance stakeholder awareness of the assessment system in line with the "Academic Policy" and improve feedback through syllabi. (Standard 3, subparagraph 3.1.6)

3) Refine the examination system and assessment tools. (Standard 3, subparagraph 3.3.3)

Standard 4. STUDENTS

4.1 Selection and admission policy

ASMI admits applicants in line with Cabinet of Ministers Resolution No. 393 dated June 20, 2017, titled "On the approval of regulations regarding the procedures for admission to higher educational institutions, student transfers, reinstatements, and expulsions," which was developed based on the Law "On Education". ASMI's admission policies and procedures outlined in the Admission Rules as well as the institute's admission quotas for both budget and contract-based placements. are accessible to applicants, employers, and faculty on the university's official website, <https://adti.uz/bakalavr/>, and are also featured in informational materials such as applicant booklets and displays.

The Institute regulates student enrollment numbers according to its Statutes and Policies. The primary guidelines for the number of students admitted are set by the President of the Republic of Uzbekistan's Decree No. 60, dated June 15, 2022, "On the parameters of the state order for admission to state higher educational institutions for the 2022/2023 academic year," and the State order from the Ministry of Health of the Republic of Uzbekistan for training medical personnel. These regulations consider factors such as the capacity for educational, clinical, and practical training, the maximum allowable teaching load, availability of educational and scientific resources, classroom and clinical site capacities, and the Institute's material and technical facilities. An additional 2% of state grant quotas for individuals with disabilities are allocated by ministries and departments, based on the total number of applicants to higher educational institutions.

To apply for university admission, candidates complete online registration in July, where they can select up to five educational institutions. In August, applicants take exams in biology, chemistry, native language, and literature at the state testing center. Based on their test results, they are admitted as students, after which groups are formed. Instruction is provided in Uzbek, Russian, and English, based on students' preferences.

The International Cooperation Department of ASMI plays an active role in admitting students from abroad. The procedures for enrolling foreign students are outlined in the President of the Republic of Uzbekistan's Decree No. 279, dated June 15, 2022, titled "On the organization of admission to state higher educational institutions." (<https://lex.uz/docs/6070837>.)

Each year, by July 20, the State Commission approves the allocation of state grant places for women with letters of recommendation in higher education and undergraduate programs. This approval is based on recommendations from the State Committee for Family and Women's Affairs and

the Ministry of Higher and Secondary Specialized Education, and it will be announced on the official website of the Ministry of Higher Education and Secondary Specialized Education.

As of the 2023-2024 academic year, 751 students are enrolled in the "General Medicine" program in English at the foreign faculty of ASMI. The list of first-year students is still being finalized, and their academic year is scheduled to start in early October.

Number of students enrolled in 2023-24 academic year Students studying in the International Faculty by country

Grade	Academic year	Number of students	#	Country	Number of students
2	2023-2024	253	1	India	516
3	2022-2023	218	2	Pakistan	214
4	2021-2022	136	3	South Korea	19
5	2020-2021	82	4	Nepal	1
6	2019-2020	62	5	New Zealand	1
Total		751		Total	751

4.2 Student counseling and support

The Ministry of Higher Education, Science, and Innovation of the Republic of Uzbekistan, along with the Ministry of Finance, provides stipends to students on a contract basis at higher educational institutions. These stipends are equal to the basic amount of 517 thousand soums. Additionally, students who excel academically receive an extra 15% on top of the basic stipend. Talented and capable students who require social protection, whether studying on a contract or state grant basis, are eligible for up to 50% additional support from the fund in relation to their established scholarships. Needy students, including orphans, those without parental care, students whose parents have first or second group disabilities, and those from large or low-income families, are entitled to free dormitory accommodation and tuition discounts. The Social Affairs Commission, led by the Vice-Rector for Spirituality and Youth Work, reviews these cases monthly. ASMI offers special support for orphans, students without parental care, those whose parents have first or second group disabilities, and students from large or low-income families. This support includes free accommodation in the dormitory and tuition fee discounts, among other benefits.

Academic counseling for students at ASMI is provided by the dean, deputy dean, and tutors. Currently, there are 5 tutors assigned for every 120-150 students, and their work is carried out in accordance with the Order of the Ministry of Higher and Secondary Specialized Education of the Republic of Uzbekistan No. 412, issued on September 30, 2021. Students from all academic years have access to consultations and additional assistance in the departments through extra classes.

To further support students, the institute offers a local network through the Moodle distance learning system, which includes comprehensive subject information, work programs, curricula, video lectures, and a calendar-thematic plan, as well as an electronic library. On the institute's official website, the "Student" tab provides various useful resources, such as the training schedule, online surveys, department information, class schedules, and final control requirements. More information can be found at <https://adti.uz/ru/talabalar/>. Additionally, students can submit complaints and suggestions directly to the rector via this link: <https://rektor.adti.uz/>.

The rector's office at ASMI has established a department for managing appeals from individuals and legal entities, overseeing control and monitoring processes in accordance with Order No. 317 ZRU-445 from March 11, 2017, titled "On Appeals from Individuals and Legal Entities." This department operates based on the Charter "On the Procedure for Handling Appeals from Individuals and Legal Entities at ASMI," dated 2024. Reports on the outcomes of the department's activities and the measures taken are presented at all advisory commissions and meetings.

Information about student support and counseling programs is communicated to students through the institute's official website and social media platforms such as Facebook, Instagram, Vkontakte, Telegram, Twitter, and LinkedIn. All individuals and departments involved in providing student consultations, support, and career guidance ensure the confidentiality of shared information, uphold privacy rights, and protect personal data in compliance with applicable laws.

ASMI also has Vice-rector for Spirituality and Youth affairs, who leads the institute's "Union of Youth." This organization includes a department dedicated to working with gifted students, offering support for participation in congresses, international projects, sports competitions, cultural events, and more. More details can be found at https://t.me/mediAsmi_uz. ASMI prioritizes fostering a positive environment, enhancing education, encouraging student involvement, and developing student potential, supported by its "Spiritual and Educational Department for Work with Youth" (<https://adti.uz/manaviyat-va-marifat-ishlari/>).

ASMI has a psychological support service in place, where psychologists conduct an annual survey at the beginning of each academic year. The survey results are analyzed and discussed at the Academic Council of the Institute, leading to the development of a yearly roadmap for the psychologists. The Institute consistently offers organizational, technical, and financial support to students who are actively involved in various aspects of student life, such as volunteering, projects, external relations, social activities, culture, and sports. Additionally, students with strong academic performance receive recognition, as confirmed by both current students and graduates in interviews.

Graduates also receive academic support when assigned to their work placements. Employer meetings are organized through "round table" discussions and a "Vacancy" fair, where graduates can address any questions regarding professional and career development.

48.3% of respondents believe that academic consultations are fully accessible, 27.2% find them partially accessible, and 5.3% consider them inaccessible. In response to the question, "How adequate are career guidance consultations?" 46.7% of students rated them as fully adequate, while 4.9% found them inadequate.

The questionnaire analysis revealed that 45.8% of students view access to mentors as fully adequate, 28.9% partially agree, and 3.1% disagree. Regarding the quality of financial aid services, 42.7% of students are fully satisfied, 28.0% are partially satisfied, and 7.5% are dissatisfied.

EEC conclusions on criteria. Compliant of 16 standards: fully - 16, partially - 0, not compliant - 0.

Recommendations for improvement: The standard has been fully implemented with no recommendations.

Standard 5. ACADEMIC STAFF

5.1 Academic staff establishment policy

Competitive selection is conducted according to the Cabinet of Ministers Regulation No. 20 dated February 10, 2006, "On the approval of regulations for hiring teaching staff in higher educational institutions on a competitive basis" <https://lex.uz/docs/973534>, with teachers being selected for a five-year term each year by the Academic Council.

5.1.1. The medical school has the number and range of qualified academic staff required to put the school's curriculum into practice, given the number of students and style of teaching and learning.

In the 2023-2024 academic year, the total number of teaching staff at ASMI was 1,008, of which 885 were full-time teachers, 123 were part-time teachers. Doctors of Sciences - 56; candidates of sciences - 139. PhD doctors - 90, Masters – 30. Mean age - 45.4 year. The abovementioned number of teachers is quite sufficient for quality management of the program.

5.1.2. The medical school determining academic staff establishment policy involves considering:

-the number, level, and qualifications of academic staff required to deliver the planned curriculum to the intended number of students,

- the distribution of academic staff by grade and experience, academic and/or scientific degree, service and teaching experience;*
- 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;*
- address criteria for scientific, educational and clinical merit, including the balance between teaching, research and service functions.*

The policy of selecting the number and composition of scientific and pedagogical personnel contains qualification requirements for the composition of teaching staff for the adequate provision of training programs.

Teacher selection at ASMI follows the current regulation of the Cabinet of Ministers No. 20, dated February 10, 2006, titled "On the Procedure for Hiring Teachers in Higher Educational Institutions on a Competitive Basis." Annually, the Academic Council conducts the selection process, appointing teachers for a five-year term.

The balance between full-time and part-time academic staff is excellent, with 885 full-time teachers and 123 part-time teachers. This 7-to-1 ratio of full-time to part-time staff contributes significantly to the institution's stability.

5.1.3. The medical school in its policy for staff recruitment and selection take into account criteria such as relationship to its mission, including significant local issues and economic considerations.

Formation of faculty composition, administrative and management personnel and employees at the institute is carried out according to the fourth paragraph of academic policy - Human Resources Policy Of Forming High-Quality Faculty. When forming teaching staff, the advantages of applicants are taken into account, measured by the level of qualifications, professional experience, the results of research activities, teaching experience, recognition by colleagues, etc. Priority is given to persons with skills in scientific, pedagogical, scientific, clinical activities and recognizing the mission of the institute.

A survey of teachers revealed that 89.3% are fully satisfied with the organization of work and their workplace, while 10.7% are partially satisfied. Additionally, 84.4% of teachers feel they can fully realize their professional potential within this educational institution, with 11.0% somewhat agreeing and 3.1% somewhat disagreeing. Furthermore, 78.6% of teachers have the opportunity to conduct scientific research and publish their findings. Regarding salaries, 57.1% are fully satisfied, while 25% are dissatisfied.

5.2. Academic staff performance and conduct

The system for tracking the teaching load of students and instructors is established and maintained in compliance with Protocol No. 4 issued by the Ministry of Health of the Republic of Uzbekistan on August 31., 2021.

https://drive.google.com/open?id=1DTCNCr93R14ShaceRK0y1f6f14vMpgDc&usp=drive_fs

5.2.1. The medical school has specified and communicated its expectations for the performance and conduct of academic staff.

The institute's personnel policy reflects the connection between academic activities and the professional conduct of its teaching staff, students, and employees. Developed by working groups consisting of faculty, students, and other stakeholders, these documents align with the institute's mission and goals. They establish a framework of norms and guidelines to ensure personnel capabilities support the institute's mission and objectives. Additionally, they outline procedures for human resource evaluation, professional and career development, personnel rotation, and social protection for staff.

5.2.2. The medical school has developed a clear statement describing the responsibilities of academic staff for teaching, research, and service.

