



ASSOCIATION FOR EVALUATION
AND ACCREDITATION OF
MEDICAL EDUCATION PROGRAMS

www.tepdad.org.tr

info@tepdad.org

tel: +90 530 123 45 70

faks: +90 232 343 67 70

INSTITUTIONAL SITE- VISIT GUIDE FOR INTERNATIONAL ACCREDIATION

Version 4.0 2022

Table of contents

I. INSTITUTIONAL SITE- VISIT GUIDE 2

- Institutional site- visit activities 3**
- Recommendations for institutional site-visit activities 9**
- Suggested sample questions for interviews with different groups 13**

II. TEPDAD INSTITUTIONAL SITE-VISIT REPORT GUIDE 24

- Evaluation chart to be used during the site-visit 26**
- End of site-visit exit report form 57**
- End of site-visit evaluation form 58**

III. APPENDICES 59

I. INSTITUTIONAL SITE-VISIT GUIDE

INTRODUCTION

Institutional site-visit is the last step in the evaluation of institutions applying for accreditation. The purpose of the site-visit is to determine the status of the institution against WFME Global Standards for Basic Medical Education (2015) by on-site observations and interviews. The site-visit team is appointed for the visit to evaluate whether the practices specified in the Self-Evaluation Report prepared by the institution meet the WFME Global Standards for Basic Medical Education in accordance with the TEPDAD Ethical Principles and directives. The team is supposed to send an institutional site-visit evaluation report to the TEPDAD within 10 days subsequent to end of the the visit. In exceptional circumstances, any part of the visit program may be carried out online.

Institutional site-visit team is responsible for;

1. Identifying strengths and areas for development in the educational practices and evaluate the institution according to WFME Global Standards for Basic Medical Education
2. Making a qualitative evaluation of the elements that cannot be documented in the SER,
3. Identifying the consistency and inconsistencies between SER and on-site visit evaluations

INSTITUTIONAL SITE-VISIT ACTIVITIES

The process is composed of three basic phases.

1. Pre-visit activities
2. In site-visit activities
3. Post-visit activities

The success of the whole process depends on the comprehensive, timely and professional completion of these three phases in a holistic manner.

1.Pre-visit activities

It starts with the appointment of the site-visit team members by TEPDAD and the determination of the visit date. Site-visit team members are expected to examine the SER and its attachments prepared by the institution to have information about the school and its status against the standards.

The details of the site-visit process (date, transportation, accommodation, site-visit plan, expectations in the dean's presentation etc.) are determined by the team and the head of the team conveys the information to the institution. For site-visits, the institution should provide a separate room for the site-visit team meetings in the accommodation place with internet connection where a printer, a barcovision and a printed copy of SER and its attachmenrs are available. A similar room should also be allocated in the school for the site-visit team The institution should take the necessary measures to ensure that face-to-face visits to be held in unusual circumstances are carried out in healthy and safe conditions for the evaluation team and participants (accommodation conditions, size of meeting rooms, implementation of hygiene-health-safety rules, etc.)

The site-visit team makes a plan for the observations and interviews to be made during the site-visit and additional information to be requested.

All organization and expenses of site-visit are covered by the institution visited. After communicating with all team members, the head of the team should request an official invitation/assignment for the team members from TEPDAD.

2. Site-visit Activities

The faculty of medicine applying for accreditation is obliged to provide all required information to the site-visit team.

Site-visit team interviews the following person or groups during the site-visit:

- Dean
- Education administration (vice-dean/ educational supervisors /coordinators)
- Self valuation report coordinator and members
- Faculty members
- Residents
- Medical students
- Student affairs officers
- Other units and persons deemed necessary (graduates, administrative staff etc.)

During the visit, it is necessary for the team to make observations and interviews with related bodies based on the information in the SER to clarify the status of the school and make it visible.

For example; If it is stated that small group activities are carried out in the institution's SER, then the number of students, group sizes, training rooms used for small group activities, the number of students per faculty member, the number and total duration of small group activities that a student participates in in a semester, the student's active engagement, exams, student feedback, faculty satisfaction, etc. may be investigated by related questions and useful information about many standards can be obtained. Thus, it will be possible to make a more holistic assessment, both quantitatively and qualitatively, about the status of the institution and the education program against the standards.

On the following pages you will find sample interview questions prepared and suggested by TEPDAD for each stage of the site-visit.

Information on the minimum interview, observation and meeting activities that should be held during the site-visit is presented below. The head of the site-visit team should prepare a scheduled visit program, taking the opinions of the team members and using the site-visit program template below, and submit it to the Institution's SER Coordinator, and the program must be finalized by mutual discussion.

The day before the on-site visit

Day 0

- Site-visit team meeting- online if necessary
 - Evaluation of the Self-Evaluation Report (SER) using the evaluation chart (team members are informed by the international accreditation board member in the visit team),
 - Finalizing the institutional site-visit plan,
 - Determining the required additional information and documents and special questions to be asked during the visit,
 - Division of work among site-visit team members,
 - Determination of participants for interviews with the faculty members and students
- Preparation meeting with the education administration (dinner) – if it is online (Suggested duration is 1 hr)

Recommendations for the site-visit teams

- Before the site-visit, ask the institution for a list of 40 faculty members who can represent the faculty from different departments (basic, medical and surgical sciences) and different titles (Assistant Professor, Associate Professor and Professor). Review the presented list, and randomly identify two groups of 15 members each, and convey the lists of selected participants to the school administration at the preparatory meeting. The faculty members to be interviewed must not be assigned in the commissions or boards related to education management.
- Ask the institution for a list of 75 students from different classes who can represent the faculty of medicine.
- Before the visit, ask the institution for the names of 5 department heads from each of basic, medical and surgical sciences.
- In the preparation meeting with the education administration review the site-visit plan. (At this meeting, the members of site-visit team inform the faculty administration about the face-to-face (or online) meetings to be held in line with the site-visit plan, the units to be visited, the interviews to be held, the list of faculty members and students who are requested to participate in the interviews and the process.). Necessary changes and arrangements in the program are made if needed.
- Inform the institution that the members to be interviewed during the online visit should attend the online meetings individually from their own computers.

Day 1

Morning

- Presentation of the Dean about the institution: **The presentation is made on the basis of the institution's SER regarding status of the institution against the standards.** Deputy Deans, Education Coordinators, SER Coordinator, SER preparation committee members, Chief Physician, Faculty Secretary, Faculty Board faculty members and students are expected to attend the presentation. The head of the site-visit team should have already informed the dean about the duration and content of the presentation. (Recommended duration is 45 minutes)
- Interview with the education administration (SER coordinator/ those responsible for education management/ Coordinators / Vice- dean) (Recommended duration is 2 hours)

Afternoon

- Meeting with Student Affairs Officers (Recommended duration is 30 minutes)
- Tour of the faculty education environments (Lecture halls, PBL Rooms, Basic Science Laboratories, Computer laboratories, Clinical Skills Laboratories, Library, Clinical education environments, social areas, etc.) (Recommended duration is 1-2 hour) (if the visit is online, 30-minute video display)
- Site-visit team meeting (Recommended duration is 1-2 hours)

At the meeting held on the evening of the first site-visit day, the members of the site-visit team share their grades and evaluations (via the evaluation chart) with each other. In the light of the first day's evaluations, the face-to-face visit program is reviewed, the work to be done and the additional documents to be requested, if any, are determined.

