



ASSOCIATION FOR EVALUATION  
AND ACCREDITATION OF  
MEDICAL EDUCATION PROGRAMS

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INTERNATIONAL ADDITIONAL SITE- VISIT GUIDE

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## I. INTERNATIONAL ADDITIONAL SITE-VISIT GUIDE

### INTRODUCTION

International additional site-visit is performed in following occasions:

- 1- Conditional accreditation: If International Accreditation Board (UATEAK) decides that a few basic WFME global standards are not satisfactorily met by the school of medicine and the deficiencies can be rectified within 18 months at most, conditional accreditation status is granted. In this case the school is informed about the missing standards and feedback including recommendations is provided. The school is requested to prepare an additional SER focusing on unmet standards only when relevant improvements considering the TEPDAD recommendations have been done. The additional SER is evaluated by UATEAK and the decision is made about the revision of accreditation status. If the unmet standards and relevant changes require on-site visit (for example a major change in educational facilities such as establishment of new premises like clinical skills laboratory or clinical training hospital, recruitment of new teaching or administrative staff who should be interviewed face-to-face or a substantial change in organizational structure and/or implementation of new instruction methods), then an additional site-visit is performed. The additional site-visit team is composed of at least the head and reporter of the primary site-visit. A third member may be assigned by TEPDAD when necessary.
- 2- Interim evaluation: In the middle of the six-year full accreditation duration an interim evaluation is performed. The school is requested to prepare an interim SER (I-SER) including information on what has been done related to the TEPDAD recommendations or with the school's own initiative in the last three years. The I-SER is evaluated by UATEAK and the decision is made about the continuity of the accreditation status. If explanations and evidential documents are not deemed clear enough by UATEAK to understand the current position of the school against basic standards, then an additional site-visit is performed to clarify the undecided topics on-site.  
  
The additional site-visit team is performed by at least the head and reporter of the primary site-visit team. A third member from the I-SER evaluation team may be assigned by TEPDAD when necessary.
- 3- Accreditation decision of the fully accredited schools making major changes in their programs and implementations in a way that risks their current accreditation status is reconsidered and their status may be suspended without waiting for the interim evaluation or next cycle. In order to take such a decision an additional site-visit may be performed focusing on the substantial changes only.
- 4- If any complaint is reported about an accredited school, this will be evaluated by the Executive Board and Appeal and Complaint commission. In case, a clear decision cannot be made, an additional site-visit may be performed focusing on the subject of complaint.

The additional site-visits are performed in accordance with the TEPDAD Ethical Principles and directives. The additional site-visit team is supposed to send an additional 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.

IAAdditional site-visit team is responsible for;

1. Identifying developments under the light of TEPDAD recommendations in the educational practices/premises in conditionally accredited schools or clarify the inexplicit points in the I-SER, and evaluate the institution according to relevant National Standards
2. Making a qualitative evaluation of the elements that cannot be documented in the additional SER or I-SER,
3. Identifying the consistency and inconsistencies between SER or I-SER on-site visit evaluations

## **ADDITIONAL 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 additional site-visit team members by TEPDAD and the determination of the visit date. Additional site-visit team members are expected to examine the additional SER or I-SER and its attachments prepared by the institution to have information about the school and its status against the standards.

The details of the additional 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 the additional 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 barcoveision and a printed copy of additional SER/I-SER and its attachmenrs are available. A similar room should also be allocated in the school for the additional 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 visit team and participants (accommodation conditions, size of meeting rooms, implementation of hygiene-health-safety rules, etc.)

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

All organization and expenses of the additional 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 the institution.