ASMI has well-defined guidelines covering teaching responsibilities, research duties, and professional conduct, which are clearly communicated to all academic staff. A transparent

performance evaluation system is in place, incorporating these expectations and including peer reviews and student feedback. ASMI also offers resources to support staff in meeting these standards, such as teaching workshops and ongoing professional training sessions.

5.2.3. *The medical school has developed a code of academic conduct in relation to these responsibilities for teaching, research, and service.*

ASMI has developed a code of obligations and conduct for teachers, which they strictly adhere to, as confirmed during the site visit and interviews with the teachers. Without any additional compensation, the teachers make up missed hours for students who are behind.

5.2.4. *The medical school formulates and implements a staff activity and development policy which*

- *ensure recognition of meritorious academic activities, with appropriate emphasis on teaching, research and service qualifications;*
- *ensure that clinical service functions and research are used in teaching and learning;*
- *ensure sufficient knowledge by individual staff members of the total curriculum, on teaching / learning methods, assessment of knowledge and skills, and the content of other related disciplines which fosters cooperation and integration;*
- *include teacher training, development, support and appraisal of faculty members including newly recruited ones, attracted from clinics.*

ASMI has a system in place to promote the professional and personal growth of teachers and staff, offering both moral and material incentives. Moral incentives include expressions of gratitude, awarding certificates, and nominations for state and departmental awards. Material incentives consist of a bonus system recognizing personal contributions and achievements in work performance. To support and motivate teachers and staff, the institute uses a variety of incentive measures.

ASMI also has a comprehensive system for the professional development of teachers, regulated at the state level, which mandates professional training in teaching and learning methods. Research opportunities are likewise encouraged and financially supported. This approach was highlighted in interviews with the teaching staff.

5.2.5. *The medical school takes into account teacher-student ratios relevant to the various curricular components and should design and implement a staff promotion policy.*

The assignment of teaching staff to each discipline is based on the required credit hours for course development and the student-to-teacher ratio, currently averaging 9.6 students per teacher. The institute maintains an active personnel reserve, updated annually based on performance ratings for each faculty member. Professors and young teachers with the highest scores are added to this reserve. The average age of the institute's management staff is 45.4 years.

5.3 *Continuing professional development for academic staff*

5.3.1. *The medical school implements a stated policy on the continuing professional development of its academic staff.*

ASMI enhances faculty skills through advanced training programs, including short-term seminars, courses, internships, and training at the Head Scientific and Methodological Center, as well as prominent institutes, including medical organizations. English proficiency courses are offered to faculty to strengthen language skills, and the institute also provides opportunities for faculty training at foreign universities.

5.3.2. *The medical school develops and publicises a clear description of how the school supports and manages the academic and professional development of each member of staff.*

ASMI creates annual development plans, including individualized or department-level plans co-designed by faculty members and their supervisors to align with each person's goals. However, young faculty should receive training in modern teaching and assessment methods to enhance program effectiveness and improve student learning outcomes. Establishing an online portal or dedicated intranet section where faculty can easily access resources, apply for development opportunities, track their progress, and view recent updates would be beneficial.

The institution offers opportunities for career advancement and competency development for teachers—71.4% of surveyed teachers completely agree, 25% partially agree, and 3.6% disagree. Regarding professional qualification programs, 39.3% participated in such programs within the current year, 53.6% more than three years ago, and 7.1% over five years ago. The institution also implements social support programs for teachers; 57.1% confirmed the existence of these programs, 25% were unaware, and 17.9% were uncertain.

Strength:

- 1) Transparent policy of selection of teachers.
- 2) Promotion of professional development of teachers.
- 3) A well-formed professional development plan for teachers.

Areas to be improved:

- 1) Creating an online portal for easy access to resources by faculty members

EEC conclusions on criteria. Compliant of 10 standards: fully -9 (8 - basic, 1 – for improvement), partially – 1 (basic), not compliant - 0.

Recommendations for improvement:

- 1) Provide training for teaching staff in innovative assessment and teaching methods. (Standard 5, subparagraph 5.3.2)

Standard 6. EDUCATIONAL RESOURCES

6.1. Physical Facilities for teaching and learning

6.1.1. *The medical school has sufficient physical facilities to ensure that the curriculum is delivered adequately.*

The material and technical base for implementing the educational program consists of rooms, equipment, information, and communication tools, including a library, office equipment, and methodological resources. There are 4 educational buildings with a total area of 31836.81 sq.m. ASMI has 1 indoor sports hall and 1 football arena, as well as 4 dormitories with 1554 seats.

The institute leverages its resources to conduct laboratory work off-campus at partner production enterprises, organizations, and educational experimental facilities. In 2023, a Central Scientific Research Laboratory building, costing 12.8 billion sums, was constructed on the campus, and the building phase is now complete, with communication systems currently being installed.

The institute's infrastructure is well-equipped to support educational and laboratory needs, including internet access, video surveillance, a 750 kW solar power system, water supply, and sewage systems. All equipment is housed in designated training and laboratory rooms, which meet regulatory standards and are operated in compliance with environmental protection and technical safety guidelines.

The institute houses four libraries spanning a total area of 1,092 square meters. A Simulation Center is located in the main educational building, featuring training rooms equipped with mannequins, robotic devices, and phantoms for hands-on learning.

Among the students surveyed, 49.5% are fully satisfied with the quality of library support and services, while 50.8% report having full access to online educational resources. Additionally, 47.4% of students find it easy to access library resources and collections, and 45.8% noted receiving full support for participating in research activities.

6.1.2. *The medical school ensures that a learning environment, which is safe for staff, students, patients and their relatives, and provides necessary information and protection against harmful substances, microorganisms, and compliance with safety regulations in the laboratory and while using equipment.*

ASMI has implemented comprehensive occupational safety services and protocols. All new employees undergo an orientation conducted by the health and safety department, with records maintained in a logbook.

All educational and laboratory facilities at the institute are equipped with fire alarms and fire extinguishers. Emergency evacuation plans, along with alert systems for employees and students, are installed on every floor of the academic buildings and student dormitories.

6.1.3. The medical school improves the learning environment by regularly updating and modifying or extending the physical facilities to match developments in educational practices.

ASMI regularly updates and strengthens its material and technical resources. According to the self-evaluation report, a distance lithotripsy room has been set up for practicing endourology skills, along with a meeting room and a lecture hall equipped with essential equipment. Training rooms feature educational displays, computers, and video projectors, with instructions available for working with mannequins and simulators. Guidelines, class plans, and schedules have been developed to support the mastery of practical skills, and a dedicated room has been organized for surgical procedures. The educational process incorporates mannequins, simulators for specific skills, and advanced simulators with computer programs for practicing clinical reasoning. Additionally, 3D software is available for anatomical visualization, enhancing the teaching of both anatomy and clinical anatomy. Looking ahead, the institute plans to equip a new building with modern mannequins and simulators for a new clinical skills center.

6.2 Clinical training resources

6.2.1. The medical school has appropriate and sufficient resources to ensure that students receive the required clinical training.

Clinical practice resources of ASMI encompass both clinical base facilities and the Clinical Training Center. The Training and Clinical Center operates at several sites: Clinic at ASMI, the Regional Hospital, the Multidisciplinary City Hospital, the Psychoneurological Hospital, and the Children's Hospital in Andijan. These facilities include 64 departments with a total of 564 rooms dedicated to educational activities, equipped with 54 devices, including 25 mannequin and 12 phantoms. The center provides skills training in a wide range of disciplines, including anesthesiology and resuscitation, surgery, obstetrics and gynecology, ophthalmology, otorhinolaryngology, therapy, pediatric neonatology, anatomy, and topographic anatomy. Abovementioned facilities have the patient volume and case diversity necessary to expose students to a broad range of medical conditions and treatments.

Cooperation agreements with clinical bases are established based on the institute's requirements for patient profiles, the quality of medical care offered, and the availability of classrooms and laboratory facilities. When finalizing contracts, particular emphasis is placed on ensuring that the medical organizations hold accreditation certificates, confirming that the clinical base adheres to healthcare accreditation standards in the Republic of Uzbekistan.

6.2.2. The medical school ensures that the necessary resources for giving the students adequate clinical experience, including sufficient number and categories of patients, clinical training facilities and supervision of their clinical practice.

6.2.3 The medical school evaluates, adapts and improves the facilities for clinical training to meet the needs of the population it serves.

ASMI conducts an annual assessment to enhance clinical training resources in line with the healthcare needs of the population. To support this, the institute continually upgrades its clinical training infrastructure by adding educational materials, visual aids, phantoms, and mannequins. To promote community health, faculty members lead monthly comprehensive medical examinations in various regions, with both teachers and students actively participating.

Clinical training facilities are staffed with experienced healthcare professionals who provide appropriate mentorship and supervision. ASMI's Clinical Skills Training Center is equipped with clinical spaces that allow students to practice essential skills safely and effectively before working directly with patients. Simulation tools, such as mannequins, create controlled environments for learning procedures and managing complex clinical scenarios.

Additionally, ASMI has new clinical facilities close to the newly constructed academic building. The new campus includes well-equipped OSCE examination areas that can also be used for training.

The institute's administration shared that the latest mannequins have been ordered specifically for these areas.

Students have unrestricted access to patients at clinical sites and many opportunities to enhance their practical skills—91.8% of teachers fully agree, 5.6% partially agree, and 1.7% were unsure.

6.3 Medical Research and Scholarship

6.3.1. *The medical school uses medical research and scholarship as a basis for the educational curriculum.*

6.3.2. *The medical school has formulated and implemented a policy that fosters the relationship between medical research and education.*

6.3.3. *The medical school ensures that interaction between medical research and education influences current teaching, encourages and prepares students to engage in medical research and development.*

6.3.4. *The medical school describes the research facilities and priorities at the school.*

ASMI has organized 84 international conferences and 15 national scientific and scientific-methodological conferences and seminars. Additionally, faculty members, healthcare systems (including hospitals, clinics, and medical centers), and medical universities in the Republic have participated in 650 international symposia and conferences, as well as 125 seminars. Despite these efforts, strengthening research in the medical field is essential, with a focus on increasing student involvement. Incorporating research findings into the educational process where possible would also be advantageous.

According to the self-evaluation report, over the past three years, institute professors and faculty have developed six scientific and practical projects that successfully obtained grants—three national and three international. In 2023 alone, three international grants were implemented. These six grants involved collaboration with faculty from 52 institutions.

To conduct cutting-edge research, it is necessary to enhance the research infrastructure, specifically by equipping laboratories with modern technology and boosting motivation among students and faculty to engage in research activities. Currently, the curriculum lacks modules on research methodology, critical analysis, and evidence-based practice, which are crucial for preparing students with foundational skills in medical research.