Day 2

Morning

- Visiting the Chief Physician and training environments at the hospital (Recommended duration is 1 hour). This visit is particularly valuable in evaluation of clinical training settings.
- Meeting with faculty members from different departments and different academic levels in two different sessions (15 faculty members in each) (recommended duration is 1 hour 30 minutes for each meeting)

Afternoon

- Meeting with students from pre-clinical years (15 students-recommended duration is 1 hour 15 minutes)
- Meeting with students from clinical years (15 students-recommended duration is 1 hour 15 minutes)
- If necessary, visiting the education environments in the company of the relevant and responsible persons – Areas on which information from the online visit is not sufficient (Lecture halls, PBL Rooms, Science Laboratories, Computer laboratories, Clinical skills lab, Library, Clinical training environments, social areas, etc.) (recommended duration is 1 hour)
- Site-visit team meeting (recommended duration is 2 hours 30 minutes)

Day 3

Morning

- Meeting with department chairs (5 department chairs from each of the basic, medical and surgical sciences) (recommended duration is 1 hour 30 minutes)
- Meeting with student representatives (recommended duration is 1 hour)
- Meeting with the representatives of the coordinators committee / curriculum committee / program evaluation committee (When necessary - 15 participants - recommended duration is 1 hour)
- Meeting with the residents (recommended duration is 45 minutes)
- Meeting with the education administration (observations during the visit are summarized, information is given about the exit meeting and the process. Recommended duration is 1 hour)

Day 4

Morning

Site-visit team meeting: Exit meeting and exit report preparations are made, and the institution's status against the standards is evaluated using the evaluation chart.

Noon

Exit meeting with broad participation, in which the Dean, Deputy Deans, Education Coordinators, SER coordinator, Faculty Board members, faculty members and students will participate. In this meeting, the exit report prepared by the site-visit team is verbally summarized to the faculty by the head of the team and a hard copy of the form signed by the site- visit team members is sent to the Dean. (Recommended duration is 1 hour).

Note: The head of the site-visit team should state that the exit report is an objective summary of the observations made, that the accreditation decision will be made by international accreditation board and that a comprehensive institutional site- visit evaluation report will be sent to the institution later, which describes the strengths and weaknesses of the institution and suggestions for improvement in detail.

3. Post-visit activities

- The site-visit team prepares the institution site-visit evaluation report based on the observations and information gathered during the visit and sends it to the TEPDAD secretariat by e-mail within 10 days at the latest, and the head of the team sends the signed report to by mail. TEPDAD president sends the institution site-visit report to the Dean of the applicant institution within 15 days to correct any possible errors in the report. In case of any errors in the report, an evaluation is made by communicating with the site-visit team members. Reports for each institution are evaluated by international accreditation board at the first upcoming meeting, a decision is made for accreditation and the institution will be informed about the decision.

RECOMMENDATIONS FOR SITE-VISIT ACTIVITIES

General recommendations

Site-visit team members visit the faculty for the purpose of external evaluation, not supervision. The purpose of external evaluation is to identify the strengths and aspects of the institution that need to be developed according to WFME Global Standards for Basic Medical Education, and to give comprehensive feedback to the institution. Therefore, what is expected from the team members during the site-visit; is to try to understand the dynamics of the institution and the ongoing training program with a friendly, well-intentioned approach. **During the site-visit, team members should not be in an inquiring and controlling attitude.**

The site-visit team members should carry out all their work in a team approach, should not share their observations and comments about the institution with anyone, except for the team meeting, and should act within the framework of TEPDAD's ethical rules.

It is particularly important to be present as a team in all observations and interviews. Some members may have more experience and knowledge of certain standards. This should be used to strengthen teamwork

dynamics, and all team members should be able to observe the status of the institution regarding all standards and express their views in team meetings.

Resommendations for observation and interviews

In order to facilitate the observations and interviews to be made during the visit, suggested sample questions prepared by the International Accreditation Board are given in the following pages. The general questions we suggested to be asked by the team during the visit are arranged according to the flow of the interviews. In addition, a format was created in which questions specific to the institution can be written before the visit and notes can be taken during the interviews. These tools are prepared to increase the quality of the interviews and observations which will made during the site-visit.

In the online visit, before starting the meetings, the participants should be informed that **no recordings will be taken during the interviews.**

In face-to-face visits, care should be taken to enter the meeting place together with the participants. Being ready in a room beforehand or entering the meeting place as a team later on may negatively affect the atmosphere of the meeting. Being in front of the door of the interview room five minutes before the scheduled time and waiting for the participant group, greeting them and entering the interview room together will serve to create a positive environment from the beginning.

Be sure to start the interview by introducing yourself, then ask the participants to briefly introduce themselves. After the participants introduced themselves, explain how long the meeting will last, its purpose and how you plan the flow, and how you expect the participating group members to take the floor.

During the interviews, we recommend that the questions are asked completely unbiased and curious, that the answers are deepened with open questions and examples from the institution's SER, without making any comments on the answers, and that misunderstandings are avoided by making a summary from time to time. Asking open-ended questions (questions that cannot be answered as yes/no or available/not available) will encourage discussion; It will enable the participants to give detailed information about their thoughts, observations and experiences.

While asking general questions to the group, we recommend to summarize the situation of the school related to the subject in the SER or explain the relevant standard first, and then ask your question to the whole group, Whem you get an answer, you may ask some questions like "Does anyone have a different

opinion on this subject?", "Can you explain it with examples?" to deepen the information. In face-to-face visits, it is recommended to provide a seating arrangement that allows communication, to make an eye contact with the person who answers the question, to make the participants feel that they are actively listened by mimics and head movements of the team members.

Remember that individuals may have different opinions in response to a question. In order to reveal such opinions, ask the group if there is someone who would like to add his/her opinions to this issue. Briefly summarizing all responses will correct any possible misunderstandings and allow the group to provide you with new information, if necessary. When summarising, use the language of those who express their opinions as much as possible and do not make any comments. Different groups may give different answers to similar questions. Do not mention about these differences in the interviews with statements such as "the ... group thinks differently from you" or "they claimed that this method was applied in the school". This information is important for evaluation only.

If the participants express their individual problems during the interviews, explain that this is not suitable for the purpose of the interview explained at the beginning, and end the conversation on personal problems.

Questions to be asked during the interviews can be shared among the team members, but it is absolutely necessary to make task sharing beforehand. If the tasks were not shared and the meeting is under the responsibility of a single person from your team, the responsible team member should return to the other team members at the end of the meeting and ask if they have any contribution. Team members should not interrupt each other with words and behaviors that would undermine the trust of the participants in the team.

At the end of the meeting, it would be appropriate to behave in the same way as at the beginning, to thank and leave the room together with the participants.

In the face-to-face meetings, create a list of participants, including participant information (such as Title, Name, Surname, Department, Class, etc.) to be attached to the institutional site-visit evaluation report. Add the place, date, start and end times of the meeting to the top of the list.

We recommend all team members to take notes during the interviews. These notes will make it easier for evaluation the institution, preparation of the exit report and institutional site-visit evaluation report.

Recommendations for exit report meeting

It is an online meeting where the Dean, Deputy Deans, Education Coordinators, SER coordinator and Faculty Board members will definitely attend, and students and faculty members will be invited. The main purpose of this meeting is to provide additional information to those identified in the interviews and observations made during the visit, and to correct misunderstandings.

After the visiting team has completed scheduled meetings, they should hold a preparatory meeting for the exit report and prepare the exit report text, a copy of which will be sent to the institution.

Whether the standards are met or not should not be mentioned in the exit report. Site-visit team, on the basis of the notes obtained from the observations and interviews, should express the "objective data" regarding the strengths and aspects that need improvement by referring to each title of the standards. If there is a misunderstanding, the participants should be allowed to express their opinions for correction.

In the exit report meeting, any statements or comments that can be associated with the institutional site-visit evaluation report and the accreditation decision to be made by International Accreditation Board-TEPDAD should not be used. It should be explained to the institution that this report is not related to the accreditation decision, but only for the purpose of obtaining additional information and correcting any possible misunderstandings.

Do not forget: The exit report should be verbally summarized to the institution, and a hard copy should be sent to the dean after the meeting. In fact, this report is the most important part of your site-visit report. The report section to be sent to the institution by the President of TEPDAD for the correction of material errors is the institutional site-visit evaluation report.

RECOMMENDATIONS FOR PREPARATION OF INSTITUTION SITE-VISIT EVALUATION REPORT

Team members should record and interpret data from observations and interviews on a daily basis, using the suggestions and tools provided in this guide. These observations should be discussed at the team meetings each day and the institutional site-visit evaluation report should be created step by step. At the end of the visit, the head of the site-visit team should gather the individual assessments of the team members and turn them into a single report.

