



Eurasian Centre for Accreditation and Quality
Assurance in Higher Education and Health Care

Quality Assurance Programme of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care



Almaty, 2026

**Eurasian Centre for Accreditation and Quality Assurance in Higher
Education and Health Care**

**QUALITY ASSURANCE PROGRAMME OF THE EURASIAN
CENTRE FOR ACCREDITATION AND QUALITY ASSURANCE
IN HIGHER EDUCATION AND HEALTH CARE**

Almaty, 2026

1.DEVELOPED BY the Non-profit Organisation “Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care”

2. Approved by the Expert Board of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care, Minutes No. 1 dated January 9, 2026.

3. This document implements the provisions of the Law of the Republic of Kazakhstan "On Education" dated July 27, 2007, No. 319-III (as amended and supplemented as of January 3, 2026).

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1. MAIN PROVISIONS

1.1 Area of application

1.1.1 This Quality Assurance Programme (hereinafter referred to as the Programme) is designed to implement the Quality Assurance Policy for the internal processes of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA).

1.1.2 The programme determines the scope of the internal quality assurance system, the processes of infrastructural interaction, as well as the development of employees in quality assurance.

1.1.3 The programme describes the interaction of the quality assurance processes of ECAQA.

1.1.4 The programme is an ECAQA corporate document.

1.1.5 The programme is designed for administrative and management staff and staff of ECAQA subdivisions.

1.2 Management and staff responsibility

1.2.1 The ECAQA Director General provides overall leadership, sustainability and monitoring of the implementation of the ECAQA internal quality assurance system.

1.2.2 Heads of ECAQA subdivisions carry out and control organisational activities, coordinate quality assurance processes within the framework of goals, objectives and core functions of the relevant department, conduct familiarization of their employees with the updated Programme.

1.2.3 The ECAQA Director General, together with the Adviser, organises and oversees the development, coordination, approval and updating of this Programme.

1.2 The objectives of the Programme are developed in accordance with the ECAQA Statutes and include the provision of:

1.2.1 management of internal processes and their continuous improvement;

1.2.2 process management transparency for groups of stakeholders;

1.2.3 effective management of internal and external documentation;

1.2.4 public awareness of ECAQA activities;

1.2.5 promoting a culture of excellence in the Republic of Kazakhstan

2 Regulatory references

2.1 The following legislative and regulatory documents of the Republic of Kazakhstan were used in the development of this Programme:

– On Public Health and the Healthcare System. Code of the Republic of Kazakhstan dated July 7, 2020 No. 360-VI ZRK.

– Law of the Republic of Kazakhstan on Education dated June 27, 2007 No. 319-III (with amendments and additions as of January 3, 2026).

– On Approval of the Concept for the Development of Higher Education and Science in the Republic of Kazakhstan for 2023–2029. Resolution of the Government of the Republic of Kazakhstan dated March 28, 2023 No. 248.

– On Approval of the Concept for the Development of Healthcare in the Republic of Kazakhstan until 2026. Area 4. Improving the Efficiency of the Personnel Training and Advanced Training System. Resolution of the Government of the Republic of Kazakhstan dated November 24, 2022 No. 945.

– On approval of the Rules of recognition of accrediting agencies, including foreign ones, and the formation of a register of recognized accrediting agencies, accredited educational organisations and educational programmes. Order of the Minister of Education and Science of the Republic of Kazakhstan dated November 1, 2016 No. 629.

– Order of the Minister of Culture and Sport of the Republic of Kazakhstan of December 22, 2014 No. 144 On approval of the Model Rules for documentation and documentation management in state and non-state organisations.

2.2 When developing the Programme, the following international documents in the field of ensuring the quality of education are taken into account:

- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, Part II).
- INQAAHE Guidelines of Good Practice
- 11 Chiba Principles;
- WFME criteria for recognition of accrediting agencies in medical education (principles and procedures for recognition of agencies accrediting medical universities).

2.3 This Programme determines that the following ECAQA documents are developed and applied in accordance with the quality assurance system of the main and auxiliary processes of ECAQA:

- 1) Constitution of the ECAQA
- 2) 5-Year Strategic Development Plan of the ECAQA
- 3) ECAQA Action Plan (annual)
- 4) Regulations on the ECAQA Accreditation Council;
- 5) Regulations on the ECAQA Expert Board;
- 6) Regulations on the ECAQA External Expert Commission;
- 7) Regulations on the ECAQA Post-Accreditation Monitoring;
- 8) Regulations on the Complaints Review Commission;
- 9) Regulation on the Appeals Commission;
- 10) Regulation on the cost of the accreditation procedure;
- 11) Regulation on paid services;
- 12) Regulation on Conflict of Interest;
- 13) Regulation on Representative Costs;
- 14) Remuneration and Bonus Regulation;
- 15) Internal Labor Regulations;
- 16) Regulations on Information Security;
- 17) Regulation on Accreditation Experts;
- 18) Regulation on Document Storage;
- 19) ECAQA Requirements for HEIs and medical educational organisations to undergo an institutional accreditation procedure;
- 20) ECAQA Requirements for HEIs and medical educational organisations to undergo a specialized accreditation procedure;
- 21) Standards for institutional accreditation of HEIs and medical educational organisations;
- 22) Standards for institutional accreditation of organisations of higher and postgraduate education;
- 23) Standards for the institutional accreditation of healthcare organisations providing postgraduate and continuing education (continuing professional development);
- 24) Standards of institutional accreditation of organisations of continuing professional development;
- 25) Standards for accreditation and Procedures for Self-Assessment of Simulation Centres in Medicine and Healthcare;
- 26) Standards for accreditation of Bachelor's Degree Educational Programmes in Medical Education Organisations;
- 27) Standards for accreditation of the educational programme in General Medicine (bachelor's degree programme);
- 28) Standards for accreditation of Educational Programmes in Continuous Integrated Medical Education;