6.4 Information resources

6.4.1. *The medical school has formulated and implemented a policy which addresses effective and ethical use and evaluation of appropriate information and communication technology.*

6.4.2. *The medical school provides adequate access to electronic and hardcopy information resources to support the school's mission and curriculum.*

6.4.3. *The medical school considers the school's provision of access to information resources for students and academic staff, including online and physical library resources as well as evaluates these facilities in relation to the school's mission and curriculum in learning, teaching, and research.*

6.4.4. *The medical school provides faculty and students to use existing and exploit appropriate new information and communication technology for:*

- *independent learning;***
- *accessing information;***
- *managing patients;***
- *working in health care delivery systems;***
- *optimise student access to relevant patient data and health care information systems.***

The self-evaluation report indicates that the building is connected to the Internet via a 1000 Mbps fiber optic cable, allowing students, teachers, and staff to access the Internet actively. Students can utilize the Internet in the computer room of the digital educational technology center during their free time. The corporate Wi-Fi network provides complete coverage across educational and administrative areas as well as student dormitories.

For all institute students, the MOODLE distance education system and HEMIS higher education management information system are available. Teachers and students also have access to bibliographic databases such as MEDLINE, EBSCO, WEB OF SCIENCE, and SCOPUS, along with electronic resources, reference materials, and e-journals. The institute supports the integration of library resources and information and communication technologies in the educational process.

ASMI's library is well-equipped with modern textbooks and features an automated book registration and checkout machine. During the site visit, the library was filled with students. ASMI allocates sufficient financial resources for the library's development and the enhancement of information resources, as well as educational and information technologies. The institute has acquired the automated library information system Unilibrary.uz, which includes modules for "Registration," "Cataloging," "Acquisition," and "Book Lending."

6.5 Educational Expertise

6.5.1. *The medical school has access to educational expertise where required.*

6.5.2. *The medical school has formulated and implemented a policy on the use of educational expertise in curriculum development and development of teaching and assessment methods.*

6.5.3. *The medical school has paid attention to current expertise in educational evaluation and in research in the discipline of medical education.*

6.5.4. *The medical school allows staff to pursue educational research interest.*

ASMI has established an expert group to assess the quality of the educational program (OP). At the start of each academic year, internal experts review the quality of the "General Medicine" program. Additionally, the department of quality control conducts an internal analysis of the educational process and all regulatory documents associated with it. An external review of the Medical curriculum is also conducted.

In 2021, the institute underwent an external assessment by the State Inspectorate for Supervision of Education Quality, in accordance with Resolution No. 515 of 18.07.2017, "On Organizing the Activities of the State Inspectorate for Supervision of Education Quality" under the Cabinet of Ministers of the Republic of Uzbekistan.

Research in medical education at ASMI is currently underdeveloped. Organizing regular workshops and training sessions on the latest trends in educational evaluation and research methodologies would be beneficial. Inviting experts in the field to train faculty and provide updates on best practices and innovations would also be valuable.

ASMI should establish Research Seminars and Conferences, including regular seminars where faculty can present their research ideas or findings in medical education. Additionally, encouraging participation in national and international conferences focused on medical education would be advantageous. To strengthen research in medical education, ASMI could reward faculty involved in educational research with promotions, awards, or grants. Research on the effectiveness of teaching methods in medical education is especially lacking and needs significant reinforcement.

Survey results show that 321 teachers, representing 85% of respondents, are fully satisfied with the organization of the educational process at this institution. Additionally, 10.8% were partially satisfied, while 1.3% were either dissatisfied or uncertain in their response.

6.6 Educational Exchanges

6.6.1. *The medical school has formulated and implemented a policy for*

- *national and international collaboration with other educational institutions, including academic and administrative staff, researchers, student mobility;*
- *transfer of educational credits, which can be taken into account when transferring a student from other HEI and which can be facilitated by the agreements on the mutual recognition of programme elements, active coordination of programs between medical schools, the use of a transparent system of credit units and flexible course requirements.*

6.6.2. *The medical school has facilitated regional and international exchange of staff (academic, administrative, researchers) and students by providing appropriate resources.*

6.6.3. The medical school ensures that exchange is purposefully organised, taking into account the needs of staff (academic, administrative, researchers) and students, and respecting ethical principles.

ASMI has proactively established and effectively implemented cooperation policies on both national and international fronts. These policies involve partnerships with various departments within institutes and encompass the mobility of students, researchers, and academic and administrative staff. The Department of International Cooperation at ASMI is actively enhancing international relationships and has signed over 65 memoranda with universities across countries, including Italy, Portugal, Russia, Slovakia, Ukraine, Germany, South Korea, Kyrgyzstan, Kazakhstan, Belarus, Iran, India, Poland, Turkey, and China. Some of these institutions are ranked among the top 1000 universities in the world.

According to the self-evaluation report in 2022, a total of 25 specialists participated in internships at foreign institutes, while in 2023, 24 individuals successfully completed training in four areas in Russia. Additionally, faculty and professors have undertaken training and internships in countries such as Canada and Germany. In total, 58 specialists received training in 2023. The memoranda facilitate the exchange of experiences, the development of new scientific projects, and the implementation of student exchange and academic mobility programs for both students and faculty. Furthermore, the signed agreements support the establishment of joint educational programs.

Since the 2020 academic year, the institute has established 60 international agreements with medical universities and organizations in countries including Belarus, Kazakhstan, Kyrgyzstan, Uzbekistan, Tajikistan, Russia, Germany, India, Italy, Slovakia, Malaysia, South Korea, China, Ukraine, the USA, and Turkey, focusing on medical education and science, as well as academic and cultural exchanges for faculty and students.

For domestic travel, the institute covers travel expenses, while international travel costs are funded based on a decision from the Rector or competition commission, covering 30% to 100% of airfare or train ticket costs. Accommodation and meal arrangements are coordinated in advance with the partner institution, typically under mutually beneficial terms.

The training contract specifies the educational components the student must complete at the host university and details how these components will be integrated into the home institution's curriculum. The credits earned at the host university correspond to the length of study abroad, ranging from 3-6 months to 1-3 years, and are recognized by the home university.

Upon returning, the decision to advance the student to the next course or continue in the current course is based on the credits earned during the mobility period, in accordance with established procedures. The home university ensures the student enrolls in the educational components of the academic mobility program, supporting their growth throughout the mobility experience.

Strength:

- 1) ASMI offers excellent facilities and simulators for developing clinical skills, supported by strong clinical training bases and a newly established Clinical Training Center.
- 2) ASMI provides comprehensive information resources.
- 3) Actively strengthens both national and international partnerships with educational institutions, promoting regional and global faculty and student exchanges.

Areas to be improved:

- 1) To enhance the foundation for scientific research.

EEC conclusions on criteria. Compliant of 21 standards: fully -19 (17 – basic, 2 – fio improvement), partially – 2 (2 – basic), not compliant - 0.

Recommendations for improvement:

- 1) Regularly update teaching materials and curricula to reflect recent advances and findings in medical research, ensuring that students are exposed to the latest developments in the field. Improve laboratory facilities and grant students access to essential research tools, databases, and equipment to support their research activities (Standard 6, subparagraph 6.1.3)

2) Increase the integration of scientific research results into educational activities by embedding research methodology, critical analysis, and evidence-based practice within the curriculum. (Standard 6, subparagraph 6.3.2)

3) Strengthen research in medical education and train staff on current trends in educational evaluation and research methodologies to improve teaching effectiveness (Standard 6, subparagraph 6.5.3)

Standard 7. QUALITY ASSURANCE PROGRAMM

7.1 The Quality Assurance system

The quality assurance of the Bachelor's program in "General Medicine" (in English) is regulated by several key documents:

- Order No. 172 from the Ministry of Higher and Secondary Specialized Education, "On improving the quality of education and supervision" (2023);
- The Charter of the Department of Education Quality Control at ASMI, dated April 10, 2024;
- The "ASMI Internal Quality Assurance Program" issued on September 19, 2023.

ASMI's quality assurance is overseen by a dedicated quality department. This department collects reports from all structural divisions, conducts surveys with faculty, employers, and students, and operates in accordance with its work plan. It reports directly to the Vice-Rector for Academic Affairs and the First Vice-Rector for Youth Affairs, with all activities presented to the Academic Council. The department's main tasks include enhancing the credit-modular system, improving student assessment methods, integrating modern information and communication technologies into the educational process, upgrading the institute's material and technical resources, and ensuring transparency in educational activities.

The "Internal Quality Assurance Program of ASMI," dated September 19, 2023, outlines the responsibilities of the institute's leadership, departments, and other structural divisions. The rector holds overall responsibility for the institute's operations, ensuring compliance with relevant legal regulations and the effective execution of educational programs.

The Academic Council establishes the institute's development strategy and makes key decisions regarding the organization of all institutional activities. It also oversees the approval of the quality assurance program, educational curricula, student admissions, and departmental evaluations. The Vice-Rector for Academic Affairs manages the planning, organization, and supervision of the institute's educational and methodological work. The Vice-Rector for Educational Affairs develops plans for educational activities, oversees the creation and review of educational programs, and ensures the availability of educational materials.

The First Vice-Rector for Youth Affairs and Spiritual and Educational Work is responsible for the institute's social, spiritual, and educational programs, as well as maintaining student living conditions. The Vice-Rector for Research and Innovation leads the strategic planning of scientific and innovative developments, the implementation of scientific projects, and enhancing the research capabilities of faculty. This role also involves fostering innovation, ensuring a close link between research, teaching, and learning, and promoting sustainable motivation for institutional development.

The Educational and Methodological Council is responsible for defining, developing, and implementing institute-wide initiatives to enhance the quality of educational programs and oversee quality control in both the educational process and resource provision. It takes a systematic approach to the development, approval, supervision, and evaluation of educational programs. The Council also updates internal regulations related to educational activities and educational-methodological documents, ensuring their timely approval. Additionally, it determines academic rankings based on credit accumulation and retakes.

The Administrative and Economic Department oversees the institute's economic operations and is accountable for the state of the institute's infrastructure, ensuring safe and healthy conditions for both staff and students. The department head plans and organizes the educational, methodological, research, and instructional activities of the faculty. They are responsible for the development,

monitoring, and improvement of specific educational programs, ensuring that the educational process aligns with the objectives and outcomes of these programs. The head also ensures the interconnection between teaching, research, and the quality of educational activities, as well as the relevance of educational-methodological documents.

The Admissions Committee handles the acceptance of application documents and organizes the conditions for student admissions, ensuring transparency and adherence to the institute's admission rules.

The Vice-Rector for Information Technology is responsible for facilitating the integration of information technologies into the educational process and ensuring reliable internet access across the institute. Additionally, they are tasked with maintaining and updating the institute's official website, providing stakeholders and the public with relevant information about the institute's activities and educational programs.

The Information Resource Center ensures that the educational process is supported by providing educational, methodological, and scientific literature.

The heads of structural divisions are accountable for ensuring that their divisions' activities align with specific goals, objectives, and functions. Responsibilities for maintaining and improving quality are distributed according to the regulations and job descriptions of each structural division.

A report from a social survey conducted on April 27, 2024, based on a questionnaire completed by 6,970 ASMI students, was reviewed. The survey was initiated by the rector's order No. T-01.08.859 dated April 15, 2024, and consisted of 10 questions. The survey results were discussed in a meeting led by the Rector, with the participation of all vice-rectors, deans, deputy deans, the head of the anti-corruption management system, and the head of the ASMI trade union. Based on the feedback, deans and their deputies were instructed to address shortcomings noted in negative student feedback and to strengthen the regulation and control of the educational process.