Do not forget: If International Accreditation Board has made the appropriate decision to visit an institution, it is assumed that the the institution meets the basic standards based on the information given to the SER, or that some of them requires investigation during on-site evaluation.

Report content

Cover page (information on visited institution, names and signatures of the team members)

Section 1: Site-visit program (finalized form by the visiting team and SER coordinator)

Section 2: Evaluation chart used during the visit

Section 3: Exit report form (The form in which the data obtained from the observations and interviews are expressed without any comment)

Section 4: Institutional site- visit evaluation report (A report including information on whether the institution meets the standards, the institution’s strengths and weaknesses, and the recommendations of the site-visit team on the basis of obtained data from observations and interviews)

Section 5: Attachments

- Participant lists of the meetings
- Other information and documents that the site-visit team deems necessary.

This guide includes necessary forms and charts with explanations for all sections.

Evaluation of the site-visit

Feedback forms are included in this guide as a separate appendix. Give the feedback form for evaluation of site-visit team to the SER coordinator at the end of the visit and ask him/her to forward the completed form to the TEPDAD Secretariat within 10 days.

There is a form for team members to be completed in which the team members will express their opinions and thoughts about the site-visit process and other members of the team, Complete this form and send it to the TEPDAD Secretariat individually within 10 day

SUGGESTED SAMPLE QUESTIONS ACOORDING TO INTERNATIONAL SITE-VISIT FLOW***INTERVIEW WITH THE DEAN******INTERVIEW WITH EDUCATION ADMINISTRATION (SER COORDINATOR/ EDUCATION COORDINATORS / DEPUTY DEANS)*****1. AIMS AND OBJECTIVES****Institutional goals:**

While defining the institutional goals, have its social obligations been determined? In other words, have the components of social responsibility, social sensitivity and social reliability/accountability been taken into account? Has stakeholder participation been ensured in defining institutional goals? Is it shared with the faculty and the community?

Aims and objectives of the educational program:

When and how were they defined? Which stakeholders contributed to definition process?

How are the competencies that graduates should defined, are they compatible with UÇEP and TYYÇ?

How are the aims and objectives shared with the stakeholders and community? How are they used in the educational program?

How often are the aims and objectives updated?

Questions specific to the institution**2. EDUCATIONAL PROGRAMME*****The structure of the educational program:***

- Are there student-centered activities and self-learning opportunities in your program where students can actively participate in their education processes?
- How is the placement of the elective courses and independent study hours in your program? (Are there applications such as special study modules?)
- Are there educational activities that take place outside the university hospital? How are they structured?
- Are there any directives, application principles, etc. documents that define the operation of distance education applications in the program? Are these practices associated with the achievements of the training program? How is the distance education infrastructure, equipment and manpower? Is support provided to trainers and students? How?

The content of the educational program:

- Are common and important diseases of the country included in the curriculum? How?
- What do you think about the suitability of your education model and methods with your goals and objectives?
- How are basic and clinical science knowledge and skills covered in your program? Can you give examples?

- How are knowledge and skills in behavioral sciences, humanities in medicine, social sciences and ethics covered in your program? Can you give examples?
- How is the scientific method and evidence-based medicine practiced in your program? Can you give examples?
- What opportunities exist for teamwork skill acquisition?
- What applications are available to prepare students for post-graduation working conditions?
- Are projects or educational activities in which students can take social responsibility structured in the education program? Do all students participate in these activities?

Questions specific to the institution

3. ASSESSMENT OF STUDENTS

- What do you think about your assessment system?? What are the strengths and weaknesses of the assessment system in your school? What problems do you encounter in the application? What is being done or planned for solution of those problems?
- To what extent do you think your exams are compatible with your graduation goals? Can you give examples on the exam contents and methods?
- What studies are being carried out to develop zssessment practices?

Questions specific to the institution

4. STUDENTS

- What is the student capacity of your faculty of medicine? How did you determine student capacity? How did you share your views on this matter? (Dean specific question)
- Are the students nvolved in educational matters? What structures exist to ensure student representation?
- In what ways is communication with students maintained?
- What are the counseling services provided to students? How is it applied? Do you have plans for the development of the counselling system?
- What are your national and international exchange opportunities, how do the students benefit?
- Have students' roles and responsibilities been defined for the preclinical and clinical periods?

Questions specific to the institution

5. ACADEMIC STAFF

- What do you think about the suitability of the academic staff structure in your faculty with the education program? Do you have plans for the development of the academic staff structure? Do you have any problem with this? If so, how do you overcome? (Dean specific question)
- What kind of work do you do in order to determine and monitor the duties and responsibilities of the academic staff? What kind of method do you follow in allocating education and research service burden to faculty members in your faculty? (Dean specific question)
- What are your thoughts on the academic appointment and promotion criteria applied in your faculty?
- What is the participation rate in trainer training programs for faculty development? What are you doing to improve the quality of the programs and to encourage participation?
- What do you do to encourage continuous professional development for faculty members? (Dean specific question)

Questions specific to the institution

6. EDUCATIONAL RESOURCES

- What are your views on the provision and maintenance of educational tools and learning resources? Do some problems arise? How do you solve?
- Is the variety and number of patients sufficient for clinical training? What do you do when a suitable patient cannot be found?
- Do you encounter any problems while meeting your education needs in primary and secondary health care institutions outside the institution? How do you solve? (Dean specific question)
- Do you have problems in providing and maintaining educational tools and learning resources? (dean specific question)
- What are the main items in the education financing plan? How do you finance educational resources? (Dean specific question)
- What do you do about the safety of learning environments for students, patients and their relatives, personnel, and the needs of disabled students? (Dean specific question)

Questions specific to the institution

7. PROGRAM EVALUATION

- How do you evaluate your program? (from whom, what data is collected, how often do you collect data, by whom the data is analyzed, are the analysis results combined in a report)
- With whom do you share the evaluation results?
- How do you use the evaluation results to improve your program? Can you give an example of the decisions you made or the improvements you made?

- What are the problems you encounter in the evaluation process and the use of the results?

Questions specific to the institution

8. GOVERNANCE AND ADMINISTRATION

- Which of your experiences as a dean gives you an advantage? What are the most common problems you encounter in management processes? (Dean specific question)
- How are assignments made to the boards responsible for education in your faculty? Are there definitions/directives/regulations regarding job descriptions, durations, powers and responsibilities?
- What are your views on the function of the boards responsible for education? How are these boards managed and coordinated? If there are problems, how are they solved?
- What are your views on the technical and secretarial structure you provide to the education boards and commissions, faculty members and students in your faculty? If you have problems in this regard, what do you do to solve them?
- How is your system of documentation, recording and archive for decisions related to education? How are the authorities provided access to documents, in print or electronic media?
- What do you think about the cooperation between the dean's office, the chief physician of the training hospital and the administrators of the other units where education is carried out, and the teaching staff? Do you have any attempts to develop this cooperation?
- What are your thoughts on the structure of the Medical Education Department/unit and its contribution to your faculty?
- Do you have plans and strategies that you have created to ensure the continuation of education in extraordinary situations?

Questions specific to the institution

9. CONTINUOUS RENEWAL

- What are your future projects and plans regarding education (infrastructure, program, exams, opportunities, etc.)? What stage of this plan are you at?
- Are your projects compatible with your institutional goals and objectives?
- If obstacles arise in front of your projects and plans, what do you do for solution?

Questions specific to the institution

INTERVIEW WITH FACULTY MEMBERS FROM DIFFERENT DEPARTMENTS AND DIFFERENT LEVELS

1. AIMS AND OBJECTIVES

- What do you think about the faculty's aims and objectives and the competencies that students should have at graduation? What kind of a physician do you aim to train?
- What kind of studies are carried out in the faculty to determine the aims and objectives? Do you contribute to these studies?

Questions specific to the institution

2. EDUCATIONAL PROGRAMME

- How are the knowledge and skills of basic and clinical sciences included in your education program taught? Can you give some examples?
- How is the integration of basic science knowledge and clinical science knowledge ensured in your educational program?
- How are knowledge and skills in behavioral sciences, humanities in medicine, social sciences and ethics covered in your program? Do you have examples?
- How do you evaluate your faculty's education program regarding scientific method and evidence-based medicine practices?
- Are common and important diseases of the country sufficiently covered in your curriculum? Are there educational activities that take place outside the university hospital?
- Are there student-centered activities, self-learning opportunities, teamwork opportunities in your program where students can actively participate in their education processes?
- How is the distance education infrastructure, equipment and manpower? Is support provided to trainers and students? How?