## **2. Additional Site-visit Activities**

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

Additional site-visit team may interview some of the following person or groups during the additional 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 additional SER/I-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 additional SER/I-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 additional site-visit is presented below. The head of the additional site-visit team should prepare a scheduled visit program focusing on the unmet (additional SER) or unclear (I-SER) standards, 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 additional site-visit**

#### **Day 0**

- Site-visit team meeting-

- Evaluation of the additional SER/I-SER using the evaluation chart
- 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 additional site-visit team members,
  - Determination of participants for interviews with the faculty members and students (if necessary)

#### Recommendations for the additional site-visit team

- If an interview with the faculty members is required, then 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. The faculty members to be interviewed must not be assigned in the commissions or boards related to education management.
- If an interview with the students is required, 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 if a meeting with department heads is required
- In the preparation meeting (dinner) with the education administration, review the additional site-visit plan. (At this meeting, the members of additional site-visit team inform the faculty administration about the face-to-face/online online meetings to be held in line with the additional 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 required additional information asked from the institution or undecided standards in the I-SER.** 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)

***The rest of the program is planned according to previously unmet standards in the conditionally accredited schools or unclear standards in the I-SER of fully accredited schools, and required interviews and visits are performed. Required information is the basis for the additional site-visit program.***

The additional site-visit lasts two days and an exit report is presented to the school by the head of the additional site-visit team in the afternoon of the second visit day. .

**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 UATEAK and that a comprehensive evaluation report will be sent to the institution later.**

**3. Post-visit activities**

- The additional site-visit team prepares the additional 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 additional 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 additional site-visit team members. Reports for each institution are evaluated by UATEAK at the first meeting, a decision is made for accreditation and the institution will be informed about the decision.

## RECOMMENDATIONS FOR ADDITIONAL SITE-VISIT ACTIVITIES

### *General recommendations*

Additional 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, and to give comprehensive feedback to the institution. Therefore, what is expected from the team members during the additional 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 additional site-visit, team members should not be in an inquiring and controlling attitude.**

The additional 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.** Each member 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.

### *Recommendations for observation and interviews*

In order to facilitate the observations and interviews to be made during the visit, suggested sample questions prepared by UATEAK are given in the following pages. **The additional site-visit team may use the relevant parts of the suggestions provided below considering the additional site-visit program.**

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 for the site-visit team members 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.

The additional site-visit team members must be sure to start the interview by introducing themselves, 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 additional/I-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 additional/I-SER or explain the relevant standard first, and then ask your question to the whole group. When 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 additional 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 a 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 presented 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 additional site-visit evaluation report and the accreditation decision to be made by 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 presented to the dean after the meeting. In fact, this report is the most important part of your additional site-visit report. The report will be sent to the institution also by the President of TEPDAD for the correction of material errors in the additional site-visit evaluation report.

## **RECOMMENDATIONS FOR PREPARATION OF ADDITIONAL 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 and the additional 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.

### ***Report content***

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

Section 1: Additional 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: Additional site- visit evaluation report (A report including information on whether the institution meets the unmet/unclear 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 additional site-visit***

Feedback forms are included in this guide as a separate appendix. Give the feedback form for evaluation of additional 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 THAT CAN BE ASKED ACOORDING TO ADDITIONAL SITE-VISIT PLAN**

Sample questions provided below are for all possible meetings. The additional site-visit team may select relevant ones regarding the additional site-visit plan.

***INTERVIEW WITH THE DEAN******INTERVIEW WITH EDUCATION ADMINISTRATION (SER COORDINATOR/ EDUCATION COORDINATORS / DEPUTY DEANS)******1. MISSION AND VALUES*****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?

***Questions specific to the institution******2. STRUCTURE AND CONTENT OF THE EDUCATIONAL PROGRAM*****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?

***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**

- 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. QUALTY ASSURANCE**

- 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***

**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***

**INTERVIEW WITH FACULTY MEMBERS FROM DIFFERENT DEPARTMENTS AND DIFFERENT LEVELS**

**1. MISSION AND VALUES**

- 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. CURRICULUM**

- 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**

- 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. QUALITY ASSURANCE**

- How are the purposes and methods of quality assurance and subsequent action in the school defined and described, and made publicly available?
- How is responsibility for implementation of the quality assurance system clearly allocated between the administration, academic staff, and educational support staff?
- How are resources allocated to quality assurance?
- How has the school involved external stakeholders?
- How is the quality assurance system used to update the school's educational design and activities and hence ensure continuous renewal?