7.2 Mechanisms for programme monitoring and evaluation

ASMI employs a multi-level system for assessing educational programs, which includes continuous monitoring by the Dean's Office of the Faculty of General Medicine and the Educational and Methodological Department. Academic achievements are systematically reviewed in relation to the EP's mission and expected learning outcomes. ASMI evaluates academic performance based on session results, state final exams, midterm assessments, and employer feedback. These monitoring results are presented to the Academic Council, where corrective actions are proposed.

The General Medicine EP was revised in 2016, incorporating feedback from all stakeholders, and added to the Register of Educational Programs. Following recommendations from independent experts and employers, the content of courses was updated, and the list of elective courses was streamlined. This process is conducted annually, after which new courses are included in the Catalog of Elective Courses to better support the achievement of the EP's expected learning outcomes.

The survey of teachers revealed that 81% strongly agreed that the survey helps generate recommendations for improving key areas of the organization's activities, 10.75% partially agreed, and 5.3% disagreed.

7.3 Teacher and Student Feedback

ASMI conducts surveys of teachers, administrative staff, students, and employers four times a year, along with additional surveys during meetings and roundtable discussions twice annually. These surveys are managed by the Dean's Office, the Student Internship Marketing Department, and the Education Quality Supervision Department. The questionnaire consists of 20 questions addressing topics such as education quality, corruption, and employment. The survey is conducted in a tiered manner, starting at the department level (based on class and lecture feedback), then moving to the Dean's Office, and finally to the Institute level. The feedback collection process is thorough and reliable.

Students are surveyed after midterm and final assessments, with the results analyzed and reviewed in meetings of the Faculty of GM's specialized departments and at the Academic Council. The questions in the surveys are periodically updated to ensure relevance. Based on the feedback

gathered, the educational programs are adjusted to align with key priorities in education, with input from the relevant structural units.

To facilitate feedback, the rector's blog serves as a platform where students and staff can ask questions about the implementation of the EP and receive responses. Student representatives are involved in decision-making through participation in the Faculty Council, the CMC, and the Academic Council, where they contribute to discussions about the educational program. Feedback results are analyzed and discussed in department meetings, the Faculty Council, the CMC, and the Academic Council. Additionally, an annual employer survey is conducted to gauge satisfaction with the Institute's graduates, assess the alignment of the educational program with labor market demands, and identify areas for improvement.

7.4 Performance of Students and Graduates

In the 2023-2024 academic year, 771 students were enrolled in the international faculty. Among them, 20 graduates successfully completed the final state certification and received their bachelor's degrees. The academic performance of the remaining students from the 1st through 5th years was analyzed and reported to the institute's academic council. A total of 54 students remain at the faculty with outstanding academic debts. The results of the completed subjects are summarized in the table.

Table. Performance of Students

Year of study	Number	Assessment							
		Excellent		Good		Satisfactory		Unsatisfactory	
		#	%	#	%	#	%	#	%
1st year	253	0	0	114	45	135	53	4	2
2d year	218	0	0	64	29	142	65	12	6
3d year	136	0	0	89	65	26	19	21	16
4th year	82	0	0	51	62	21	25	10	13
5th year	62	0	0	41	66	14	23	7	11

Following discussions and identification of the reasons for unsatisfactory grades, all students who received such grades are granted one month to retake the subjects. This is done in accordance with Order No. 3069, dated September 26, 2018, issued by the Minister of Higher and Secondary Specialized Education of the Republic of Uzbekistan, titled "On approval of the regulation on the system of control and assessment of students' knowledge in higher educational institutions." The retake process is also guided by the institute's assessment charter and with the approval of the faculty dean.

In response to the question, "I feel sufficiently prepared to advocate for the interests of future patients and effectively address their health needs," 47.0% indicated they felt fully prepared, 28.9% felt partially prepared, and 4.6% said they did not feel prepared.

7.5 Involvement of Stakeholders

Key stakeholders involved in the evaluation and enhancement of the Educational Program at ASMI include:

Employers - medical institutions in Uzbekistan that support the employment and market adaptation of graduates. Every year, correspondence is conducted to assess the quality of training provided to bachelor's graduates, and feedback from practicing doctors regarding the training outcomes is collected.

Healthcare professionals: ASMI adopts an independent, objective assessment approach by involving healthcare practitioners as chairs, members, and examiners on the state certification commission responsible for the final certification of graduates.

Doctor's professional associations: These organizations host scientific and practical conferences on current issues in medical education and the EP.

To gather stakeholder opinions, various activities are organized, such as career guidance for high school graduates, surveys and interviews with applicants, questionnaires for students, employers, faculty, and alumni. Based on the analysis of these activities, measures are developed to improve operations and address needs, leading to updates in the university's goals, objectives, and mission.

Feedback from healthcare professionals, who participate in all advisory committees, is crucial in shaping and approving the Catalog of Elective Disciplines (CED) annually, in line with the specialty training trajectory. The number of elective hours and their proportion to mandatory courses are governed by the State Educational Standard of Uzbekistan.

An interview conducted with 36 employers included questions about their familiarity with the university's mission, involvement in its development and strategic planning, participation in advisory bodies, satisfaction with graduates' core knowledge and skills, involvement in mentoring students in the GM EP, providing resources for practical training and clinical thinking, challenges in collaborating with departments and the university, and ensuring 100% employment of graduates from the bachelor's program.

EEC conclusions on criteria. Compliant of 14 standards: fully – 13 (11- baic, 2- for improvement), partially – 1 (1 - for improvement), not compliant - 0.

Recommendations for improvement:

1) Strengthen the involvement of all stakeholders in monitoring, evaluating, and improving educational programs, including participation from local methodological commissions (subparagraph 7.5.2)

Standard 8. GOVERNANCE AND ADMINISTRATION

8.1 Governance

ASMI has established a robust management system that ensures the achievement of its mission and objectives, sustains institutional effectiveness and integrity, and fosters an environment conducive to learning, scientific research, and creative endeavors. In accordance with the NPA RU, to support the institute's mission and strategic plan for 2023-2030, the Regulations for structural units have been developed and approved. These regulations outline the core areas of activity, set administrative and legal requirements, and define the status of these units within ASMI's management structure as of August 30, 2023. Additionally, a comprehensive list of regulatory documents and employee job descriptions has been created, detailing appointment and dismissal procedures, rights, responsibilities, and authorities.

The implementation of the bachelor's degree program in the "General Medicine" specialty is conducted in alignment with the documents according to Annex 4.

The Dean's Office of General Medicine Faculty, together with the graduating departments, is responsible for ensuring the quality of the bachelor's degree program in "General Medicine." The quality of the educational process is maintained by meeting the mandatory requirements set by the State Educational Standard of 2021 and by implementing a system to monitor the effectiveness of the teaching staff through activities like open classes and internal departmental reviews.

Quality control is overseen by the CMD, the internal quality assurance department, the Center for Quality Assurance, the Dean's Office, and independent experts. Transparency in managing the educational program is ensured by discussing educational and methodological materials at departmental meetings, the Academic Council of the faculty, the Center for Quality Assurance, and the Academic Council of the Institute. The website of the Dean's Office of General Medicine Faculty is active, and ASMI's presence is available on platforms like Twitter, Facebook, YouTube, and VK. The

ASMI website provides essential information about the bachelor's programs, including details for applicants, class schedules, academic calendars, and elective course catalogs.

In response to the survey question, "Do the organization's managers take your opinion into account on matters related to the educational process, research, and clinical work?", 72.7% of teachers indicated that they are regularly consulted, 16% said they are consulted "occasionally," 1.8% responded "rarely," and 8.5% stated "never."

8.2 Student and academic staff representation

At ASMI, the First Vice-Rector for Youth Affairs and Spiritual and Educational Work oversees the institute's spiritual, educational, social, and developmental activities, ensuring students' social and living conditions meet quality standards.

Under the First Vice-Rector's leadership, the Youth Union operates according to the "Charter of the Youth Union," engaging students in various events, spiritual and educational activities, volunteer initiatives, and representing student interests within the Academic Council. The Youth Union aims to cultivate a physically healthy, mentally mature, intellectually developed, and independent-thinking young generation, protecting youth from external threats and the negative impact of "mass culture" while safeguarding their rights and interests. Additionally, the Youth Union includes a department focused on supporting talented students, guided by the "Charter of Gifted Students," which assists students in participating in congresses, international projects, sports competitions, cultural events, and more.

The institute also has a trade union committee that advocates for faculty members, makes recommendations to the Institute Council on employee rights, organizes vacation opportunities in various sanatoriums, and promotes faculty well-being.

8.3 Administration

8.3.1 *The Institute has appropriate and sufficient administrative support to achieve its objectives in teaching, learning and research activities.*

8.3.2 *Medical Institute has developed a policy and review process to ensure that administrative, personnel and financial support for all Institute activities and operations is sufficient and effective.*

During interviews with ASMI's administrative and management personnel and faculty, EEC members observed that the institute clearly outlines the responsibilities of academic leadership in developing and managing educational programs. In an online conversation with focus groups, interviewees confirmed that ASMI periodically evaluates academic leadership's effectiveness in achieving the institution's mission and intended learning outcomes. Administration and management follow international standards and are supported by regularly updated internal regulations in healthcare and education, which enhances competence and ensures the attainment of bachelor's program learning outcomes. Departments carry out their performance in accordance to "Innovative Corporate Collaboration between Higher Education, Science, and Industry" document (<https://adti.uz/ilmiy-bolim-2/>).

8.4 Educational budget and resource allocation

The institute's budget is established based on Order No. 2634 dated December 15, 2014, issued by the Minister of Economy and Finance of the Republic of Uzbekistan, and is derived from multiple sources: the national budget (state funding for training specialists in higher, postgraduate, and additional education), funds from paid-contract education, and income from paid educational services outside the institute's budget. The budget amounts from the State funds and paid-contract income are based on the student enrollment numbers, while the ASMI development fund is supplemented by income from additional services, goods, and work provided.

ASMI's financial and economic policy, along with the institute's management structure, is directed by the rector, with implementation handled by the head of the financial department and the chief accountant, whose roles and responsibilities are outlined in their job descriptions.

To resource the educational process according to income, the institute creates an annual consolidated budget, which is calculated and approved by the Planning and Financial Department

(PFD). The funding of the bachelor's programs is contingent upon an annual state order. The Government Decree No. 419, dated August 1, 2022, established the state educational order for training specialists with higher and postgraduate education, which defines the funding for these programs.

The implementation of bachelor's programs includes funding for teaching staff salaries, providing students with resources (educational and scientific materials, internet access, international literature databases, and ICT), enhancing the program with visiting foreign lecturers, supporting an academic mobility program, and enabling students in the "General Medicine" bachelor's program to attend international and national conferences and seminars.

To ensure effective planning for the educational program, the financial department and dean's office prepare a staffing table (teaching hours and teacher numbers), class schedule, and other resources before the academic year begins. The Department of State Purchase and Analysis annually gathers procurement requests for goods that support the bachelor's program implementation at the start of each academic year. The Vice-Rector for Clinical Work oversees contract agreements with clinical bases that host departments responsible for bachelor's programs.