- 29) Standards for specialized accreditation of the educational programme in Nursing (bachelor's degree programme);
- 30) Standards for specialized accreditation of the Master's degree programme in Health Care;
- 31) Standards for the specialized accreditation of the PhD doctoral educational programme in healthcare;
- 32) Standards for the accreditation of the postgraduate medical education programme (Residency 2024);
- 33) Standards for accreditation of residency educational programmes (primary accreditation) of medical educational organisations;
- 34) Standards for the institutional accreditation of Nursing College;
- 35) Standards for specialized accreditation of technical and vocational education programmes;
- 36) Standards for the accreditation of the postgraduate medical education programme: clinical residency (Republic of Tajikistan);
- 37) Standards for the accreditation of Bachelor's degree educational programmes in medical specialties of higher education institutions of the Republic of Tajikistan;
- 38) Standards for the institutional accreditation of higher and postgraduate educational organisations, Republic of Uzbekistan;
- 39) Standards for the institutional accreditation of medical educational institutions of postgraduate education and continuing professional development, Republic of Uzbekistan;
- 40) Standards for the accreditation of educational programmes in Bachelor's degree specialties of medical educational organisations, Republic of Uzbekistan;
- 41) Standards for the accreditation of the 'General Medicine' (Medical Practice) educational programme at medical educational institutions in the Republic of Uzbekistan;
- 42) Guidelines for conducting the institutional self-assessment of medical HEIs and PGME;
- 43) Guidelines for conducting the institutional self-assessment of PGME and CPD organisations;
- 44) Guidelines for conducting the institutional self-assessment of organisations of additional and non-formal education (continuing professional development);
- 45) Guidelines for conducting the institutional self-assessment of organisations of higher and postgraduate education organisations;
- 46) Guidelines for conducting the institutional self-assessment of Nursing College;
- 47) Guidelines for conducting the self-assessment of the educational programme in the speciality "General Medicine" (Bachelor's degree);
- 48) Guidelines for conducting the self-assessment of the Basic Medical Education programme (Bachelor's degree);
- 49) Guidelines for conducting the self-assessment of the continuous integrated medical education programme (were in force between 2023 and 2025);
- 50) Guidelines for conducting the self-assessment of educational programmes in the speciality "Nursing" (Bachelor's degree) of medical educational organisations;
- 51) Guidelines for conducting the self-assessment of the postgraduate medical education programme (Residency), 2024;
- 52) Guidelines for conducting the self-assessment of Master's degree programmes in healthcare;
- 53) Guidelines for conducting the self-assessment of the PhD doctoral programme in healthcare;
- 54) Guidelines for conducting the self-assessment of TVET educational programmes in healthcare;

- 55) Guidelines for conducting the self-assessment of the postgraduate education programme: clinical residency (Republic of Tajikistan);
- 56) Guidelines for conducting the institutional self-assessment of medical educational organisations of postgraduate education and continuing professional development, Republic of Uzbekistan;
- 57) Guidelines for conducting the institutional self-assessment of higher and postgraduate educational organisations, Republic of Uzbekistan;
- 58) Guidelines for conducting the self-assessment of basic medical education programmes (Bachelor's degree), Republic of Uzbekistan;
- 59) Guidelines for the self-assessment of the 'General Medicine' (Medical Practice) educational programme at medical educational institutions;
- 60) Code of Ethics for the External Accreditation Expert;
- 61) Statement and Obligation of Confidentiality and Absence of Conflict of Interest
- 62) Recommendations on the Involvement of Students in the Accreditation Process of Medical Education;
- 63) Recommendations on assessing the compliance of an educational organisation and an educational programme with the Accreditation Standards;
- 64) Guidelines on the Effective Involvement and Engagement of Stakeholders in the Quality Assurance System;
- 65) Guidelines on External Evaluation and the Site visit to a Medical Educational Organisation;
- 66) Guidelines on Documentation Management;
- 67) Guidelines for the external evaluation of a new educational programme (initial accreditation);
- 68) Quality Profiles and Criteria for External Evaluation (in accordance with the type of accreditation and the level and speciality of the educational programme being accredited);
- 69) Regulations on Departments and Job Descriptions.

3. References and abbreviations

AMP – administrative and management personnel
 AC – Accreditation Council
 EEC – External Expert Commission
 ECAQA – Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care
 MoH RK – Ministry of Healthcare of the Republic of Kazakhstan
 MSHE RK – Ministry of Science and Higher Education of the Republic of Kazakhstan
 RK – Republic of Kazakhstan
 EB – Expert Board
 WFME – World Federation for Medical Education
 ENQA – The European Association for Quality Assurance in Higher Education
 EQAR – The European Quality Assurance Register for Higher Education

4. Terms and definitions

In these Guidelines terms and definitions are used in accordance with the Law of the Republic of Kazakhstan on Education No. 319-III dated July 27, 2007 (with changes and additions as of 03.01.2026):

1) **Accrediting agencies** - legal entities that develop standards (regulations) and conduct accreditation of educational organisations on the basis of the standards (regulations) developed by them;

2) **Accreditation of educational organisations** - the procedure for the recognition by an accrediting agency of the compliance of educational services with the established standards (regulations) of accreditation in order to provide objective information about their quality and confirm the existence of effective mechanisms for its improvement;

3) **Accreditation of educational programmes** - the procedure for the recognition by an accrediting agency of compliance of educational programmes (specialty) with established standards (regulations) of accreditation in order to provide objective information about their quality and to confirm the existence of effective mechanisms for its improvement;

4) **Institutional accreditation** - the process of assessing the quality of an educational organisation by an accrediting agency for compliance with a declared status and established Standards for an accrediting agency;

5) **Specialized accreditation** - assessment of the quality of individual educational programmes implemented by the educational organisation;

6) **Standards/Guidelines** - external evaluation of quality assurance of educational programmes implemented by higher education institutions.