Questions specific to the institution

3. ASSESSMENT OF STUDENTS

- Do you think that a student who has passed all the exams in your faculty has achieved their graduation competencies?
- In your opinion, are there any points in your exam regulations that need to be changed?
- What are your thoughts on your exam duties (preparing questions, supervising exams, evaluating results, etc.)?

Questions specific to the institution

4. STUDENTS

- Do you think the number of students in your faculty is suitable for the facilities and education program?
- Do you think students are actively involved in educational matters and decision making mechanisms?
Can you explain a little bit?
- Can students reach you easily? Do they benefit from your counseling? How can they benefit more?
- Are the roles and responsibilities of students implemented as defined in the relevant documents for preclinical and clinical periods?

Questions specific to the institution**5. ACADEMIC STAFF**

- Is there a balanced distribution of academic staff in departments and departments?
- Do you have problems in recruiting staff?
- What do you think about the academic appointment promotion criteria applied in your faculty?
- What method is followed in your faculty in apportioning the burden of education and research services to faculty members? Does this method work? Can you explain?
- How is the educational performance of faculty members evaluated in your faculty?
- How is the participation in the training programs organized to improve the educational skills of the faculty members? What is being done to improve the quality of the programs and encourage participation?
- Which professional development training did you last attend? Does your faculty support your participation in continuing professional development activities?

Questions specific to the institution**6. EDUCATIONAL RESOURCES**

- Are you satisfied with the educational resources and opportunities provided by the faculty? Can you explain a little bit about the points you find sufficient or insufficient?
- Do you have any problems in providing-maintaining educational tools and learning resources? How is it resolved?
- What are the strengths and weaknesses of your faculty in terms of educational resources and opportunities?
- Is the variety and number of patients sufficient for clinical training? What do you do when a suitable patient cannot be found?

Questions specific to the institution

7. PROGRAM EVALUATION

- Is your opinion requested for the implementation and improvement of the training? How? Are your suggestions being implemented?
- Do you have any information about the student feedback within the scope of the evaluation of the program? How? What is being done in this context?
- Have there been any changes in your educational program, courses and practices, and exams in the last few years considerin student and/or faculty feedback? Can you explain briefly?

Questions specific to the institution

8. GOVERNANCE AND ADMINISTRATION

- Where do you need to apply for a course change when you need permission for a meeting that overlaps with your course?
- Is there any sanction applied to the lecturer in your faculty who does not attend the lesson without an excuse?
- What do you think about the adequacy of the technical and secretarial support provided to the education boards and commissions, faculty members and students in your faculty?

Questions specific to the institution

9. CONTINUOUS RENEWAL

- What is being done in your faculty to renew and improve education? Do you think it is sufficient?
- Do you contribute to the activities for renewal and improvement of education in your faculty?

Questions specific to the institution

INTERVIEW WITH STUDENTS FROM DIFFERENT LEVELS

1.AIMS AND OBJECTIVES

- They should be asked about the level of awareness about the institutional and educational aims and objectives, whether the education in the faculty is in line with these aims and objectives, and they should be asked to give examples.

Questions specific to the institution

2. EDUCATIONAL PROGRAMME

- What kind of a physician do you dream to be?
- What kind of a physician will you be when you graduate from this faculty? In which areas is the educational program better and in which areas is it weaker? Why do you think so? Can you explain briefly?
- Your faculty expects you to have some competencies at graduation like and Does the educational program train you for these competencies?
- Do you have training practices where you can gain experience in teamwork?
- Are there any educational activities outside the university hospital? If so, what are your views on these events?
- What are your thoughts on skills training, clinical training, free time, scientific research training and opportunities, ethics and social sciences training? Can you give an example?
- For integration of the educational programntegrasyona yönelik;
 - ✓ Do you have learning opportunities to link the knowledge you have gained in different disciplines in the same period?
 - ✓ Do you have opportunities to learn how to use the basic science knowledge you have acquired in practice? (For students from preclinical period)
 - ✓ Do you have learning opportunities in clinical period to remember/use the basic science knowledge you acquired during your preclinical years? (For students from clinical period)
- How is the distance education infrastructure, equipment and manpower? Is support provided to trainers and students? How?
- Do you participate in social responsibility projects or events? Can you give an example?

Questions specific to the institution

3.ASSESSMENT OF STUDENTS

- Do you think that a student who has passed all the exams in the faculty has reached the graduation competencies of the educational program?
- Where do you get your information about exams and your preparation strategies?
- What are the points in your exam system that need to be changed in your opinion?
- How do you prepare for exams?
- Do exams support your learning process? (giving booklets, giving answers, question discussion sessions, etc.)
- Can the exams you take distinguish between those who know and those who do not?
- Are formerly used questions asked in exams?
- How do you learn about the exam results?
- How do you make your objections to the exams? Can you get any answer to your objection?

Questions specific to the institution**4.STUDENTS**

- Do you think the number of students in your faculty is suitable for the facilities and education program?
- Have the roles and responsibilities of students in the preclinical and clinical years been defined in your faculty?
- Do you think students are involved in decision mechanisms related to educational matters? Can you explain?
- What do you think about the communication environment and possibilities of the faculty administration and student affairs?
- What do you think about the adequacy of the social, cultural and sportive opportunities provided to you?
- What do you think about the counseling system? Are you taking any advantage of this system?
- What do you think about the national and international exchange opportunities and usage rate in your faculty?

Questions specific to the institution**5.ACADEMIC STAFF**

There is no suggested sample question for students

Questions specific to the institution

6. EDUCATIONAL RESOURCES

- Are you satisfied with the educational resources and opportunities provided by the faculty? Could you elaborate on the points that you find sufficient or insufficient?

Questions specific to the institution

7. PROGRAM EVALUATION

- Have there been any changes in the program, courses and practices, exams in the last few years in your education? Do you know why? Can you explain briefly?
- Are your opinions, feedback and evaluations requested for the implementation and improvement of the training? How? Are your suggestions taken into account?

Questions specific to the institution

9. CONTINUOUS RENEWAL

- Do you think the efforts to renew and improve the education in your faculty are sufficient? Why?
- If you were in the education administration, what would you change about education in your faculty?

Questions specific to the institution

INTERVIEW WITH STUDENT AFFAIRS OFFICERS

3.ASSESSMENT OF STUDENTS

- What are your responsibilities in the organization of the exams?
- How are the exams evaluated? Are psychometric exam analyzes done?

Questions specific to the institution

4.STUDENTS

- What duties and responsibilities do you have? What are the problems you experience while doing these?
- Do you think the number of students in your faculty is appropriate with the facilities and infrastructure?
- Do you think students have a power in decision mechanisms related to educational matters? Can you explain a little bit?

Questions specific to the institution

In the interview with research assistants, an effort should be made to understand their "role, contribution and participation in education".

II. INSTITUTIONAL SITE-VISIT EVALUATION REPORT GUIDE

Explanations

The site-visit team (composed of 5 members assigned by TEPDAD) is expected to prepare an Institutional Site-Visit Evaluation Report using this guide. Team members should record and interpret data they gathered on a daily basis referring to suggestions and tools presented in the institutional site-visit evaluation report guide. Data from observations and interviews should be discussed at the team meeting every day and the institutional site-visit evaluation report should be created step by step.

At the end of the visit, the head of the team should ensure that a joint report is prepared, taking into account individual evaluations of the team members.

Report content

Cover page (information on visited institution, names and signatures of the team members)

Section 1: Site-visit program (finalized form by the visiting team and SER coordinator)

Section 2: Evaluation chart used during the visit

Section 3: Exit report form (The form in which the data obtained from the observations and interviews are expressed without any comment)

Section 4: Institutional site-visit evaluation form (A report form including information on whether the institution meets the standards, the institution's strengths and weaknesses, and the recommendations of the site-visit team on the basis of obtained data from observations and interviews)

Section 5: Attachments

- Participant lists of the meetings
- Other information and documents that the site-visit team deems necessary.