All departments involved in the "General Medicine" bachelor's program are equipped with classrooms. At the end of each academic year, the commission responsible for procuring educational and methodological literature submits a request for the necessary resources to support the educational program in the upcoming academic year. The Vice-Rector for IT ensures continuous Internet and Wi-Fi access across ASMI, providing students with reliable access to electronic and library resources.

8.5 Interaction with Health Sector

ASMI maintains close collaboration with the healthcare sector, working with employers who support graduate employment through "Job Fair" events and assist in their adaptation to the labor market. Each year, ASMI gathers feedback on the quality of training for bachelor's graduates, including input from healthcare professionals on training outcomes. ASMI also engages representatives from the practical healthcare sector by utilizing an independent and objective assessment model; these representatives serve as chairpersons, members, and examiners on the state certification commission for final graduate assessments.

The institute collaborates with medical associations to organize scientific and practical conferences on current issues in medical education and to ensure the supply of qualified specialists in line with population needs. ASMI actively seeks input from the practical healthcare community and includes their representatives in advisory bodies to enhance the bachelor's program in "General Medicine." Additionally, the institute offers a faculty for advanced training, providing courses for the professional development and retraining of healthcare specialists.

EEC conclusions on criteria. Compliant of 17 standards: fully – 17 (15 – basic, 2 – for improvement, partially - 0, not compliant - 0.

Recommendations for improvement: standard is completed

Standard 9. CONTINUOUS RENEWAL

ASMI is committed to the continuous enhancement of the "General Medicine" bachelor's program to meet the practical healthcare needs of the Republic of Kazakhstan, undergoing ongoing reforms and regularly reviewing and updating processes.

The review process operates on three levels, each accompanied by thorough documentation:

Institute Administration and Management: Working groups evaluate the program, teaching and assessment methods, develop and monitor the bachelor's portfolio, review the elective course catalog, and conduct quarterly audits through the internal quality assurance department to ensure alignment with the European Model of Excellence.

Internal Department Audit: Conducted by the department head, this review, based on each teacher's individual plan and annual plan approved at the academic year's start, occurs once a year, with results discussed in department meetings and included in the annual department report.

Student and Teacher Feedback: Collected through surveys to incorporate insights into university activities. All activities are regulated by corporate documents, including procedures, regulations, instructions, rules, and methodological guidelines.

Following an analysis of documented reviews, resources are allocated at every level, and an action plan is set to update the educational program and refine management practices. ASMI's internal quality assurance department ensures high-quality specialist training, with the competencies of bachelor's graduates regularly adapted.

Modern teaching technologies, interdisciplinary methods, and principles of evidence-based medicine have been integrated into the curriculum to enhance specialist training. Simulation technologies are used to develop clinical skills, with the Simulation Center offering practical experience.

ASMI continually updates resources based on student and employer needs, builds faculty potential, follows a policy for faculty selection and recruitment, and enlists highly qualified medical and healthcare professionals for student training. Faculty members engage in ongoing education in clinical specialties and pedagogy. Equipment at clinical sites is regularly updated to maintain modern standards.

After analyzing submitted documents, survey results, and focus group discussions, EEC members concluded that ASMI, as a dynamic and socially responsible institution, actively initiates regular reviews and updates to content, competencies, assessments, and the learning environment.

EEC conclusions on criteria. Compliant of 3 standards: fully – 3 (1- basic, 2 – for improvement) , partially - 0 , not compliant - 0.

Recommendations for improvement: standard is completed

Thus, during the external evaluation of the educational programme out of 144 standards for accreditation, compliance with 123 basic standards and 21 standards for improvement accreditation was established, including fully compliant 115 basic standards and 19 improvement standards. Partially complied with 8 basic standards and 2 improvement standards. No compliance with 0 standards.


5. Recommendation to the Accreditation Council for accreditation of the educational programme

1. Enhance student involvement in scientific research by implementing a foundational course on research skills to ensure that all students acquire essential competencies in research methodologies (Standard 2, subparagraph 2.1.9, 2.6.1).
2. Engage stakeholders in the development of educational programs by including them in the Faculty Council, the Center for Multidisciplinary Studies, and the Institute's Academic Council, under the framework of academic autonomy (Standard 2, subparagraph 2.2.6).
3. Enhance the involvement of relevant stakeholders in the development of the educational program by encouraging participation in the Faculty Council, Central Methodological Commission (CMC), and the Academic Council of the institute (Standard 3, subparagraph 2.2.8).
4. Specify and validate assessment methods to maintain educational quality (Standard 3, subparagraph 3.1.4).
5. Enhance stakeholder awareness of the assessment system in line with the "Academic Policy" and improve feedback through syllabi. (Standard 3, subparagraph 3.1.6)
6. Refine the examination system and assessment tools. (Standard 3, subparagraph 3.3.3)
7. Provide training for teaching staff in innovative assessment and teaching methods. (Standard 5, subparagraph 5.3.2)

8. Regularly update teaching materials and curricula to reflect recent advances and findings in medical research, ensuring that students are exposed to the latest developments in the field. Improve laboratory facilities and grant students access to essential research tools, databases, and equipment to support their research activities (Standard 6, subparagraph 6.1.3)
9. Increase the integration of scientific research results into educational activities by embedding research methodology, critical analysis, and evidence-based practice within the curriculum. (Standard 6, subparagraph 6.3.2)
10. Strengthen research in medical education and train staff on current trends in educational evaluation and research methodologies to improve teaching effectiveness (Standard 6, subparagraph 6.5.3)
11. Strengthen the involvement of all stakeholders in monitoring, evaluating, and improving educational programs, including participation from local methodological commissions. (Standard 7, subparagraph 7.5.2)

5. Recommendation to the Accreditation Council for accreditation of the educational programme

The members of the External Evaluation Commission (EEC) determined that the "General Medicine" (in English) educational program meets the Accreditation Standards and unanimously agreed to recommend that the ECA Accreditation Council grant accreditation to the program for a period of 5 years.

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Quality Profile and Criteria for External Evaluation of the Educational Programme on Specialty "General Medicine" in English (summary)

Стандарт	Evaluation Criteria	Amount of standards	BS / IS	Оценка		
				Fully compliant	Partial Compliance	Not fulfilled
1.	MISSION AND VALUES	11	11/ 0	11/0	0	0
2.	CURRICULUM (Educational programme)	38	33/ 5	31/4	2/1	0
3.	ASSESSMENT OF STUDENTS	14	12/ 2	9/2	3/0	0
4.	STUDENTS	16	12/ 4	12/4	0	0
5.	ACADEMIC STAFF	10	9/ 1	8/1	1/0	0
6.	EDUCATIONAL RESOURCES	21	19/ 2	17/2	2/0	0
7.	QUALITY ASSURANCE PROGRAMME	14	11/ 3	11/2	0/1	0
8.	GOVERNANCE AND ADMINISTRATION	17	15/ 2	15/2	0	0
9.	CONTINUOUS RENEWAL	3	1/ 2	1/2	0	0
Total:		144	123/21	115/19	8/2	0
* BS - Basic Standard / IS - Improvement Standard				144		

List of documents examined by the External Expert Commission

#	Document title	Number	Approval date
1.	On the organization of admission to studies in state higher educational institutions	1	15.06.2022
2.	On measures to introduce new management principles into the system of higher and secondary specialized education	1	11.07.2019
3.	On measures to reform management in the field of higher and secondary specialized education	1	11.07.2019
4.	On approval of the Concept for the development of the higher education system of the Republic of Uzbekistan until 2030.	1	08.10.2019
5.	Resolution of the Cabinet of Ministers of the Republic of Uzbekistan dated 20.06.2017 No. 393 "On approval of the Regulation on the procedure for admission to study, transfer, reinstatement and expulsion of students in higher educational institutions	1	20.06.2017
6.	Resolution of the President of the Republic of Uzbekistan dated 15.06.2022 No. PP-279 "On the organization of admission to study in state higher educational institutions"	1	15.06.2022
7.	Order of the President of the Republic of Uzbekistan dated 15.06.2023 No. R-31 "On the parameters of the state order for admission to study in state higher educational institutions in the 2023/2024 academic year	1	15.06.2023
8.	On approval of the regulation on the fee-based contract form of education in higher, secondary specialized, and vocational educational institutions and the procedure for distributing funds received from it	1	15.12.2012
9.	On approval of the regulation on the fee-based contract form of education in higher, secondary specialized, and vocational educational institutions and the procedure for distributing funds received from it	1	14.11.2014
10.	On measures to provide financial independence to state higher education institutions	1	24.12.2021
11.	Based on the results of testing in 2023, approved by the Resolution of the State Commission for Admission to Educational Organizations of the Republic of Uzbekistan No. 43-7	1	22.08.2023
12.	Resolution of the President of the Republic of Uzbekistan No. PP-279 "On the organization of admission to study in state higher educational institutions	1	15.06.2022
13.	Based on the results of testing in 2024, approved by Resolution No. 72-4 of August 16, 2024 of the State Commission for Admission to Educational Organizations of the Republic of Uzbekistan	1	16.08.2024
14.	Law of the Republic of Uzbekistan dated No. ZRU-637 "On Education"	1	23.09.2020
15.	Law on the State Youth Policy of the Republic of Uzbekistan	1	14.09.2016
16.	Decree of the President of the Republic of Uzbekistan dated 05.24.2024 No. UP-81 "On improving the system of admission	1	24.05.2024

	to study in higher educational organizations and placing a state order		
17.	UP-4732 "On measures to further improve the system of retraining and advanced training of managerial and pedagogical personnel of higher educational institutions"	1	12.06.2015
18.	UP-4947 "On the strategy for further development of the Republic of Uzbekistan"	1	07.02.2017
19.	UP-4958 "On further improvement of the postgraduate education system"	1	16.02. 2017
20.	UP-5024 "On measures for further implementation of the Action Plan for the five development priorities of the Republic of Uzbekistan for 2017-2021"	1	15.08.2017
21.	UP-5264 of "On the establishment of the Ministry of Innovative Development of the Republic of Uzbekistan"	1	29.11.2017
22.	UP-5847 "On approval of the concept of development of the higher education system of the Republic of Uzbekistan until 2030"	1	08.10.2019
23.	PP-2752 "On measures to implement the provisions of the Law of the Republic of Uzbekistan on Combating Corruption"	1	02.02.2017
24.	PP-2857 "On measures to further improve the activities of primary health care in the Republic of Uzbekistan"	1	29.03.2017
25.	PP-2909 "On measures to further develop the higher education system"	1	20.04.2017
26.	PP-2956 "On measures to further reform the medical education system in the Republic of Uzbekistan"	1	05.05.2017
27.	PP-3151 "On measures to further expand the sectors of participation and sectors of the economy in improving the quality of training higher education specialists"	1	27.07.2017
28.	PP-3389 "On improving the procedure for conducting entrance examinations for the bachelor's degree in the Republic of Uzbekistan"	1	11.11.2017
29.	PP-3775 "On additional measures to improve the quality of education in higher educational institutions and ensure their active participation in large-scale reforms carried out in the country"	1	05.06.2018
30.	PP-4063 "On measures to prevent non-communicable diseases, support a healthy lifestyle and increase the level of physical activity of the population"	1	12.12.2018
31.	PP-4310 "On measures for the further development of the system of medical and pharmaceutical education and science"	1	06.05.2019
32.	PP-4666 "On measures to introduce a completely new system of training and continuous professional development of personnel in the medical and sanitary sphere"	1	07.04.2020
33.	PP-5121 "On further improvement of the activities of the Fund of the President of the Republic of Uzbekistan "Istedod" in the field of advanced training of promising young teaching and scientific personnel"	1	27.07.2017
34.	PP-279 "On the organization of admission to study in state higher educational institutions"	1	15.06.2022
35.	PKM-174 "On additional measures to improve the professional development and training of medical personnel"	1	04.04.2017