#### **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***

#### ***INTERVIEW WITH STUDENTS FROM DIFFERENT LEVELS***

**1. MISSION AND VALUES**

- 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. CURRICULUM**

- 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?
- How do you give and receive feedback on program?

**Questions specific to the institution****3. ASSESSMENT**

- 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*

**INTERVIEW WITH STUDENT AFFAIRS OFFICERS****3.ASSESSMENT**

- 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. ADDITIONAL SITE-VISIT EVALUATION REPORT GUIDE

### ***Explanations***

The additional site-visit team (composed of 2-3 members assigned by TEPDAD) is expected to prepare an Additional Site-Visit Evaluation Report using this guide. Team members should record and interpret data they gathered 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 and the additional 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: Additional 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: Additional 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 additional site-visit team deems necessary.

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**ADDITIONAL SITE-VISIT EVALUATION FORM**


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Evaluated institution : .....

Additional site-visit date : .....

The report date : .....

<b>Members</b>	<b>UATEAK (Reporter)</b>	<b>BASIC SCIENCES</b>	<b>MEDICAL SCIENCES</b>	<b>SURGICAL SCIENCES</b>	<b>MEDUCAL EDUCATION</b>
<b>Name Family Name</b>					
<b>Signature</b>					

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

## EVALUATION CHART TO BE USED DURING ADDITIONAL SITE-VISIT

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

This chart, which was prepared during the visit, will be used by UATEAK 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.

**UATEAK (UATEAK):** This column is for the evaluation results obtained after the discussion of the additional/I-SER of the institution in the UATEAK panel. You do not need to fill this column in. In the team meeting before the site-visit, the UATEAK member in the team will inform the other members of the team about the institution's SER evaluation scores given by the UATEAK panel and the topics and the questions that UATEAK 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 UATEAK decision.

**1<sup>st</sup> 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" presented below using the evaluation marks.

**2<sup>nd</sup> 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 "Additional 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 additional site-visit evaluation report prepared.

***The evaluation chart to be used during the additional 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	<b>SER:</b> 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)
			<b>Site-visit:</b> 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	PMMa	<b>SER:</b> 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)
			<b>Site-visit:</b> 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	Partially met/minor	PMMi	<b>SER:</b> 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.).
			<b>Site-visit:</b> 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	<b>SER:</b> 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.
			<b>Site-visit:</b> The level to be marked when there are complete definitions / practices / documents / evidence of meeting the standard during the visit.
5	Good practice	GP	<b>SER:</b> 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.

			<b>Site-visit:</b> 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.
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### EVALUATION CHART TO BE USED BY ADDITIONAL SITE-VISIT TEAM MEMBERS DURING THE ADDITIONAL SITE-VISIT

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

**Please use the relevant lines of the table provided below considering only the basic WFME global standards evaluated in additional site-visit and remove the remaining lines from the table .**

1.MISSION AND VALUES	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 <sup>st</sup> day	2 <sup>nd</sup> day	3 <sup>rd</sup> day Final decision	Status of meeting the standard **				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
<b>1.1. Stating the Mission</b>														
1.1.1 How is the mission statement specially tailored to the school?														
1.1.2 Which interested groups were involved in its development and why?														
1.1.3 How does mission statement address the role of the medical school in the														

community?															
<b>1.1.4</b> How is it used for planning, quality assurance, and management in the school?															
<b>1.1.5</b> How does it fit with regulatory standards of the local accrediting agency and with relevant governmental requirements, if any?															
<b>1.1.6</b> How is it publicised?															

2. CURRICULUM	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								
<b>2.1 Intended Curriculum Outcomes</b>												
2.1.1. How were the intended outcomes for the course as a whole and for each part of the course designed and developed?												
2.1.2 Which stakeholders were involved in their development?												
2.1.3 How do they relate to the intended career roles of graduates in society?												
2.1.4 What makes the chosen outcomes appropriate to the social context of the school?												
<b>2.2. Curriculum Organisation and Structure</b>												
2.2.1 What are the principles behind the school's curriculum design?												