INSTITUTIONAL SITE-VISIT EVALUATION FORM

Evaluated institution :

Site-visit date :

The report date :

Members	INTERNATIONAL ACCREDITATION BOARD	BASIC SCIENCES	MEDICAL SCIENCES	SURGICAL SCIENCES	MEDUCAL EDUCATION	MEDICAL STUDENT
Name Family Name						
Signature						

**This is the first page of the report to be prepared by the site-visit team.*

EVALUATION CHART TO BE USED DURING INSTITUTIONAL SITE-VISIT

On the following pages, a chart is provided on which you can record the impressions you have gained from your daily observations and interviews. It is recommended for team members to fill in the chart all together by sharing opininons in the team meetings. Once completed, this chart will contain data that will form the skeleton of your institutional site-visit evaluation report.

This chart, which was prepared during the visit, will be used by International Accreditation Board to make a decision on the accreditation status of the institution, and will not be shared with the institution in any way.

The first column of the table includes the headings of the standards. In the following columns, respectively;

Prediction: This is the column given for you to write your preliminary estimate while examining the SER of the Institution and its attachments before the site-visit. Please come to the first site-visit team meeting with SER evaluation table filled in.

International Accreditation Board: This column is for the evaluation results obtained after the discussion of the SER of the institution in the International Accreditation Boardpanel. You do not need to fill this column in. In the team meeting before the site-visit, the International Accreditation Board member in the team will inform the other members of the team about the institution’s SER evaluation scores given by the International Accreditation Board panel and the topics and the questions that International Accreditation Board specifically asked for evaluation during the site-visit.

Joint decision: This is the decision before the site-visit to be made by the site-visit team considering the prediction and the International Accreditation Board decision.

1st day: it is the expected evaluation that will occur after the observations and interviews during the online visit. Team members make this assessment at the end of the online visit, discussing their rationale, at the visiting team meeting. This assessment is, in a sense, a temporary and changeable assessment. Fill in the “Evaluation chart” presened below using the evaluation marks.

2nd Day-FINAL DECISION: It was created for the members to express their final assessment of the institution regarding its status against the standards.This column must be completed after the end of the face-to-face visit. Fill in the “Evaluation chart” presented below using the evaluation marks

If there is a difference of opinion in the visiting team that will affect the accreditation of the program in this final decision, it should be discussed together with the reasons and justifications. The team leader will bring together the forms and explanations and prepare the "Institutional Site-Visit Evaluation Report".

Notes and explanations: We recommend the members of the team to use this column both to shed light on the discussions made with the team members during the visit, and to take notes and add explanations to the feedback that should be included in the institutional site-visit evaluation report prepared.

The evaluation chart to be used during the site-visit will be finalized by the chairman at the end of the visit, and the common chart that will cover the final decision will form the second part of the Visit Report.

Criteria To Be Used in Evaluation			
Score	Meaning	Code	Explanation
1	Unmet	U	SER: The level to be marked in the absence of any assessment of meeting the standard in the relevant part of the SER, misinterpretation and definition of practices, lack of supporting documents / evidence (not defined and written process, definition invalid, no document / evidence)
			Site-visit: The level to be marked if there is no observation or interview during the visit for any reason, if the practices are misinterpreted or if there is no supporting observation / interview / document / evidence.
2	Partially met major	PM	SER: The level to be marked when some definitions/applications/documents/evidence regarding meeting the standard in the relevant part of the SER exist but are not at a level to meet the standard (there are significant deficiencies in the definition of basic processes, evidence/documents and/or implementation)
			Site-visit: The level to be marked when the processes required by the standard exist but are far from being defined as comprehensive, defined, written and measurable, or if the standard is partially met and there is no guarantee that the quality of the program will not deteriorate until the next general evaluation.
3	Acceptable (Partially met minor)	A	SER: It is the level to be marked in the relevant section of the SER, where there are enough definitions / practices / documents / evidence regarding meeting the standard, but there are points that are recommended to be developed (whether the implementation is systematic, whether there is enough time to see the results, the state of institutionalization, etc.).
			Site-visit: The level to be marked in cases where the practices related to the standard are defined as comprehensive, written and measurable, and it is understood that the standard has been met with observations, interviews and documents, but there are some deficiencies in terms of quality.
4	Met	M	SER: It is the level to be marked when the definitions / practices / documents / evidence of meeting the standard in the relevant section of the SER are found completely.
			Site-visit: The level to be marked when there are complete definitions / practices / documents / evidence of meeting the standard during the visit.
5	Good practice	GP	SER: It is an exemplary level at which definitions / practices / documents / evidence regarding meeting the standard in the relevant section of the SER are obtained with a comprehensive and systematic approach.

			<p>Site-visit: The level to be marked if no qualitative deficiencies are observed. It means that all processes at an exemplary level have been defined and under control, documents are sufficient in terms of quantity and quality, observations and interviews support a systematic application.</p>
--	--	--	---

EVALUATION CHART TO BE USED BY SITE-VISIT TEAM MEMBERS DURING THE INSTITUTIONAL SITE-VISIT

*will be included in the exit report **will be included in Institutional site-visit evaluation report

1.MISSION AND OUTCOMES	PRE-VISIT SER EVALUATION				EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendations **
	Prediction of visit team members				1 st day	2 nd day	3 rd day Final decision	Status of meeting the standard **				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ								
1.1. Mission												
The medical school must ;												
BS.1.1.1. State its mission												
BS.1.1.2. Make it known to its constituency and the health sector it serves.												
in its mission outline the aims and the educational strategy resulting in a medical doctor												
BS.1.1.3. Competent at a basic level												
BS.1.1.4. With an appropriate foundation for future career in any branch of medicine												
BS.1.1.5. With an												

appropriate foundation for future career in any branch of medicine																			
BS.1.1.6. Prepared and ready for postgraduate medical education.																			
BS.1.1.7. Committed to life-long learning																			
BS.1.1.8. Consider that the mission encompasses the health needs of the community, the needs of the health care delivery system and other aspects of social accountability.																			
<i>The medical school should ensure that the mission encompasses</i>																			
Q 1.1.1. Medical research attainment.																			
Q 1.1.2. Aspects of global health																			

1.2. Institutional autonomy and academic freedom																			
The medical school must have institutional autonomy to formulate and implement policies for which its faculty/academic staff and administration are responsible, especially regarding,																			
BS.1.2.1. Design of the curriculum.																			
BS.1.2.2. Use of the allocated resources necessary for implementation of the curriculum																			

<i>The medical school should ensure academic freedom for its staff and students</i>													
Q 1.2.1. <i>In addressing the actual curriculum.</i>													
Q 1.2.2. <i>In exploring the use of new research results to illustrate specific subjects without expanding the curriculum.</i>													
1.3. Educational Outcomes													
The medical school must													
BS.1.3.1. Their achievements at a basic level regarding knowledge, skills, and attitudes													
BS.1.3.2. Appropriate foundation for future career in any branch of medicine													
BS.1.3.3. Their future roles in the health sector													
BS.1.3.4. Their subsequent postgraduate training													
BS.1.3.5. Their commitment to and skills in life-long learning													
BS.1.3.6. The health needs of the community, the needs of the health care delivery system and other													

aspects of social accountability																			
BS.1.3.7. Ensure appropriate student conduct with respect to fellow students, faculty members, other health care personnel, patients and their relatives.																			
BS.1.3.8. Make the intended educational outcomes publicly known																			
<i>The medical school should</i>																			
Q 1.3.1. Specify and co-ordinate the linkage of acquired outcomes by graduation with acquired outcomes in postgraduate training.																			
Q 1.3.2. Specify intended outcomes of student engagement in medical research.																			
Q 1.3.3. Draw attention to global health related intended outcomes.																			
1.4. Participation in formulation of mission and outcomes																			
<i>The medical school must</i>																			
BS.1.4.1. Ensure that its principal stakeholders																			

participate in formulating the mission and intended educational outcomes.																	
<i>The medical school should</i>																	
Q 1.4.1. <i>Ensure that the formulation of its mission and intended educational outcomes is based also on input from other stakeholders.</i>																	