36.	PKM-515 "On the Organization of the State Inspectorate for Supervision of the Quality of Education under the Cabinet of Ministers of the Republic of Uzbekistan"	1	18.07.2017
37.	PKM-20 "On Approval of the Regulation on the Procedure for Hiring Teaching Staff in Higher Education Institutions on a Competitive Basis";	1	10.02.2006
38.	PKM-32 On Approval of the Regulation on the Competition "Best Teacher of a Higher Education Institution"	1	24.02.2015
39.	PKM-36 "On Approval of the Regulation on the Master's Degree"	1	02.03.2015
40.	PKM-242 "On Measures for Organizing Retraining and Advanced Training of Heads and Teachers of Higher Education Institutions";	1	20.08.2015
41.	PKM-729 "On Measures for Acquiring Foreign Educational and Scientific Literature for the Higher Education System"	1	30.05.2016
42.	PKM-103 "On Amendments and Supplements to the Regulation on Retraining and Advanced Training of Managers and Teaching Staff of Higher Education Institutions"	1	27.02.2017
43.	PKM-393 "On Approval of the Regulation on the Procedure for Admission, Transfer, Reinstatement, and Suspension from Study in Higher Education Institutions"	1	20.06.2017
44.	PKM-164 "On Approval of the Improved System of Remuneration of Employees of Higher Educational Institutions of the Republic"	1	01.08.2008
45.	PKM-417 "On Approval of the Regulation on the Procedure for Admitting Persons with Disabilities to Higher Education Institutions for Study under Additional Quotas Based on a State Grant"	1	02.06.2018
46.	Order of the Ministry of Higher and Secondary Specialized Education of the Republic of Uzbekistan No. 526 "On the Organization of the Implementation of Educational and Methodological Complexes in the Electronic Education System"	1	30.12.2016
47.	Order of the Ministry of Higher and Secondary Specialized Education No. 524 "On approval of the Plan for training and retraining of teachers and lecturers of higher educational institutions in 2017"	1	28.12.2016
48.	Order of the Minister of Health of the Republic of Uzbekistan No. 774 "On approval of the Nomenclature of medical specialties"	1	24.11.2009
49.	Order of the Minister of Education and Science of the Republic of Uzbekistan No. 1201 "On approval of the Model Rules of Professional Ethics for employees of higher and vocational education institutions"	1	30.12.2019
50.	Order of the Minister of Higher and Secondary Specialized Education No. 35-2021 "On approval of the State Standard of the Republic of Uzbekistan "State Standard of Higher Education. Basic Rules"	1	19.10.2021
51.	Order of the Minister of Higher Education, Science and Innovation No. 259 "On improving the process of developing regulatory and methodological documents of higher education"	1	09.06.2023

52.	Order of the Minister of Higher Education, Science and Innovation No. 284 “On the procedure for developing educational literature and determining the requirements for their use in higher education institutions”;	1	22.08.2022
53.	Order of the Minister of Higher Education, Science and Innovation No. 193 of “On the development of regulatory and methodological documents in the process of optimizing higher education areas”;	1	29.05.2024
54.	On measures to create favorable conditions for the implementation of labor activities in the territory of the Republic of Uzbekistan by qualified specialists of foreign countries	1	7.11.2018
55.	Document on academic workload	1	08.10.2018
56.	Job Description Document	1	no date
57.	Document on the internal rules of the ASMI	1	1.07.2019
58.	Code of Ethics for Medical Personnel	1	28.05.2022
59.	Regulation on the Procedure for Assessing Knowledge	1	no date
60.	REGULATION On the implementation of the credit-modular system of education at the ASMI	1	2024
61.	REGULATION on the system of control and assessment of knowledge of students of ASMI	1	2024
62.	Academic Policy of ASMI 2024-2025	1	26.08.2024
63.	On the parameters of the state order for admission to study in state higher educational institutions in the 2022/2023 academic year	1	15.06.2022
64.	Job description of a tutor at Andijan State Medical Institute	1	no date
65.	Appendix 1 to the order of the rector of the institute No. ____ dated October ____, 2021 On the procedure for organizing tutoring activities at the Andijan State Medical Institute	1	2021
66.	About HEMIS – Higher Education Management Information System	1	no date
67.	Library, electronic access, how to determine library needs and their equipment	1	no date
68.	Incentive document on PHD (№01941)	1	13.06.2024
69.	Incentive document on having patent (№01950)	1	14.06.2024
70.	Incentive document on being research supervisor (№011293)	1	26.08.2024
71.	On measures to improve the system of providing accommodation for students of higher education institutions	1	10.05.2024
72.	Document on approval of accessibility of students of the medical faculty to patients in clinical practice	1	no date
73.	Career Center Composition Document	1	no date
74.	Job Fair Minutes 14.05.2024	1	14.05.2024
75.	Job Fair Minutes 24.11.2023	1	24.11.2023
76.	Protocol for employers of Andijan region	1	01.03.2024
77.	Protocol for employers of Fergana region	1	29.02.2024
78.	Protocol for employers of Namangan region	1	27.02.2024
79.	Contract between ASMI and Bukhara Medical Institute	1	16.09.2022
80.	Contract between ASMI and Samarkand Medical University No. 001	1	no date
81.	Contract between ASMI and Tashkent Medical University No.	1	no date

	003		
82.	Document on the study of the labor market of Andijan region - 1.	1	03.04.2024
83.	Document on the study of the labor market of Andijan region - 2.	1	16.03.2024
84.	Document on the study of the labor market of the Fergana region - 1.	1	16.03.2024
85.	Document on the study of the labor market of the Fergana region - 2.	1	20.03.2024
86.	Document of the study of the labor market of the Namangan region - 1.	1	16.03.2024
87.	Document of the study of the labor market of the Namangan region - 2.	1	20.03.2024
88.	Working training program on the subject of Human Anatomy 1,2,3	1	24.06.2024
89.	Ўзбекистон Давлат Стандарти Ўзбекистон узлуксиз таълимнинг давлат таълим стандартлари Олий таълимнинг давлат таълим стандарти	1	16.06.2021
90.	“Oliy ta’limning davlat ta’lim standarti. Asosiy qoidalar” O‘zbekiston respublikasining davlat standartini tasdiqlash to‘g‘risida	1	19.10.2021
91.	Andijon viloyat sog'liqni saqlash boshqarmasi tomonidan Andijon davlat tibbiyot instituti bitiruvchilariga bo'lgan malaka talablarini g'uy darajada (1,axshi, qoniqarli, yomon) tomonlari to'yicha tahliliy ma'lumoti	1	no date
92.	Андижон вилоят соғлиқни сақлаш бoshқармаси томонидан АДТИга мутахассислар бўйича берилган буюртмалар (мурожаатлар) юзасидан	1	no date
93.	Namangan viloyati sog'liqni saqlash boshqarmasi tomonidan Andijon davlat tibbiyot institutlariga bo'lgan malaka talablarini qay darajada (yaxshi, qoniqarli, yomon) tomonlari bo'yicha tahliliy ma'lumoti	1	no date
94.	Наманган вилояти соғлиқни сақлаш бoshқармаси томонидан АДТИга мутахассислар бўйича берилган буюртмалар (мурожаатлар) юзасидан	1	no date
95.	Фарғона вилояти соғлиқни сақлаш тизимидаги олий маълумотли тиббий кадрларга бўлган эҳтиёж тўғрисида маълумот	1	no date
96.	2022/2023 укув йилида Андижон давлат тиббиёт институти балкалавриатининг кундузги таълим шакли бўйича давлат буюртмаси асосида уқишга қабул қилиш параметрларининг таълим йуналишлари ва уқитиш тиллари бўйича тақсимланиши	1	no date
97.	2023/2024 укув йилида Андижон давлат тиббиёт институти балкалавриатининг кундузги таълим шакли бўйича давлат буюртмаси асосида уқишга қабул қилиш параметрларининг таълим йуналишлари ва уқитиш тиллари бўйича тақсимланиши	1	no date
98.	2024/2025 укув йилида Андижон давлат тиббиёт институти балкалавриатининг кундузги таълим шакли бўйича давлат буюртмаси асосида уқишга қабул қилиш параметрларининг	1	no date

	таълим йуналишлари ва уқитиш тиллари буйича тақсимланиши		
99.	Андижон давлат тиббиёт институти олий таълим муассаса кенгаши 2023 йил 27 июндаги №13 сонли йигилишининг баённомасидан кучирма	1	27.06.2023
100.	Oliy ta'lim, fan va innovatsiyalar vazirining 2023 yil 4-dekabrda 516-sonli buyrug'ining ijrosini taminlash to'g'risida	1	11.12.2023
101.	Oliy va o'rta maxsus ta'lim vazirligining 2022 yil 14-fevraldagi 52-sonli buyrug'ining ijrosini ta'minlash to'g'risida	1	14.02.2022
102.	Oliy va o'rta maxsus ta'lim vazirining 2022 yil 19-dekabrda 413-sonli buyrug'ining ijrosini taminlash to'g'risida	1	22.12.2022
103.	Andijon davlat tibbiyot instituti Stomatologiya fakulteti Iqtidorli talabalarini fan olimpiada va konferensiyalarda qo'lga kiritgan diplom va rag'batlantirishlari	1	no date
104.	Андижон Давлат тиббиёт институтида иқтидорли талабалар томонидан олинган номдор стипендиялар тугрисида	1	no date
105.	Andijon davlat tibbiyot institute kengashini 2023 yil "25" oktybrdagi yigilishining №3 sonli bayonnomasidan ko'chirma	1	25.10.2023
106.	2023 yil 19-oktyabr kuni institutda o'tkazilgan Innovatsion g'oya va texnologiyalar tanlovida g'olib bo'lgan loyihalarni amalga oshirish maqsadida institut kengashining 2023 yil 25-oktabrdagi 3-sonli yig'ilish qarorida belgilangan loyihalarga mablag' ajratish maqsadida	1	25.10.2023
107.	Andijon Davlat Tibbiyot institute hamda Samarqand davlat tibbiyot universiteti o'rtasida ta'lim va fan sohasida ilmiy-amaliy hamkorlik to'g'risida SHARTNOMA №001	1	31.08.2022
108.	Andijon Davlat Tibbiyot instituti hamda Toshkent davlat stomatologiya instituti o'rtasida ta'lim va fan sohasida ilmiy-amaliy hamkorlik to'g'risida SHARTNOMA №003	1	10.10.2022
109.	Davlat oliy ta'lim muassasalarining akademik va tashkiliy-boshqaruv mustaqilligini ta'minlash bo'yicha qo'shimcha chora-tadbirlar to'g'risida	1	no date
110.	Abu Ali Ibn Sino Nomidagi Buxoro Davlat tibbiyot Instituti hamda Andijon Davlat Tibbiyot Instituti o'rtasida ta'lim va fan sohasida ilmiy-amaliy hamkorlik to'g'risida SHARTNOMA №3	1	16.09.2022
111.	Andijon Davlat tibbiyot institute rektoring buyrug'idan ko'chirma (1 st document)	1	21.06.2024
112.	Andijon Davlat tibbiyot institute rektoring buyrug'idan ko'chirma (2d document) Sh-01/08/1441	1	21.06.2024
113.	Andijon Davlat tibbiyot institute rektoring buyrug'idan ko'chirma (3d document) Sh-01/08/1815	1	28.08.2024
114.	Andijon davlat tibbiyot institute oliy ta'li muassasasi kengashining 2024 yil 26 avgustdagi 1-sonli yig'ilishini bayonnomasidan ko'chirma	1	26.08.2024
115.	Andijon davlat tibbiyot institutida kredit-modul o'qitish tizimini joriy etish to'g'risida (1-5kurs)	1	2024
116.	Andijon davlat tibbiyot institutining talabalar bilimni nazorat qilish va baholash tizimi to'g'risidagi (6 kurs)	1	2024
117.	Andijon davlat tibbiyot institute stomatologiya fakulteti ilmiy	1	30.08.2024