5. Brief description of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA)

The Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care was established in 2017, it is a non-governmental, non-profit organisation for quality assurance in education and training of health care professionals (ECAQA Constitution, cl. 1.4).

ECAQA has the status of a legal entity (ECAQA Constitution, cl. 1.2, cl. 1.3).

ECAQA has an independent status (ECAQA Constitution, cl. 1.5) and is autonomously responsible for its actions, and no third parties (educational organisations, government agencies, ministries and other stakeholders) can influence the conclusions and recommendations contained in the reports of expert commissions on external evaluation and on decisions on accreditation of educational organisations, healthcare organisations, scientific organisations/centres and their educational programmes.

ECAQA has an independent status and is autonomously responsible for its actions, and third parties (educational organizations, state bodies, governmental ministries and other stakeholders) cannot influence the conclusions and recommendations contained in the external expert commissions' reports and decisions of the Accreditation Council on accreditation of educational and research organizations and their educational programmes.

ECAQA holds exclusive copyrights to Standards for institutional and specialized accreditation all levels of education, which are registered with the Ministry of Justice of the Republic of Kazakhstan (Certificates of State Registration of Copyrights dated November 20, 2017, November 28, 2017, June 15, 2018).

ECAQA has a mission, vision and strategic goal, reflected in the organisation's strategic sustainable development plan.

5.1 Mission

Ensuring the implementation of international standards and principles of external quality assurance of higher professional education, taking into account the needs of the national health care system and the participation of all stakeholders, in order to guarantee the public the quality of training of health professionals in the country.

5.2 Vision

The leading specialized agency for ensuring the quality of vocational education in health care with international recognition and sustainable development.

5.3 Strategic aim

Modernization of the quality assurance system of higher professional education through the improvement of internal and external quality assurance mechanisms at the institutional and national levels, increasing the competitiveness of health professionals and the system of medical care in the country and internationally.

5.4. Strategy development

The ECAQA development strategy has been developed for 5 years and is supported to meet the goals and objectives of ECAQA, includes the main directions of modernization of the quality assurance system for education, and also demonstrates obligations in the field of internal quality assurance system. The development, monitoring and analysis of the quality of implementation of the ECAQA development strategy is carried out by senior management and heads of key departments. The development strategy is communicated to employees and experts, periodically reviewed, changes are made if necessary, after which the document is updated.

The main areas of ECAQA strategic development are as follows:

- 1) Capacity building and sustainable development of a specialized accreditation centre – ECAQA
 - Creating a regulatory framework and ensuring the functioning and sustainable development of an accreditation centre;
 - Ensuring registration of a specialized accreditation centre in the register of the authorized body in education;
- 2) Organisational and methodological support of accreditation procedures for internal and external evaluation of the quality of educational organisations and educational programmes, at all educational levels
 - Implementation of Standards for institutional and specialized accreditation;
 - Methodological support of institutional and specialized accreditation procedures;
- 3) Involvement of competent experts in the accreditation process in accordance with the specialties and levels of education
 - Creating a database of qualified national and international experts;
 - Implementation of a programme to improve the capacity and develop the competence of national accreditation experts, experts - representatives of employers and students;
 - Training certified accreditation experts, including training in leading accreditation agencies abroad;
 - Increasing the capacity of departments of HEIs and educational organisations and health organisations (implementing programmes of postgraduate training of specialists), scientific organisations (PhD programmes) to ensure the quality of education.
- 4) The introduction of international best practice principles to ensure the quality of education and the achievement of effective cooperation with foreign partners
 - Institutional and specialized accreditation of HEIs and educational organisations and their educational programmes;
 - Ensuring cooperation with international and European networks for quality assurance and professional associations (INQAAHE, ENQA, APQN, CEENQA, CHEA);
 - Implementation of the programme of international cooperation and partnership with foreign accrediting agencies (list);
 - External assessment of APQR;
 - International recognition of the specialized accreditation centre (ECAQA) of the WFME and the European Association for Quality Assurance (ENQA).

5.5 ECAQA Core Principles

The ECAQA development strategy is developed based on the principles and values defined by top management for meeting the requirements for ECAQA services and products and documented.

ECAQA operates on the basis of the following principles: transparency, objectivity, confidentiality, efficiency, involvement of all stakeholders, cooperation and partnership.

ECAQA ensures the achievement of the competitiveness of health professionals in Kazakhstan through:

- creating a transparent and reliable national/regional quality assurance system for

education based on the WHO/WFME Guidelines for Accreditation of Basic Medical Education, the Implementation of Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and the WFME Global Standards for Quality Improvement of Basic and Postgraduate Medical Education, continuing medical education at the regional level;

- application of common international principles of best practices and approaches to the conduct of institutional and specialized accreditation (vocational and technical education, undergraduate and postgraduate education, CPD), taking into account the specifics of the national/regional health system and the system of higher and postgraduate education;

- effective implementation of specialized accreditation (educational programmes for residency, master's degree programmes, PhD programmes) based on recognized WFME Global Standards for Quality Improvement of Basic Medical Education, Organisation for PhD Education in Biomedicine and Health Sciences in the European System (ORPHEUS), Association of Medical Schools in Europe (AMSE), Association of Schools of Public Health in the European Region (ASPHER) with the introduction of national specifications and requirements of the health care system to standards for accreditation specialties;