2. EDUCATIONAL PROGRAMME	PRE-VISIT SER EVALUATION				EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendati ons**
	Prediction of visit team members				1st day	2nd day	3rd day Final decision **	Status of meeting the standard **				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ								
2.1 The framework of the programme												
The medical school must ;												
BS.2.1.1. Define the overall curriculum												
BS.2.1.2. Use a curriculum and instructional/learning methods that stimulate, prepare and support students to take responsibility for their learning process.												
BS.2.1.3. Ensure that the curriculum is delivered in accordance with principles of equality.												
<i>The medical school should</i>												
Q 2.1.1. Ensure that the curriculum prepares the students for life-long learning.												
2.2. Scientific Method												
The Medical school must throughout the curriculum teach;												

BS. 2.4.2. Social sciences.																			
BS. 2.4.3. Medical ethics.																			
BS. 2.4.4. Medical jurisprudence.																			
<i>The medical school should in the curriculum adjust and modify the contributions of the behavioural and social sciences as well as medical ethics and medical jurisprudence to</i>																			
Q 2.4.1. Scientific, technological and clinical developments.																			
Q 2.4.2. Current and anticipated needs of the society and the health care system.																			
Q 2.4.3. Changing demographic and cultural contexts.																			
2.5 Clinical Sciences and Skills																			
The medical school must in the curriculum identify and incorporate the contributions of the clinical sciences to ensure that students																			
BS. 2.5.1. Acquire sufficient knowledge and clinical and professional skills to assume appropriate responsibility after graduation.																			
BS. 2.5.2. Spend a reasonable part of the programme in planned contact with patients in relevant clinical settings.																			
BS. 2.5.3. Experience health promotion and preventive medicine.																			
BS. 2.5.4. The medical school must specify the amount of time spent in training in major clinical disciplines.																			

<p>Q 2.6.1. <i>Ensure horizontal integration of associated sciences, disciplines and subjects.</i></p>														
<p>Q 2.6.2. <i>Ensure vertical integration of the clinical sciences with the basic biomedical and the behavioural and social sciences.</i></p>														
<p>Q 2.6.3. <i>Allow optional (elective) content and define the balance between the core and optional content as part of the educational programme.</i></p>														

education or practice after graduation.														
<i>The medical school should ensure that the curriculum committee</i>														
Q 2.8.1. <i>Seeks input from the environment in which graduates will be expected to work, and modifies the programme accordingly.</i>														
Q 2.8.2. <i>Considers programme modification in response to opinions in the community and society.</i>														

3. ASSESSMENT OF STUDENTS	PRE-VISIT SER EVALUATION						EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendations **
	Prediction of visit team members				Int. Accr. Board	Joint decision	1st day	2nd day	3rd day Final decision* *	Status of meeting the standard **				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
3.1. Assessment methods														
The medical school must														
BS.3.1.1. Define, state and publish the principles, methods and practices used for assessment of its students, including the criteria for setting pass marks, grade boundaries and number of allowed retakes														
BS.3.1.2. Ensure that assessments cover knowledge, skills and attitudes														
BS.3.1.3. Use a wide range of assessment methods and formats according to their “assessment utility”.														
BS.3.1.4. Ensure that methods and results of assessments avoid conflicts of interest														
BS.3.1.5. Ensure that assessments are open to														

scrutiny by external expertise																			
BS.3.1.6. Use a system of appeal of assessment results.																			
<i>The medical school should</i>																			
Q 3.1.1. Evaluate and document the reliability and validity of assessment methods.																			
Q 3.1.2. Incorporate new assessment methods where appropriate																			
Q 3.1.3. Encourage the use of external examiners.																			
3.2 Relation between Assessment and Learning																			
The medical school must use assessment principles, methods and practices that																			
BS.3.2.1. Are clearly compatible with intended educational outcomes and instructional methods.																			
BS.3.2.2. Ensure that the intended educational outcomes are met by the students.																			
BS.3.2.3. Promote student learning.																			
BS.3.2.4. Provide an appropriate balance of formative and summative assessment to guide both learning and decisions about academic progress.																			

<i>The medical school should</i>														
Q 3.2.1. Adjust the number and nature of examinations of curricular elements to encourage both acquisition of the knowledge base and integrated learning.														
Q 3.2.2. Ensure timely, specific, constructive and fair feedback to students on basis of assessment results														

4.STUDENTS	PRE-VISIT SER EVALUATION						EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendation s**
	Prediction of visit team members				Int. Accr. Board	Joint decision	1st day	2nd day	3rd day Final decision* *	Status of meeting the standard **				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
4.1. Admission Policy and Selection														
Medical school must;														
BS.4.1.1. Formulate and implement an admission policy based on principles of objectivity, including a clear statement on the process of selection of students.														
BS.4.1.2. Have a policy and implement a practice for admission of disabled students.														
BS.4.1.3. Have a policy and implement a practice for transfer of students from other national or international programmes and institutions.														
<i>The medical school should</i>														
Q 4.1.1. State the relationship between selection and the mission of the school, the educational programme and desired qualities of graduates.														

support.																		
BS.4.3.4. Ensure confidentiality in relation to counselling and support																		
<i>The medical school should provide academic counselling that</i>																		
Q 4.3.1. <i>Is based on monitoring of student progress.</i>																		
Q 4.3.2. <i>Includes career guidance and planning.</i>																		
4.4. Student Representation																		
The medical school must formulate and implement a policy on student representation and appropriate participation in																		
BS.4.4.1. Mission statement																		
BS.4.4.2. Design of the programme																		
BS.4.4.3. Management of the programme.																		
BS.4.4.4. Evaluation of the programme																		
BS.4.4.5. Other matters relevant to students																		

5. ACADEMIC STAFF/FACULTY	PRE-VISIT SER EVALUATION						EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendations**
	Prediction of visit team members				Int. Accr. Board	Joint decision	1st day	2nd day	3rd day Final decision**	Status of meeting the standard**				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
5.1. Recruitment and Selection Policy														
The medical school must formulate and implement a staff recruitment and selection policy which														
BS.5.1.1. Outline the type, responsibilities and balance of the academic staff/faculty of the basic biomedical sciences, the behavioural and social sciences and the clinical sciences required to deliver the curriculum adequately, including the balance between medical and non-medical academic staff, the														

balance between full-time and part-time academic staff, and the balance between academic and non-academic staff.																			
BS.5.1.2. Address criteria for scientific, educational and clinical merit, including the balance between teaching, research and service functions.																			
BS.5.1.3. Specify and monitor the responsibilities of its academic staff/faculty of the basic biomedical sciences, the behavioural and social sciences and the clinical sciences																			
<i>The medical school should in its policy for staff recruitment and selection take into account criteria such as</i>																			
Q.5.1.1. Relationship to its mission, including significant local issues																			
Q.5.1.2. Economic considerations.																			
5.2. Staff Activity and Staff Development																			
The medical school must formulate and implement a staff activity and development policy which																			
BS.5.2.1. Allow a balance of capacity between teaching, research and																			

service functions																	
BS.5.2.2. Ensure recognition of meritorious academic activities, with appropriate emphasis on teaching, research and service qualifications																	
BS.5.2.3. Ensure that clinical service functions and research are used in teaching and learning																	
BS.5.2.4. Ensure sufficient knowledge by individual staff members of the total curriculum																	
BS.5.2.5. Include teacher training, development, support and appraisal																	
<i>The medical school should</i>																	
Q 5.2.1. Take into account teacher-student ratios relevant to the various curricular components.																	
Q 5.2.2. Design and implement a staff promotion policy.																	
	PRE-VISIT SER EVALUATION						EVALUATION OF INSTITUTION				Explanation	Strengths *, **		Recommendations**			