2.2.2 What is the relationship between the different disciplines of study which the curriculum encompasses?																															
2.2.3 How was the model of curriculum organisation chosen? To what extent was the model constrained by local regulatory requirements?																															
2.2.4 How does the curriculum design support the mission of the school?																															
<b>2.3. Basic Medical Sciences</b>																															
2.3.1 Who is responsible for determining the content of the curriculum?																															
2.3.2 How is curriculum content determined?																															
2.3.3 What elements of basic biomedical sciences are included in the curriculum? How are the choices made and time allocated for these elements?																															
2.3.4 What elements of																															

clinical sciences and skills are included in the curriculum?														
<b>2.3.4/a</b> In which clinical disciplines are all students required to gain practical experience?														
<b>2.3.4/b</b> How are students taught to make clinical judgements in line with the best available evidence?														
<b>2.3.4/c</b> How are the choices made and time allocated for these elements?														
<b>2.3.4/d</b> What is the basis for the school's allocation of student time to different clinical practice settings?														
<b>2.3.5</b> What elements of behavioural and social sciences are included in the curriculum? How are the choices made and time allocated for these elements?														
<b>2.3.6</b> What elements (if any) of health systems science are included in the curriculum? How are the choices made and time allocated for these elements?														
<b>2.3.7</b> What elements (if any)														



<b>2.4.2</b> According to what principles are the chosen educational methods and experiences distributed throughout the curriculum?														
<b>2.4.3</b> In what ways are the educational methods and experiences provided for students appropriate to the local context, resources, and culture?														

3. ASSESSMENT	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										
<b>3.1. Assessment Policy and system</b>														
3.1.1 Which assessments does the school use for each of the specified educational outcomes?														
3.1.2 How are decisions made about the number of assessments and their timing?														
3.1.3 How are assessments integrated and coordinated across the range of educational outcomes and the curriculum?														
<b>3.2 Assessment in Support of Learning</b>														
3.2.1 How are students assessed to support their learning?														
3.2.2 How are students assessed to determine those who need additional help?														





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										
<b>4.1. Selection and Admission Policy</b>														
4.1.1 How is alignment determined between the selection and admission policy, and the mission of the school?														
4.1.2 How does the selection admission policy fit with regulatory (accreditation) or government requirements?														
4.1.3 How is the selection and admission policy tailored to the school?														
4.1.4 How is the selection and admission policy tailored to local and national workforce requirements?														
4.1.5 How is the selection and admission policy designed to be fair and equitable, within the local context?														





<b>5.2 Academic Staff Performance and Conduct</b>													
5.2.1 What information does the school provide for new and existing academic staff and how is this provided?													
5.2.2 What induction training does the school provide for academic staff?													
5.2.3 How does the school prepare academic staff, and teachers, and supervisors in clinical settings to enact the proposed curriculum?													
5.2.4 Who is responsible for academic staff performance and conduct? How are these responsibilities carried out?													
<b>5.3 Continuing Professional Development for Academic Staff</b>													
5.3.1 What information does the school give to new and existing academic staff members on its facilitation or provision of continuing professional development?													
5.3.2 How does the school take administrative responsibility for													

implementation of the staff continuing professional development policy?														
<b>5.3.3</b> What protected funds and time does the school provide to support its academic staff in their continuing professional development?														

6. EDUCATIONAL RESOURCES	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 <sup>st</sup> day	2 <sup>nd</sup> day	3 <sup>rd</sup> day Final decision**					Status of meeting the standard**
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
<b>6.1. Physical Facilities for teaching and learning</b>														
6.1.1 How does the school determine the adequacy of the physical infrastructure (space and equipment) provided for the theoretical and practical learning specified in the curriculum?														
6.1.2 Is it appropriate or necessary to supplement or replace classroom teaching by distance or distributed learning methods? If so, how does														