- effective interaction and involvement of all stakeholders (government bodies, society, academic and scientific community, professional associations, student organisations, non-governmental organisations in the field of health and education) in the accreditation process (institutional and specialized) and improving the quality of training of health professionals at all;

- development of the capacity of experts and the introduction of a training programme for experts on accreditation based on a competence-based approach (Experts' Qualification and Competencies Framework) and training of all categories of experts;

- effective strategic partnership with leading accreditation agencies of developed countries and international cooperation and participation in events and projects of international associations and European networks for quality assurance in education: International Network for Quality Assurance Agencies in Higher Education (INQAAHE), European Association for Quality Assurance in Higher Education (ENQA), Asia Pacific Quality Network (APQN), Central and Eastern European Network of Quality Assurance Agencies in Higher Education (CEENQA) and the Council for Higher Education Accreditation (CHEA);

- advisory and methodological support and capacity development of teachers and staff of centres/departments for the accreditation of HEIs and medical educational organisations, scientific organisations, health organisations;

- inclusion of accredited HEIs and medical educational organisations and their educational programmes (basic medical education) in the WHO/WFME World Directory and the Foundation for Advancement of International Medical Education and Research (FAIMER),

- implementation of the stated policy and the established requirements of the The Educational Commission for Foreign Medical Graduates (ECFMG) for accreditation of educational programmes of foreign medical schools and their graduates by 2024;

- external evaluation and confirmation of the commitment and compliance of ECAQA with the 11 Chiba principles for inclusion in the Asia-Pacific Quality Registry;

- ECAQA's recognition and achievement of the established criteria of the International Recognition Programme of the World Federation for Medical Education as a national/regional independent accrediting agency for medical education;

- full membership in the European Association for Quality Assurance (ENQA), compliance with the requirements of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and the inclusion of ECAQA in the European Quality Assurance Register for Higher Education (EQAR) as a regional specialized accreditation agency.

5.6 Organisational Structure of ECAQA

The organisational structure of ECAQA includes a list of departments whose activities are aimed at achieving the goals and objectives of the institution: the planning and administration department, the accreditation and monitoring department, the international cooperation and

public relations department, the IT department. The management as a whole is carried out by the Director General. The Director General is in close collaboration with a scientific advisor who is a staff member of ECAQA.

The scientific adviser coordinates the preparation and approval of the substantive part of the expert documentation, the work of the Expert Board and expert commissions in the following areas:

- 1) Higher and postgraduate education in health care (institutional, specialized accreditation);
 - 2) Continuing professional development education (institutional and specialized accreditation of additional and non-formal education);
 - 3) Nursing education (institutional and specialized accreditation of technical and professional education, programs of academic baccalaureate and applied baccalaureate);
 - 4) Simulation education;
 - 5) Higher and postgraduate professional education,
- provides a high-quality expert base, organises expert training and coordinates the composition of External Expert Commissions for accreditation.

The Director General interacts with the Chair and members of the Accreditation Council, while not being a member of them. The Director General interacts with the Chair of the Appeals Commission and the Chair of the Complaints Review Commission, who are elected for a term of 5 years, and with the members of these commissions, who are appointed for the period of consideration of an appeal or of a specific complaint.

The controlling function is performed by the audit commission.

6. Resource Management

The necessary resources to increase satisfaction of stakeholders (employees, consumers, representatives of partner organisations), implementation and sustainable development of the internal quality assurance system are determined during the planning process.

The overall responsibility for providing the resources of the internal quality assurance system lies with the ECAQA Director General. Partial responsibility for the provision of resources to the internal quality assurance system and the corresponding obligations to maintain this system in active (working) condition are delegated to managers and staff of ECAQA departments upon the decision of the Director General.

6.1 Human resources

6.1.1 Employee selection, admission and development policy

Employees are ECAQA's highest value, ensuring that the goals and objectives of ensuring the quality of the services provided by ECAQA are met.

Human resource management at the strategic level includes the management of human resources, employment and employees. The staff of ECAQA is represented by full-time employees, freelance members of the Accreditation Council and the Expert Board.

ECAQA has implemented a policy for the selection, admission and development of staff members, taking into account job positions and competency requirements. Employee selection, admission and development policies include:

- criteria for the selection of employees in accordance with the requirements of job descriptions;
- recruitment of applicants for vacant positions using the resources of specialized recruitment agencies, personnel services of HEIs and medical educational organisations, higher educational institutions;
- testing for newly hired employees for a period of 3 months;
- continuous self-development and self-improvement of employees through on-the-job training and exchange of experience, organisation of training in advanced training faculties;

6.1.2 Expert selection policy

In forming the Accreditation Council, ECAQA applied the WHO/WFME Guidelines for Accreditation of Basic Medical Education, and currently the Accreditation Council consists of representatives from higher and postgraduate education and health organisations of the Republic of Kazakhstan, foreign experts representing international organisations in education, health and science. The Accreditation Council acts on the basis of the ECAQA Regulations on the Accreditation Council.

ECAQA has implemented a policy for the selection and development of experts, including:

- Requirements for experts;
- Regulation on experts;
- Code of Ethics of an accreditation council member;
- Code of Ethics for the External Accreditation Expert;
- Statement and Obligation of Confidentiality and Absence of Conflict of Interest ECAQA (for the period of participation in the EEC);
- Regulation on Conflict of Interest;
- Guidelines on the External Evaluation of Educational Organisations and Educational Programmes;
- Guidelines on the Preparation of the Report of the External Expert Commission on the Accreditation of Educational Organisations and Educational Programmes;
- Recommendations on Assessing the Compliance of an Educational Organisation and an Educational Programme with the Accreditation Standards;
- Guidelines on the Effective Involvement and Engagement of Stakeholders in the Quality Assurance System;
- Recommendations on the Involvement of Students in the Accreditation Process of Higher and Postgraduate Education;
- Expert training programmes.