6. EDUCATIONAL RESOURCES	Prediction of visit team members				Int. Accr. Board	Joint decision	1 st day	2 nd day	3 rd day Final decision**	Status of meeting the standard**			Areas that need improvement *, **	
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
6.1. Physical Facilities														
The medical school must ;														
BS.6.1.1 Have sufficient physical facilities for staff and students to ensure that the curriculum can be delivered adequately.														
BS.6.1.2. Ensure a learning environment, which is safe for staff, students, patients and their relatives.														
<i>The medical school should;</i>														
QS.6.1.1. <i>Improve the learning environment by regularly updating and modifying or extending the physical facilities to match developments in educational practices.</i>														
6.2. Clinical Training Resources														
The medical school must ensure necessary resources for giving the students adequate clinical experience, including sufficient														
BS.6.2.1. Number and categories of patients														
BS.6.2.2. Clinical training facilities														
BS.6.2.3. Supervision of														

their clinical practice																			
Medical school <i>should</i>;																			
DS.6.2.1. Evaluate, adapt and improve the facilities for clinical training to meet the needs of the population it serves.																			
6.3. Information Technology																			
The medical school must																			
BS.6.3.1. Formulate and implement a policy which addresses effective and ethical use and evaluation of appropriate information and communication technology.																			
BS.6.3.2. Ensure access to web-based or other electronic media																			
<i>The medical school should enable teachers and students to use existing and exploit appropriate new information and communication technology for</i>																			
Q.6.3.1. Independent learning																			
Q.6.3.2. Accessing information																			
Q.6.3.3. Managing patients																			
Q.6.3.4. Working in health care delivery systems																			
Q.6.3.5. Optimise student access to relevant patient data and health care information systems																			
6.4. Medical Research and Scholarship																			

The medical school must													
BS.6.4.1. Use medical research and scholarship as a basis for the educational curriculum													
BS.6.4.2. Formulate and implement a policy that fosters the relationship between medical research and education													
BS.6.4.3. Describe the research facilities and priorities at the institution													
<i>The medical school should ensure that interaction between medical research and education</i>													
Q.6.4.1. Influences current teaching													
Q.6.4.2. Encourages and prepares students to engage in medical research and development													
6.5. Educational Expertise													
The medical school must													
BS.6.5.1. Have access to educational expertise where required													
BS.6.5.2. Formulate and implement a policy on the use of educational expertise in curriculum development													
BS.6.5.3. Development of teaching and assessment methods													
<i>The medical school should</i>													

<p>Q.6.5.1. Demonstrate evidence of the use of in-house or external educational expertise in staff development.</p>																			
<p>Q.6.5.2. Pay attention to current expertise in educational evaluation and in research in the discipline of medical education</p>																			
<p>Q.6.5.3. Allow staff to pursue educational research interest</p>																			
<p>6.6. Educational Exchanges</p>																			
<p>The medical school must</p>																			
<p>BS.6.6.1. National and international collaboration with other educational institutions, including staff and student mobility.</p>																			

7. PROGRAMME EVALUATION	PRE-VISIT SER EVALUATION					EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendations**	
	Prediction of visit team members				Int. Accr. Board	Joint decision	1 st day	2 nd day	3 rd day Final decision**					Status of meeting the standar d**
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
7.1. Mechanisms for Programme Monitoring and Evaluation														
The medical school must														
BS.7.1.1. Have a programme of routine curriculum monitoring of processes and outcomes														
BS.7.1.2. Establish and apply a mechanism for programme evaluation that addresses the curriculum and its main components														
BS.7.1.3. Establish and apply a mechanism for programme evaluation that addresses student progress														
BS.7.1.4. Establish and apply a mechanism for programme evaluation that identifies and addresses concerns														
BS.7.1.5. Ensure that relevant results of														

evaluation influence the curriculum																			
<i>The Medical School should periodically evaluate the programme by comprehensively addressing</i>																			
Q.7.1.1. The context of the educational process																			
Q.7.1.2. The specific components of the curriculum																			
Q.7.1.3. The long-term acquired outcomes																			
Q.7.1.4. Its social accountability																			
7.2. Teacher and Student Feedback																			
The Medical school must																			
BS.7.2.1. Systematically seek, analyse and respond to teacher and student feedback																			
<i>The Medical School should</i>																			
Q.7.2.1 Use feedback results for programme development																			
7.3. Performance of Students and Graduates																			
The medical school must analyse performance of cohorts of students and graduates in relation to																			
BS.7.3.1 Mission and intended educational outcomes																			
BS.7.3.2 Curriculum.																			
BS.7.3.3 Provision of resources																			
<i>The Medical School should analyse performance of cohorts of students and graduates in relation to student</i>																			

8. GOVERNANCE AND ADMINISTRATION	PRE-VISIT SER EVALUATION				EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendations**
	Prediction of visit team members				1 st day	2 nd day	3 rd day Final decision**	Status of meeting the standar d**				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ								
8.1. Governance												
Medical school must;												
BS.8.1.1. Define its governance structures and functions including their relationships within the university												
<i>The Medical School should in its governance structures set out the committee structure, and reflect representation from</i>												
Q.8.1.1 Principal stakeholders.												
Q.8.1.2 Other stakeholders.												
Q.8.1.3 The medical school should ensure transparency of the work of governance and its decisions												
8.2. Academic Leadership												
The medical school must												
BS.8.2.1 Describe the responsibilities of its academic leadership for definition and management												

9. CONTINUOUS RENEWAL	PRE-VISIT SER EVALUATION				EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendations**
	Prediction of visit team members				1 st day	2 nd day	3 rd day Final decision**	Status of meeting the standard**				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ					Int. Accr. Board	Joint decision		
The medical school must as a dynamic and socially accountable institution												
BS.9.0.1. Initiate procedures for regularly reviewing and updating the process, structure, content, outcomes/competencies, assessment and learning environment of the programme.												
BS.9.0.2. Rectify documented deficiencies.												
BS.9.0.3. Allocate resources for continuous renewal.												
<i>The medical school should</i>												
Q.9.0.1. Base the process of renewal on prospective studies and analyses and on results of local evaluation and the medical education literature.												
Q.9.0.2. Ensure that the process of renewal and												

<p><i>biomedical, clinical, behavioural and social sciences, changes in the demographic profile and health/disease pattern of the population, and socioeconomic and cultural conditions. The adjustment would ensure that new relevant knowledge, concepts and methods are included and outdated ones discarded.</i></p>													
<p>Q.9.0.7. <i>Development of assessment principles, and the methods and the number of examinations according to changes in intended educational outcomes and instructional methods.</i></p>													
<p>Q.9.0.8. <i>Adaptation of student recruitment policy, selection methods and student intake to changing expectations and circumstances, human resource needs, changes in the premedical education system and the requirements of the educational programme.</i></p>													
<p>Q.9.0.9. <i>Adaptation of academic staff recruitment</i></p>													

<i>and development policy according to changing needs.</i>														
Q.9.0.10. <i>Updating of educational resources according to changing needs, i.e. the student intake, size and profile of academic staff, and the educational programme</i>														
Q.9.0.11. <i>Refinement of the process of programme monitoring and evaluation.</i>														
Q.9.0.12. <i>Development of the organisational structure and of governance and management to cope with changing circumstances and needs and, over time, accommodating the interests of the different groups of stakeholders</i>														

..... UNIVERSITY FACULTY OF MEDICINE EXIT REPORT FORM

It is the form in which the status of the institution against the standards in terms of strengths and Areas that need improvement. Separate pages should be used for each title, and every standard should be mentioned. This form will be used as the third part of the visit report.

	Strengths	Areas that need improvement
1.Aims and Objectives		
Standards		
2.Structure and content of the educational program		
Standards		
3.Assessment of students		
Standards		
4.Students		
Standards		
5.Program evaluation		
Standards		
6.Academic staff		
S Standards		
7. Infrastructure and opportunities		
Standards		
8. Organization, Management and Execution		
Standards		
9. Continuous renewal and improvement		
Standards		

SIGNATURES

..... UNIVERSITY FACULTY OF MEDICINE END OF VISIT EVALUATION FORM

It is the form in which the status of meeting the standards of the institution and the recommendations of the visit team are expressed according to the data obtained from the observations and interviews at the end of the visit. Separate pages should be used for each title, and every standard should be mentioned. This form will be used as the fourth part of the visit report.