	kengashining 2024-2025 o'quv yili uchun MAJLISLAR REJASI		
118.	Анджон давлат тиббиёт институтида тьютор лавозимининг “Тармоқ тариф-малака маълумотномаси”	1	no date
119.	Oliy ta'lim muassasalari talabalarini turar joy bilan ta'minlash tizimini takomillashtirish chora-tadbirlari to'g'risida	1	10.05.2024
120.	Oliy ta'lim tizimida ma'naviy ma'rifiy ishlar samaradorligini oshirish chora-tadbirlari to'g'risida	1	30.09.2021
121.	Oliy ta'lim muassasalarida tyutor lavozimining “Tarmoq tariff-malaka ma'lumotnomasi”	1	30.09.2021
122.	Davlat oliy ta'lim muassasalarida tyutorlik faoliyatini tashkil etish tartibi to'g'risidagi NAMUNAVIY NIZOM	1	30.09.2021
123.	Анджон давлат тиббиёт институтида тьюторлик фаолиятини ташкил этиш тартиби тўғрисидаги	1	2021 год.

EEC Site-visit Program

«Approved»

Director General of «ECAQA»
Sarsenbayeva S.S. _____

_____ 2024

«Agreed»

Rector of Andijan State Medical Institute
Madazimov M.M. _____

_____ 2024

Site Visit Programme
of the External Expert Commission of the Non-profit organisation "Eurasian Center for Accreditation and Quality Assurance in Higher Education and Health Care" (ECAQA) to Andijan State Medical University (ASMI) within the framework of the accreditation of educational programmes

Address: Andijan, Y.Otabekov Street, 1

Visit Dates: September 24-26, 2024

Time	EVENT	
September 23 (Monday), 2024	Arrival of the members of the External Evaluation Commission Preliminary meeting of the experts: introduction, distribution of responsibilities among the EEC members; brief overview of the self-assessment reports of the educational programmes, discussion of key issues; discussion of the programme and schedule for the EEC's visit to the university.	
1st day of external evaluation: September 24, 2024, Tuesday		<i>Accreditation Standards*/ Location</i>
08:45	Gathering of the EEC members at ASMI	
09:00-09:15	Meeting of the EEC members. Planning for the 1st day of the external evaluation	
09:20-09:40 (20')	Meeting with Rector, Professor Madizimov Madamin Muminovich	<i>Standards 1,8,9 Y.Otabekov Street, 1</i>
09:45-10:15 (30')	Meeting with the Vice-Rector for Academic Affairs <i>Professor Bakhrom Rustamzhanovich Abdullazhanov</i>	<i>Standards 1,2,6,7,8 1-educational building of ASMI,</i>

			2-floor No. 227
10:20-10:50 (30')	Meeting with the Vice-Rector for Research and Innovation <i>Doctor of Medical Sciences, Associate Professor Salakhiddinov Kamoliddin Zukhriddinovich</i> Head of the Department of Scientific Research, Innovations, and Training of Scientific and Pedagogical Staff, <i>Mamatkhujeva Gulnarakhon Najmidinovna</i>		Standards 2,6,5 1-educational building of ASMI, 2-floor No. 226
10:55-11:15 (20')	<i>EEC meeting. Exchange of opinions</i>		
	EEC 1	EEC 2	
11:15-11:45 (30')	Meeting with the Vice-Rector for Medical Affairs PhD, Associate Professor Rakhmanov Bakhodirzhon Zhaffaralievich Department for Work with Clinical (Training) Bases Abdurakhmonov Farrukh Saidazim ugli <i>Standards 1,2,6,7,8</i>	Meeting with the Vice-Rector for International Cooperation Department of International Relations – Rasulov Farruhbek Bakhtiyorovich <i>Standards 6,8,9</i>	Location: 1-educational building of ASMI, 1-floor No. 131 2-floor No. 219
11:50-12:20 (30')	Department for Work with Gifted Students – Bustanov Sherzodbek Yakubovich Youth Union – Kuchkarov Khumoyun Ismoilzhon ugli <i>Standards 3,4,6</i>	Meeting with the Vice-Rector for Youth Affairs - Salakhiddinov Sarvarjon Department for Youth Affairs, Spirituality, and Enlightenment – Abdukhalimov Abdurakhmon Abdumuminovich <i>Standards 4,6,8</i>	1-educational building of ASMI, 2-floor No. 214,224,226, 1-floor No. 115
12:25-13:00 (35')	Center for Digital Educational Technologies - Rakhmanov Bakhrom Mutalibzhanovich Center for Communicative Competence Development <i>Standards 3,4,6</i>	Center for Information Technologies – Turakhonov Nurillokhon, Head of the Information Systems Implementation Department – Rakhmanov Bahromjon, Head of the Information Security Department Library – Akhmedova Mukhtaram Sanzharovna <i>Standards 2,6,9</i>	1-educational building of ASMI, 2-floor No. 211, 215
13:00-14:00	Lunch Break		
14:00-14:15 (15')	<i>EEC meeting. Exchange of opinions</i>		
	EEC 1	EEC 2	EEC 3

14:20-15:00 (40')	Dean's Office of the Medical Faculty – Mamatov Bakhtiyar Yusufovich Admissions Committee – Ibragimov Zhasurbek Khabibzhanovich <i>Standards 2,3,4,5,6</i>	International Faculty of Medical Education - PhD, Yakhshiboeva Gulbahorkhon Oybek kizi <i>Standards 1,2,3,5,6,7,8</i> <i>1-educational building of ASMI, 2-floor No. 209</i>	Dean's Office of the Dental Faculty - Tulanov Dilshodbek Shomirzaevich <i>Standards 2,3,4,5,6</i>	<i>1-educational building of ASMI, 1-floor No. 124, 102,128</i>
15:00-15:40 (40')	Interviews with students of the Medical Faculty Students of the "General Medicine" programme (70) in Uzbek and Russian language tracks <i>1-educational building of ASMI, 2-floor No. 128</i> Students of the "General Medicine" programme (30) in the English language track <i>1-educational building of ASMI, 2-floor No. 209</i>	Interviews with students of the Dental Faculty Students of the "Dentistry" programme (40) <i>1-educational building of ASMI, 1-floor No. 124</i>	<i>Standards 1,2,4,5,6,7</i>	
15:45-16:15 (30')	Educational-Methodical Department - Isakov Kobiljon Komiljon ugli <i>Standards 2,3,4,6,8</i>	Career Center - Soliev Anvar Alizhonovich <i>Standards 4,7</i>	<i>1-educational building of ASMI, 2-floor No. 232 1-floor No. 158</i>	
16:15-16:35 (20')	<i>EEC meeting. Exchange of opinions</i>			
16:40-17:20 (40')	Interviews with instructors of the "General Medicine" programme (25) in Uzbek and Russian language tracks <i>1-educational building of ASMI, 1-floor No. 128</i> Interviews with instructors of the "General Medicine" programme (10) in the English language track <i>1-educational building of ASMI, 2-floor No. 209</i>	Interviews with instructors of the "Dentistry" programme (15) <i>1-educational building of ASMI, 1-floor No. 124</i>	<i>Standards 1,2,5,6,7</i>	
17:20-18:00	Review of documentation			
18:00-18:30	Visit to the ASMI dormitory Conclusion of the 1st day of the visit. Planning for the 2nd day of the visit			
2nd day of external evaluation: September 25, 2024, Wednesday				<i>Accreditation Standards</i>

08:45	Gathering of the EEC members at ASMI		
09:00-09:15	Meeting of the EEC members		
09:20-10:20	Attending practical classes and seminars		
	<i>EEC 1 (Medical Faculty)</i>	<i>EEC 2 (Dental Faculty)</i>	
	<p>Department of Normal Physiology (1 academic building, 4th floor)</p> <ul style="list-style-type: none"> - Associate Professor Klicheva Ikbolkhon Bakhtiyorovna <p>Department of Pharmacology, Clinical Pharmacology and Medical Biotechnology (1 academic building, 3rd Floor)</p> <ul style="list-style-type: none"> - Associate Professor Kurbanova Diloram Ibrahimjon Kizi <p>Department of Pathological Physiology (1 academic building, 3rd floor)</p> <ul style="list-style-type: none"> - MD Associate Professor Hamrakulov Sharifjon Khoshimovich <p>Department of Anatomy and Clinical Anatomy (1st academic building, 1st floor)</p> <ul style="list-style-type: none"> - Ph.D. Associate Professor Kakharov Zafar Abdurakhmonovich 	<p>Department of Biological Chemistry (2nd academic department, 3rd floor)</p> <ul style="list-style-type: none"> - Doctor of Chemical Sciences, Professor Mamatova Irodakhon Yusupovna <p>Department of Medical Biology and Histology (2nd academic building, 3rd floor)</p> <ul style="list-style-type: none"> - Associate Professor Saidullaev Tayirzhon 	<i>Standards 2,5,6,7,8</i>
10:20-10:55	<p>Educational Simulation Center PhD, Associate Professor Usmonov Umidzhon Donakuzievich</p>	Educational Simulation Center for Dentists	<i>Standards 2,3,5,6,9 1-educational building of ASMI, 2-floor No. 270</i>
11:00	Departure to clinics		
11:30-13:00 (90')	<p>Clinical bases of the Medical Faculty: Department of Propaedeutics of Internal Diseases</p> <ul style="list-style-type: none"> - Associate Professor Yuldashev Rafikzhan Numanovich (new academic building, clinical, 1st floor) - MD, associate professor Musashaykhov Umidzhon Khusanovich <p>Department of Hospital Therapy and Endocrinology</p>	<p>Clinical bases of the Dental Faculty: Department of Dentistry and Propaedeutics of Dental Diseases</p> <ul style="list-style-type: none"> - Khakimova Zilola Kakhramonjonovna <p>Department of Therapeutic, Orthopedic, and Pediatric Dentistry</p> <ul style="list-style-type: none"> - Usmanov Bakhtiyorjon Arobidin ugli Andijan, Z. Babur Avenue No. 6, ASMI clinic, chief physician: Rakhmanov Bakhodirjon Zhaffaralievich. 	<i>Standards 2,5,6,7</i>