The Expert Board operates in accordance with the Regulations on the Expert Board. Experts from the ECAQA Expert Database can be included in the Appeals Commissions and the complaints review commission. Individual experts may be referred by ECAQA to participate in national and international quality assurance and accreditation activities in higher, postgraduate and CPD education, medical education and health care.

6.1.3 Training of staff and experts

In order to continually improve the competence of human resources, ECAQA plans and implements training for institution staff and experts, followed by performance assessment. Employee competency requirements are defined in job descriptions.

The fact of employee training in the workplace, including activities to ensure their awareness in the field of internal quality assurance is recorded in the records of the participants in seminars, workshops, trainings conducted by ECAQA. The results of the advanced training of ECAQA staff are taken into account by the planning and administration department, where the employee provides a copy of the certificate of professional development.

The effectiveness of the training and/or advanced training of an employee is assessed by providing the employee with a brief report to the main manager with suggestions for improvement on the results of the training. This report can be read at the weekly meetings of the Director General, the Adviser and the heads of ECAQA subdivisions.

The training of experts is documented in the form of records (application for the training programme, records of attendance of training activities, the issuance of handouts) and certificates with the data entered in the certificate registration log.

The requirements for the competence of experts are defined in the Requirements for experts, the Regulations on the Expert Board and the Regulations on the External Expert

Commission.

6.2 Infrastructure and production environment

The necessary infrastructure of the institution is determined in the process of analysing and monitoring the internal quality assurance system and is provided through strategic (for 5 years) and annual (for 1 year) ECAQA plans.

The ECAQA infrastructure is maintained in proper condition and includes administrative premises, classrooms for training events and meetings, material and technical facilities (equipment, office equipment, communication facilities), and transport.

The quality of the working environment is ensured by:

- implementation of the system of internal exchange of information (clerical work and document flow);
- establishing long-term and transparent relationships with partners;
- appropriate financial resources for the sustainability of the internal quality assurance system;
- continuing development of employees;
- introducing ethical standards of conduct and corporate culture;
- implementation of measures for safety, labour protection, ecology, fire safety, sanitation and emergency situations in accordance with the legislation of the Republic of Kazakhstan. External quality control of these activities is carried out by the relevant supervisory government bodies.

6.3 Financing

One of the important components of ECAQA's financing process is the procurement of material and technical resources, equipment and services (transport, air and rail tickets, hotel accommodation). At the end of each year, a budget is drawn up for the forthcoming year, which is signed by the Director General. Information on the budget is submitted to the founder of ECAQA.

During the procurement process, requirements are established for the products to be procured and for the suppliers. When concluding contracts with suppliers, ECAQA establishes criteria and requirements for their fulfilment (terms of reference). The general requirements for the products to be procured are determined by a decision of the management. The requirements for a specific procurement are established as necessary and usually include requirements regarding the quality and timeliness of the products supplied.

Through periodic monitoring of the quality of the products supplied, preferences for particular suppliers are established. During the procurement of products, incoming inspection is carried out to verify their compliance with the established requirements. The Planning and Administration Department maintains systematic records and registration of the contracts concluded.

7. Internal quality assurance system

7.1 Documentation management

The documentation is intended to ensure a common understanding of the mission, vision and development strategy of ECAQA. The documentation management processes are described in the Guidelines on Documentation Management, the Regulation on Information Security and the Regulation on Document Storage. Internal documents are updated every 5 years.

Documents are operational with the aim of systematically exchanging information between structural departments and advisory bodies of ECAQA; prompt submission of documents at the request of state supervisory authorities, stakeholders and/or inspection bodies; demonstrations to current and potential partners; demonstrations to auditing organisations.

ECAQA has defined record management processes:

- management of incoming documents;

- management of outgoing documents;
- information management;
- archive management;
- document security management;
- management of current records.

Documents are created, identified, completed and stored for a specified period of time. The management determines the employees responsible for the creation, accounting and storage of documents, taking into account the areas of work and the file register. Appointed ECAQA personnel is responsible for the safety of records and documents.

7.1.1. Quality Assurance Documentation for ECAQA Internal Processes

Quality assurance documentation for ECAQA internal processes is presented as follows:

- ECAQA Quality Assurance Programme;
- Strategic directions for ECAQA development;
- ECAQA 5-Year Strategic Development Plan;
- ECAQA Annual Work Plan;
- Rules of internal labor regulations;
- Regulations on labor remuneration and bonus payment to employees;
- Regulations on Conflict of Interest;
- Regulations on the cost of the accreditation procedure;
- Regulation on paid services;
- Regulation on representative costs;
- Regulations on the coding of certificates;
- Regulations on business trips;
- Guidelines on Documentation Management;
- Regulation on Information Security;
- Regulation on Document Storage. Standard Contract with EEC members;
- Guidelines on the Effective Involvement and Engagement of Stakeholders in the Quality Assurance System;
- Accreditation Standards and Guidelines for Conducting Self-Assessment (in view of the type of organisation and the level of education), see clause 2.3;
- Guidelines on the External Evaluation of Educational Organisations and Educational Programmes;
- Interim Guidelines on the External Evaluation of Educational Organisations and Educational Programmes (2020);
- Guidelines on the Preparation of the EEC Report;
- Recommendations on Assessing the Compliance of an Educational Organisations and an Educational Programme with the Accreditation Standards;
- ECAQA Quality Assurance Programme;
- Guidelines for external evaluation of higher education institutions and educational programmes;
- Regulations on the Appeals Commission;
- Regulations on the Complaints Review Commission;
- Regulatory legal acts governing ECAQA's activities in the field of education quality assurance;

7.1.2 Information management

Information management includes its creation, provision of access (information) and information security, information exchange (internal and external), storage, archiving.