	Status of meeting the standard	Strengths	Areas that need improvement
1.Aims and Objectives			
Standards			
2.Eğitim Programı Yapısı ve İçeriği			
Standards			
3.Assessment of students			
Standards			
4.Students			
Standards			
5.Program evaluation			
Standards			
6.Ackademic staff			
Standards			
7. Infrastructure and opportunities			
Standards			
8. Organization, Management and Execution			
Standards			
9. Continuous renewal and improvement			
Standards			

SIGNATURES

LIST OF WORKS AND REQUIREMENTS TO BE DONE BY THE APPLICANT INSTITUTION

1. Contacting the institutions of the site-visit team members and sending invitation letters (expenses covered by the inviting institution)
2. Arranging the accommodation (As the Visit Team is planned to work at night, if possible, a meeting room with internet access should be preferred in the accommodation, a place close to the campus should be preferred)
3. Contacting team members and agreeing on transportation details (organizing for those who request transfer)
4. Making preparations for team members' travel-journey transactions
5. Arrangement of a meeting two rooms in the faculty building for meetings to be held
6. Provision of internet access (wireless if possible), printer, intercom, a set of SER and printed attachments as the visit team will continue their work in one of the meeting rooms
7. Providing transportation between the accommodation and the school during visit days
8. E-mailing the list of faculty members (on the basis of departments), students (on the basis of years), research assistants (on the basis of department, including doctorate-master's) to the Head of the Team before the visit
9. For the meeting of the visit team, the list of 40 faculty members and 75 students, who do not have any management and coordination duties in the faculty, is determined by the Dean's Office and notified to the head of the visit team (in this group, the distribution of basic, internal, surgical sciences and seniority must be equal)
10. Additional requests that your team deems appropriate

VR. Appendix 3. Duties of the student

At the TEPDAD meeting held in Ankara on 7 October 2011, it was decided to include 1 student in the site-visit teams. Accordingly, it was decided that the students in the site-visit teams should take part in all activities with the visit team. Students, at appropriate times within the scope of the site-visit; can hold a preliminary meeting with the student representatives and the heads of student organizations. Educational and social environments can be visited with the students.

.....FACULTY OF MEDICINE

SITE-VISIT PROGRAM

ONLINE VISIT

.././

Day 0	
09.00 – 12.00	Site-visit Team Preparation Meeting (review of visit plan and evaluation chart)
13.00 - 14.00	Preparation Meeting with the Faculty Administration (information about the visit program is shared)

Day 1	
09.00- 09.45	Dean’s presentation: The presentation is made on the basis of the faculty's SER, on the condition of meeting the standards of the institution. Deputy Deans, Education Officers/Coordinators, SER Coordinator, SER Commisttee members, Chief Physician, Faculty Secretary, Faculty Board, Faculty Members and Students are expected to attend the presentation.
09.45-10.15	Break
10.15-12.15	Meeting with the Education Administration (SER Coordinator / Coordinators / Deputy Deans / Educational Board Chairs)
12.15-13.30	LUNCH BREAK
13.30-14.00	Meeting with Student Affairs Officers
14.00-14.30	Break
14.30-15.30	Virtual tour of the faculty education environments arranged by the institution using visual material (30-minute video display) (Lecture halls, PBL Rooms, Science Laboratories, Computer laboratories, Clinical Skills Laboratories, Library, Clinical education environments, social areas, etc.)
16.00-18.00	Site-visit team meeting

ON-SITE (Face-to-face) VISIT

Day 2	
16.00 - 19.00	Site-Visit Team Preparation Meeting
20.30 - 23.00	Site-Visit Team Preparation Meeting

Day 3	
8.30-09.30	Visiting Chief Physician and training environments at the hospital
9.45-11.15	Meeting with faculty members from different departments and different levels. (Two consecutive meetings will be held in a hall determined by the institution, with the participation of 15 faculty members selected from the 40-person list determined by the medical school.
11.30-13.00	Meeting with faculty members from different departments and different levels
13.00-14.00	LAUNCH BREAK
14.00- 15.15	Meeting with students from pre-clinical years (A meeting to be held in a hall to be determined by the institution with the participation of 15 pre-clinical students randomly selected from a list of 75 students determined by the medical school.)
15.30-16.45	Meeting with students from clinical years (A meeting to be held in a hall to be determined by the institution with the participation of 15 -clinical students randomly selected from a list of 75 students determined by the medical school.)
16.45-17.45	Eğitim ortamlarının incelenmesi
19.30-22.00	Site-Visit team meeting

Day 4	
09.00-10.30	Meeting with department chairs (5 department chairs from each of the basic, internal and surgical sciences)
10.45-11.30	Meeting with student representatives
11.45-12.45	Meeting with the representatives of the coordinators, curriculum committee / program evaluation committee (When necessary)
12.45-13.30	LAUNCH BREAK
13.30-14.15	Meeting with the research assistatnts
14.30-15.30	Meeting with the education administration (observations during the visit are summarized, information is given about the exit meeting and the process)

ONLINE ACTIVITIES

Day 5	
08.30 – 12.00	Site-Visit team meeting
13.30 – 14.30	Exit meeting (An online meeting with broad participation, in which the Dean, Deputy Deans, Education Coordinators, SER coordinator, Faculty Board members, faculty members and students will participate).

ONLINE	ACCOMODATION PLACE	CAMPUS	HOSPITAL
--------	--------------------	--------	----------

VR. Appendix 5.

Institution Feedback Form for Visiting Team and Visiting Process

This form will be used by the official of the evaluated institution (dean/vice dean) for the evaluation of the visit team members. In the evaluations, a score between 1-5 (1-minimum, 3-moderate, 5-maximum) will be given considering the criteria presented below.

Name of the medical school:

Name of the evaluating person:

Position: Dean Vice Dean SER coordinator

Date of evaluation: ... / /.....

Efficiency of communication with the institution during the preparation period for the visit	1	2	3	4	5
Objectivity during the visit	1	2	3	4	5
Courtesy during the visit	1	2	3	4	5
Positive and constructive attitude	1	2	3	4	5
Compliance with ethical principles	1	2	3	4	5
Preliminary information about the institution	1	2	3	4	5
Clarity of the questions asked	1	2	3	4	5
Appropriate use of time	1	2	3	4	5
The usefulness of the exit report	1	2	3	4	5

General evaluation score for the site-visit team	1	2	3	4	5	6	7	8	9	10
--	---	---	---	---	---	---	---	---	---	----

Any other comments you would like to express regarding the visit team:

.....

.....

.....

.....

Any other comments you would like to express regarding visit process:

.....

.....

.....

NOTE: This form should be sent directly to the TEPDAD secretariat.

VR. Appendix 6

Feedback form for use of site-visit team members

This form will be used to evaluate the site-visit team members' institutional site-visit experiences, the visit process and other team members. It should be filled in individually and sent to the TEPDAD secretariat within 10 days after the end of the visit, first by e-mail and then signed by post. The form can be edited into multiple pages.

Name of the evaluating team member :

Date of evaluation : ... / /.....

1. Your thoughts on the faculty you visited (hospitality, facilitating work, facilities provided, accommodation conditions, openness, positive attitude, etc.)

.....
.....

2. Your thoughts about the team you are in and about the team members (Harmony, impartiality, working in harmony with ethical principles, preliminary preparation, using time appropriately, etc.)

.....
.....

3. Your suggestions to International Accreditation Board for the international institutional site-visit process in line with your experience (creation of visiting teams, informing the teams, visit guide, visit dates, visit schedule and process, report format, etc.)

.....
.....
.....

Any additional comments

VR. Appendix-7- Transportation table*

	Dr.	Dr.	Dr.	Dr.	Dr.
Personal information					
University					
E-mail					
Office phone number					
Mobile phone number					
Arrival details					
Arrival date					
Arrival time					
Transportation preference					
Transfer request					
Accomodation details					
Accomodation place					
Length of stay					
Departure details					
Departure date					
Departure time					
Transportation preference					
Transfer request					

** After the date of the visit is finalized, the head of the visit team communicates with the team members and forwards the form to the person in charge of communication in the faculty to be visited.*