	<p>- Associate Professor Yusupova Shakhnoza Kadirzhanovna Department of General Surgery and Transplantology (new academic building clinic, 4th floor)</p> <p>- MD. Professor Musashaykhov Husanboy Tadzhibaevich Andijan, Z. Babur Avenue No. 6, ASMI clinic, chief physician: Rakhmanov Bakhodirjon Zhaffaralievich.</p>	<p>Department of Dental Surgery - Teshaboev Mukhammadyakho Gulomkodirovich Andijan, Ogahiy No. 4 + simulation center.</p>	
13:00-14:00	Lunch Break		
14:00-15:30 (90')	<p>Clinical bases of the Medical Faculty: Department of Obstetrics and Gynecology - Doctor of Medical Sciences Professor Asrankulova Diloromkhon Bakhtiyarovna Andijan, Tashkent street, 42, Andijan Regional Perinatal Center, director of the center Nasretdinova Dildora Bakhtiyarovna</p> <p>Department of Psychiatry and Narcology - Doctor of Medical Sciences, Professor Agranovsky Mark Leizerovich Andijan, st. Yu. Atabekova No. 3, Andijan Regional Psychoneurological Dispensary, chief physician: Buvabekov Oybek Saidovich</p> <p>Department of General Practitioner -1 - Professor Z.S. Salokhiddinov Andijan, Z. Babur Avenue No. 6, ASMI Clinic, Chief Physician: Rakhmanov Bakhodirzhon Zhaffaralievich.</p>	<p>Clinical bases of the Dental Faculty: Department of Orthopedic Dentistry and Orthodontics - Raimjonov Rustambek Ravshanbek Ugli Department of Otorhinolaryngology - Doctor of Medical Sciences, Professor Kosimov Kabil Andijan, Z. Babur Avenue No. 6, ASMI Clinic, Chief Physician: Rakhmanov Bakhodirzhon Zhaffaralievich.</p>	
15:30	Transfer to ASMI		
	<i>EEC 1</i>		<i>EEC 2</i>
16:00-17:00 (60')	<p>Interview with 6th year students of the programme "General Medicine" (15) in Uzbek and Russian languages of instruction 1-academic building of ASMI, 1-floor No. 128</p>	<p>Interview with 5th year students of the programme "Dentistry" (15) 1-academic building of ASMI, 1-floor No. 124</p>	
17:00-17:35 (35')	<i>EEC meeting</i>		

17:35-18:30	Review of documentation. Conclusion of the 2nd day of the visit. Planning for the 3rd day of the visit		
3rd day of external evaluation: September 26, 2024, Thursday			<i>Accreditation Standards</i>
08:40	Gathering of the EEC members at ASMI		
09:00-09:15 (15')	Meeting of the EEC members. Planning the 3rd day of the external evaluation.		
	<i>EEC 1</i>	<i>EEC 2</i>	
09:20-09:50 (30')	Interviews with representatives of practical healthcare (employers of graduates of the Medical Faculty) (15) <i>1-educational building of ASMI, 2-floor No. 211</i>	Interviews with representatives of practical healthcare (employers of graduates of the Dental Faculty) (10) <i>1-educational building of ASMI, 2nd floor No. 211.</i>	<i>Standards 1,2,7,9</i>
09:55-10:20 (30')	Student Scientific Society - Bustanov Sherzodbek Yakubovich <i>Standards 4,7</i>		<i>1-educational building of ASMI, 2-floor No. 224, 2-floor No. 207</i>
10:25-10:50 (25')	Human Resources Department - <i>Head: Abdurakhmanov Akmalbek Khashimovich</i> <i>Standards 1,5,9</i>	Department of Education Quality Control - <i>Head: Pakirdinov Alisher Saifitdinovich</i> <i>Standards 1,2,7,9</i>	<i>1-educational building of ASMI, 2-floor No. 226, 2-floor No. 217</i>
10:55-11:20 (25')	Interviews with graduates of the "General Medicine" programme (15) in Uzbek and Russian languages <i>1-educational building of ASMI, 1-floor No. 128</i> Interviews with graduates of the "General Medicine" programme (10) in English <i>1-educational building of ASMI, 1-floor No. 209</i>	Interviews with graduates of the "Dentistry" programme (15) <i>1-educational building of ASMI, 1-floor No. 124</i>	<i>Standards 1,2,3,4,7</i>
11:20-11:35 (15')	<i>EEC Meeting</i>		
11:35-12:00 (25')	Meeting with members of the examination committees		<i>Standards 2,3,4,6,7</i>
12:05-12:30 (25')	Meeting with the Head of the Monitoring and Internal Control Department, Mirzaev Kamol Karimovich		<i>Standards 1,6,7,8,9</i>
12:30-13:00	Final discussion of the results of the external evaluation of ASMI's educational programmes for compliance with accreditation standards.		
13:00-14:00	Lunch Break		

14:00-16:40	Discussion of recommendations for improving ASMI's educational programmes. Final voting on recommendations for ASMI and recommendations for the ECAQA Accreditation Council.	
16:40-17:00	Presentation of the EEC's results, including recommendations for improving the educational programmes, to the ASMI administration.	
17:00-17:25	Announcement of the results of the external evaluation to the heads of ASMI departments and heads of departments responsible for implementing the accredited educational programmes.	
17:25-18:00	Conclusion of the EEC's work	
18:00	Departure of the EEC members from ASMI	

*** Note:**

- Standard 1 «Mission and Values»;
- Standard 2 «Educational Programme»;
- Standard 3 «Student Assessment»;
- Standard 4 «Students»;
- Standard 5 «Academic Staff»;
- Standard 6 «Educational Resources»;
- Standard 7 «Quality Assurance»;
- Standard 8 « Management and Administration»;
- Standard 9 «Continuous Improvement».

List of documents according to which the implementation of the EP is carried out

The implementation of the bachelor's degree program in the "General Medicine" specialty is conducted in alignment with the documents:

- Law of the Republic of Uzbekistan dated September 23, 2020 No. ZRU-637 "On Education";
- Law on the State Youth Policy of the Republic of Uzbekistan dated September 14, 2016;
- UP-4732 dated June 12, 2015 "On measures to further improve the system of retraining and advanced training of managerial and pedagogical personnel of higher educational institutions";
- UP-4947 dated February 7, 2017 "On the strategy for further development of the Republic of Uzbekistan";
- UP-4958 dated February 16, 2017 "On further improvement of the postgraduate education system";
- UP-5024 of August 15, 2017 "On measures for further implementation of the Action Plan for the five development priorities of the Republic of Uzbekistan for 2017-2021";
- UP-5264 of November 29, 2017 "On the establishment of the Ministry of Innovative Development of the Republic of Uzbekistan";
- UP-5847 of October 8, 2019 "On approval of the concept of development of the higher education system of the Republic of Uzbekistan until 2030";
- PP-2752 of February 2, 2017 "On measures to implement the provisions of the Law of the Republic of Uzbekistan on Combating Corruption";
- PP-2857 of March 29, 2017 "On measures to further improve the activities of primary health care in the Republic of Uzbekistan";
- PP-2909 of April 20, 2017 "On measures to further develop the higher education system";
- PP-2956 of May 5, 2017 "On measures to further reform the medical education system in the Republic of Uzbekistan";
- PP-3151 of July 27, 2017 "On measures to further expand the sectors of participation and sectors of the economy in improving the quality of training higher education specialists";
- PP-3389 of November 11, 2017 "On improving the procedure for conducting entrance examinations for the bachelor's degree in the Republic of Uzbekistan" PP-3775 of June 5, 2018 "On additional measures to improve the quality of education in higher educational institutions and ensure their active participation in large-scale reforms carried out in the country";
- PP-4063 of December 12, 2018 "On measures to prevent non-communicable diseases, support a healthy lifestyle and increase the level of physical activity of the population";
- PP-4310 of May 6, 2019 "On measures for the further development of the system of medical and pharmaceutical education and science";
- PP-4666 of April 7, 2020 "On measures to introduce a completely new system of training and continuous professional development of personnel in the medical and sanitary sphere";
- PP-5121 of July 27, 2017 "On further improvement of the activities of the Fund of the President of the Republic of Uzbekistan "Istedod" in the field of advanced training of promising young teaching and scientific personnel";
- PP-279 of June 15, 2022 "On the organization of admission to study in state higher educational institutions";
- PKM-174 of April 4, 2017 "On additional measures to improve the professional development and training of medical personnel";
- PKM-515 of July 18, 2017 "On the Organization of the State Inspectorate for Supervision of the Quality of Education under the Cabinet of Ministers of the Republic of Uzbekistan";

- PKM-20 of February 10, 2006 "On Approval of the Regulation on the Procedure for Hiring Teaching Staff in Higher Education Institutions on a Competitive Basis";
- PKM-32 of February 24, 2015 On Approval of the Regulation on the Competition "Best Teacher of a Higher Education Institution";
- PKM-36 of March 2, 2015 "On Approval of the Regulation on the Master's Degree";
- PKM-242 of August 20, 2015 "On Measures for Organizing Retraining and Advanced Training of Heads and Teachers of Higher Education Institutions";
- PKM-729 of May 30, 2016 "On Measures for Acquiring Foreign Educational and Scientific Literature for the Higher Education System";
- PKM-103 of February 27, 2017 "On Amendments and Supplements to the Regulation on Retraining and Advanced Training of Managers and Teaching Staff of Higher Education Institutions";
- PKM-393 of June 20, 2017 "On Approval of the Regulation on the Procedure for Admission, Transfer, Reinstatement, and Suspension from Study in Higher Education Institutions";
- PKM-164 of August 1, 2008 "On Approval of the Improved System of Remuneration of Employees of Higher Educational Institutions of the Republic";
- PKM-417 of June 2, 2018 "On Approval of the Regulation on the Procedure for Admitting Persons with Disabilities to Higher Education Institutions for Study under Additional Quotas Based on a State Grant";
- Order of the Ministry of Higher and Secondary Specialized Education of the Republic of Uzbekistan dated December 30, 2016 No. 526 "On the Organization of the Implementation of Educational and Methodological Complexes in the Electronic Education System";
- Order of the Ministry of Higher and Secondary Specialized Education No. 524 of December 28, 2016 "On approval of the Plan for training and retraining of teachers and lecturers of higher educational institutions in 2017";
- Order of the Minister of Health of the Republic of Uzbekistan No. 774 of November 24, 2009