7.1.3 Document formation

ECAQA documents are created on paper (manual records using special forms) and

electronic media (computer typing). The process of creating a document includes the design requirements (page parameters, font size, paragraph, footer, numbering, arrangement of signatures and approval/heading). Forms also provide identification of records by process. Forms are entered into action through links from corporate documents. An electronic document has several advantages, namely, the ability to replicate, restore, print, make corrections.

Creating a document (information) is completed by:

- verification of compliance with the technical requirements for registration by the contractor and a higher-level employee,
- verification of compliance of the contents of the document with the declared name (identification),
- analysis of changes, if any,
- obtaining approvals from the relevant responsible persons, if this is stipulated in the requirements for the given type of document,
- approval by the Director General (depending on the type of document). For this purpose, an order is issued. Such documents include Regulations and Guidelines directly related to the financing of ECAQA events and other activities carried out within the framework of ECAQA's Strategic and Annual Plans, as well as on the basis of state regulatory legal acts;
- putting certain documents into effect (Standards, Guidelines and certain Regulations) by an order of the Director General after the document has been developed and approved by the ECAQA Expert Board, which is recorded on the title page or on the reverse side of the title page. The introduction of a document into effect by an order of the Director General, such as Standards and Guidelines, is justified by the need to carry out official non-cash financial transactions and to comply with the requirements of the national legislation when fulfilling the requirements of the technical specification posted by the applicant organisation on the state public procurement portal, followed by the conclusion of a Contract for institutional and/or specialised accreditation.
- **Approval by the Director General** (depending on the type of document). For this purpose, an order shall be issued. Such documents include Regulations and Guidelines directly related to the financing of ECAQA events and other activities carried out within the framework of the ECAQA's Strategic and Annual work plans, as well as in accordance with state regulatory legal acts.
- **Putting certain documents into effect** (Standards, Guidelines, and certain Regulations) by an order of the Director General after the document has been developed and approved by the ECAQA Expert Board, which is recorded on the title page or on the reverse side of the title page. The introduction of a document into effect by an order of the Director General, such as Standards and Guidelines, is justified by the need to carry out official non-cash financial transactions and comply with the requirements of the national legislation when fulfilling the requirements of the technical specification posted by the applicant organisation on the state public procurement portal, followed by the conclusion of a Contract for institutional and/or specialized accreditation.

7.1.4. Providing access and information security

Creating a document is completed by familiarization of employees, and if necessary, distribution of the document to stakeholders with the mandatory recording of the movement of the document (outgoing, incoming).

The protection of information resources is carried out on the basis of the Regulation on Information Security and includes:

- ensuring the protection of information from unauthorized access, destruction, modification, blocking, copying, provision, dissemination, as well as from other illegal actions;
- confidentiality of restricted access information;
- realization of the right of access to information.

The approved ECAQA documents (Standards & Guidelines) are accompanied by a statement about the restriction of full or partial reproduction, reproduction and distribution without ECAQA permission. Access to reading and downloading individual documents on the ECAQA website is limited by the mandatory on-line registration procedure and obtaining consent from the website moderator.

7.1.5 Information exchange processes

Information exchange processes are contained in the Document Management Manual and the Information and Communication Resource Management Manual.

Telephone and electronic communications (telephones, e-mail, Internet, Whatsapp) are used to exchange information; information and regulatory external documents, ECAQA website, corporate mail, traditional postal services, computer and copying equipment.

The ECAQA leadership identified those responsible for communicating information to stakeholders, consumers, and partner organisations.

The following are those responsible for communicating information from ECAQA to stakeholders:

Responsible persons from ECAQA	Recipients of information
Director General	Recognition bodies, MoH RK, MSHE RK Heads of health departments
Director General Heads of departments	ECAQA employees
Head of the IT Department	Potential suppliers
Head of the Department for Accreditation and Monitoring	HEIs and educational organisations (Institutes, universities, colleges, clinics, etc.)
Head of the Department for Planning and Administration	Financial and tax authorities, potential suppliers
Head of the Department for International Collaboration and Public Relations	International partners, international organisations and quality assurance networks, Foreign universities Educational and medical community, public, mass media

Internal Information Management also includes areas of responsibility for ECAQA staff. Thus, the head of IT has been responsible for the preparation and organisation of publications about ECAQA, the placement of information and the regularity of its updating in the sections of the website of the ECAQA. The content and quality of the information presented on the English page of the ECAQA website, as well as the update of the news section, are provided by the head of the international cooperation and public relations department together with the head of the IT department.

Information on the accreditation of an educational organisations and educational programmes, updating the roster of experts, and posting accreditation reports on the ECAQA website are the responsibility of the scientific consultant and head of the accreditation and monitoring department. The head of planning and administration is responsible for posting information on potential suppliers on the website.

All information in three languages posted on the ECAQA website, including standards and guidelines for institutional and specialized accreditation (in PDF format), materials for students, is available to all ECAQA staff, stakeholders, the public and the media. Standards and Accreditation Guidelines are provided to educational organisations in the form of brochures

after signing an accreditation agreement.

ECAQA staff and experts participate in international quality assurance networks, international and Kazakhstan quality assurance activities.

7.1.6 Storing and archiving records

Records Management Guidelines determine the accounting, acquisition, retention, withdrawal of completed and obsolete documents, their archiving and subsequent destruction. This is relevant to the documents, both organisational and accreditation.