the school ensure that these offer a commensurate level of education and training?																			
<b>6.2. Clinical Training Resources</b>																			
6.2.1 What range of opportunities is required and provided for students to learn clinical skills?																			
6.2.2 What use is made of skills laboratories and simulated patients, and of actual patients in this regard? What is the basis of the policy on use of simulated and actual patients?																			
6.2.3 How does the school ensure that students have adequate access to clinical facilities offering care in the required range of generalist and specialist practice settings?																			
6.2.4 What is the basis for the school's mix of community-based and hospital-based training placements?																			
6.2.5 How does the school engage clinical teachers and supervisors in the																			

required range of generalist and specialist practice settings?																			
<b>6.2.6</b> How does the school ensure consistency of curriculum delivery in clinical settings?																			
<b>6.3. Information Resources</b>																			
<b>6.3.1</b> What information sources and resources are required by students, academics, and researchers?																			
<b>6.3.2</b> How are these provided?																			
<b>6.3.3</b> How is their adequacy evaluated?																			
<b>6.3.4</b> How does the school ensure that all students and academic staff have access to the needed information?																			



7. QUALITY ASSURANCE	PRE-VISIT SER EVALUATION					EVALUATION OF INSTITUTION				Explanation	Strengths *, **	Areas that need improvement *, **	Recommendati ons**	
	Prediction of visit team members				Int. Accr. Board	Joint decision	1 <sup>st</sup> day	2 <sup>nd</sup> day	3 <sup>rd</sup> day Final decision**					Status of meeting the standar d**
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
<b>7.1 The Quality Assurance System</b>														
7.1.1 How are the purposes and methods of quality assurance and subsequent action in the school defined and described, and made publicly available?														
7.1.2 How is responsibility for implementation of the quality assurance system clearly allocated between the administration, academic staff, and educational support staff?														
7.1.3 How are resources allocated to quality assurance?														
7.1.4 How has the school involved external stakeholders?														

8. GOVERNANCE AND ADMINISTRATION	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 <sup>st</sup> day	2 <sup>nd</sup> day	3 <sup>rd</sup> day Final decision**	Status of meeting the standard**				
	Basic Sci	Surgical Sci	Internal Sci	Med Educ										
<b>8.1. Governance</b>														
<b>8.1.1</b> How and by which bodies are decisions made about the functioning of the institution?														
<b>8.1.2</b> By what processes and committee structures are teaching, learning, and research governed in the institution?														
<b>8.1.3</b> How is budget allocation aligned with the mission of the school?														
<b>8.1.4</b> What governance arrangements are there to review the performance of the school?														
<b>8.1.5</b> How are risks identified and mitigated?														
<b>8.2. Student and Academic Staff Representation</b>														



..... 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.*

***Please use the relevant lines of the table provided below considering only the basic WFME global standards evaluated in additional site-visit and remove the remaining lines from the table***

	Strengths	Areas that need improvement
<b>1.Mission and Values</b>		
Standards		
<b>2.Curriculum</b>		
Standards		
<b>3.Assessment</b>		
Standards		
<b>4.Students</b>		
Standards		
<b>5. Academic staff</b>		
Standards		
<b>6. Educational Resources</b>		
S Standards		
<b>7. Quality Assurance</b>		
Standards		
<b>8. Governance and Administration</b>		
Standards		

**SIGNATURES**

..... UNIVERSITY FACULTY OF MEDICINE END OF ADDITIONAL SITE-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
<b>1.Mission and Values</b>			
Standards			
<b>2.Curriculum</b>			
Standards			
<b>3.Assessment</b>			
Standards			
<b>4.Students</b>			
Standards			
<b>5. Academic staff</b>			
Standards			
<b>6. Educational Resources</b>			
S Standards			
<b>7. Quality Assurance</b>			
Standards			
<b>8. Governance and Administration</b>			
Standards			

**SIGNATURES**



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

1. Contacting the institutions of the additional 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 two meeting rooms in the faculty 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. If necessary, 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. If necessary, for the meeting of the additional site-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.**

**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 4**

**Feedback form for use of additional 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 UATEAK for the 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-5- Transportation table\***

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