Documentation Management Guidelines describe the accounting rules for documents, which include the registration of incoming and outgoing documentation in special journals and, if necessary, attachment of accompanying documents (attachments) to the original document, as well as stitching of incoming letters.

Documents after being created and used in various ECAQA activities are transferred to the archive after their retention period expires. Information resource storage requirements are governed by the Regulation on Document Storage. Paper documents are placed in an archive folder. Electronic documents are moved to an archive file on a computer or flash drive.

Accreditation documents (self-evaluation reports of educational organisations, EEC reports, reports annexes, photographs, video materials) are also stored in archive folders/folders (paper versions) and on electronic media (electronic versions).

Upon completion of the storage period, documents are destroyed.

7.2 Management responsibility

The role of ECAQA management (the Director General) in maintaining good practice on the internal quality assurance system is to:

- organising the development, implementation and continuous improvement of the ECAQA quality assurance system;
- assuming commitment to the sustainable development of the ECAQA quality assurance system;
- involvement of ECAQA staff in the process of continuous improvement of the effectiveness and efficiency of the internal quality assurance system;
- exercising control over the management of documentation, records management and document flow;
- timely informing of the heads of departments on matters relating to the ECAQA quality assurance system and the changes made to it;
- informing staff about current legislative and regulatory documents in the field of quality assurance and assessment;
- informing staff about consumer requirements and raising awareness of the importance of meeting them;
- determining responsibility for types of work in the context of ensuring the quality of internal processes;
- assessing the effectiveness and efficiency of the ECAQA quality assurance system;
- providing the necessary resources;
- submitting an annual report on ECAQA's activities to the authorised body in the field of accreditation (MSHE RK).

ECAQA leadership ensures the functioning of processes related to educational organisations, potential and existing partners, representatives of state bodies, including:

- interaction and information of educational organisations, health organisations and other stakeholders;
- establishing partnerships with accredited organisations;
- organising feedback with organisations that have undergone accreditation and analysis of the role of accreditation in the future activities of the medical educational

organisation or improving the quality of the educational programme;

- organising feedback with organisations that have been accredited and analysing the impact of expert assessment on the quality of educational organisations and/or educational programmes;
- identification of requirements of consumers and stakeholders to the accreditation process;
- forecasting the need for accreditation;
- definition of requirements for accredited educational organisations;
- definition of requirements for accredited educational programmes.

7.3 Planning

The planning process includes the creation of strategic, operational (integrated) plans and current plans, taking into account the activities of the ECAQA.

Plans are mandatory documents, are developed with the involvement of all employees of the relevant unit, analysed by the management of the departments, agreed and approved by the top management of ECAQA. Changes made to the plans are discussed, agreed and approved in the same manner. This is a condition for ensuring the integrity of the ECAQA quality assurance system for all types of planning.

Subdivisions' plans are drawn up taking into account their core functions and based on the Strategic Development Plan and the Annual Action Plan, which include commitments to continuously improve the internal quality assurance system.

The start of strategic planning begins after the order of the Director General, the subsequent informing of stakeholders and the involvement of responsible staff from ECAQA departments. Subsequent planning will take into account the previous development strategy of the institution, more effectiveness and other relevant information. The strategic development plan is communicated to the staff and experts of ECAQA, periodically reviewed over a period of 5 years and published in an updated form, if necessary.

Operational planning and monitoring of current staff reports is carried out during weekly meetings with management and all staff.

7.4 Analysis and monitoring

Annual analysis and monitoring of the effectiveness and efficiency of the internal quality assurance system is carried out by the management, which guarantees its adequacy, efficiency and effectiveness. The results of the analysis are submitted to joint meetings of the ECAQA leadership, heads of departments and Adviser. Before this, the heads of departments carry out analysis at the department level, make proposals for improvement and submit them for discussion and analysis of the first head of the centre. This ensures that the processes of functioning, analysis and continuous improvement of the ECAQA quality assurance system by all employees are maintained.

The current analysis of the internal quality assurance system and the monitoring of the compliance of the activities of the departments with this system are carried out by the heads of departments weekly, the results are discussed at the weekly scheduled meetings. Records with the results of the analysis and monitoring of the internal quality assurance system are maintained.

8. Institutional and Specialized Accreditation

ECAQA, as a specialized agency, conducts institutional and specialized (programme) accreditation of higher, postgraduate and CPD education.

ECAQA plans and implements processes for preparing and conducting accreditation in accordance with the requirements of the MSHE of the Republic of Kazakhstan to accrediting agencies.

The accreditation process includes the procedures and stages of accreditation, including: goals, programme of events, deadlines, programme of visits to the EEC, the need for resources,

distribution of duties and responsibilities among ECAQA staff (accreditation and monitoring department), quality control measures of the accreditation procedure, the need for in the creation and submission of documents, processes for assessing compliance with standards for accreditation and post-accreditation monitoring of educational organisations (educational programme). When planning for accreditation, the first manager determines the need for developing or improving processes.

The accreditation process is based on the principles of quality assurance for accreditation and is ensured by the effective work of the Accreditation Council, Expert Board and ECAQA expert commissions, External Expert Commissions, expert database, standards for accreditation and guides to self-evaluation for HEIs and medical educational organisations and educational programmes. All accreditation processes are documented.

8.1 Principles for quality assurance of accreditation

Quality assurance in higher professional education and external evaluation of educational organisations (educational programme) in the context of accreditation are based on the following principles:

voluntariness - the accreditation procedure is carried out on a voluntary basis and the recognition of the institutional autonomy of an educational organisation;

responsibility - the accreditation process clearly defines responsibilities and relationships, interactions with all stakeholders (university, students, professional organisations and health professionals, the state), is provided with agreed standards and guidelines, the necessary resources and innovations for the development of the accreditation system, and is supported by competent experts;

transparency - internal and external evaluation is carried out openly and transparently, providing access to information on the process and procedures, standards for accreditation, guidelines for self-evaluation and external evaluation for all stakeholders;

independence - external assessment, decision making on accreditation is carried out on the basis of reliable information and the results of external expert evaluation, regardless of third parties (authorized and state bodies, administration of an educational organisation and public opinion);

objectivity - conducting an external assessment using clearly established criteria and standards for accreditation, taking into account institutional and programmatic features and making decisions on accreditation based on the results of external assessment and recommendations of the EEC;

confidentiality - the information and data provided by the report on institutional self-evaluation and the information obtained during the external evaluation of the educational institution are strictly confidential;

efficiency - external evaluation is focused on the final result, which contributes to the improvement of the internal environment and institutional mechanisms for quality assurance, the development of a culture of quality and ensures the relationship between internal and external quality assurance mechanisms.

8.2 Accreditation Council

The AC implements its duration in accordance with the Provision on the Accreditation Council and the ECAQA Strategic Development Plan, which are agreed with the Adviser and approved by the ECAQA Director General.

The AC operates in accordance with the Standards and guidelines of the Eurasian Centre for Accreditation and Quality Assurance, developed on the basis of international Guidelines and Standards for quality assurance in the European Higher Education Area (ESG), International Standards for the World Federation for Medical Education (WFME) and International Standards Organisation of PhD Education in Biomedical and Clinical Sciences in the European Region (ORPHEUS).

The AC is headed by a chairman elected for a term of 5 years. The AC is a consultative and

advisory body of ECAQA, established to make decisions on the accreditation of educational organisations and educational programmes. In its activities, the AC is guided by the legislation of the Republic of Kazakhstan, other regulations of the Republic of Kazakhstan in education, medical education and health care, Constitution and regulatory documents of the ECAQA.

The AC holds regular meetings, which are recorded by the secretary in minutes signed by the chairperson. Meetings of the AC may be videotaped, subject to information security requirements. Minutes and video (photo) materials are stored in paper and electronic form. The AC secretary, appointed from among the ECAQA staff, is responsible for the proper preparation and safekeeping of the minutes and the attendance record of the AC members. The chairperson of the AC is responsible for preparing the annual report of the AC. At the end of the calendar year, the report is submitted to the ECAQA and then stored in the File Registry.

Functions of the AC: assessment of the quality of educational services of educational organisations and health organisations implementing educational programmes, based on current Standards for institutional and/or specialized accreditation of ECAQA; making decisions on the accreditation of medical education and health organisations and/or educational programmes; making proposals for the development and improvement of ECAQA activities.

The composition of the Accreditation Council is formed in accordance with the WHO/WFME Guidelines for the Accreditation of Medical Education from among representatives of organisations of medical education and health care of the Republic of Kazakhstan, foreign experts representing international organisations in education, healthcare and science.

The AC takes the following decisions on accreditation: full accreditation – to accredit for a period of 5 years; to accredit for 3 years (for new educational programmes and CPD organisations with a period of operation of less than 3 years); conditional accreditation – to accredit conditionally for 1 year with a repeat visit to the educational organisation; denial of accreditation or withdrawal of the accreditation certificate. The decision on the accreditation of an educational organisation (educational programme) is submitted to the MSHE RK for inclusion in the Register of the Unified Higher Education Platform (UHEP), published on the website of the accrediting agency, and included in the international education quality registers – ENQA-DEQAR and APQR-DAQAR. The decision on the accreditation of the Bachelor's degree educational programme in the speciality "General Medicine" (Kazakhstan), "General Medicine" (Uzbekistan, Tajikistan) is published on the WFME Portal.

8.3 Expert Board

The EB implements its duration in accordance with the Regulation on the Expert Board and the ECAQA Strategic Development Plan, which are agreed with the Adviser and approved by the ECAQA Director General. The EB is a permanent body and includes the chairmen of expert commissions on the profile of specialties and level of education. The ECAQA science consultant coordinates EB activities.

The EB is headed by a chairman elected for a term of 5 years. In its activities, the EB is guided by the legislation of the Republic of Kazakhstan, other regulations of the Republic of Kazakhstan in education, medical education and health care, Constitution and regulatory documents of the ECAQA. The EB meets periodically, which are documented by the EB Secretary in the form of a protocol signed by the EB Chairman. Protocols and other materials related to EB are stored in paper and electronic form. Responsibility for the proper registration and preservation of the protocol and the list of registration of the EB members present is the Secretary of the EB, appointed from among the EB members for 5 years. Documentation on the EB is stored in the File register.

Being a part of the EB, Expert Commissions are formed in the areas of specialization and levels of training in:

- 1) Higher and postgraduate education in health care (institutional, specialized accreditation);

- 2) Continuous professional development education (institutional and specialized accreditation of CPD and non-formal education);
- 3) Nursing education (institutional and specialized accreditation of technical and professional education, academic bachelor's and applied bachelor's degree programmes);
- 4) Simulation education;
- 5) Higher and postgraduate professional education.

Tasks of the Expert Board:

- Involvement of faculty, administrative and managerial staff of educational organisations, employees of state institutions and research organisations as ECAQA experts to participate in the accreditation procedure, conduct peer review of the activities of educational organisations and/or educational programmes.
- Involvement of managers and employees of medical and other organisations as ECAQA employing experts to participate in the accreditation procedure, conducting expert evaluation of the activities of educational organisations/or educational programmes.
- Forming an expert base on the basis of qualification requirements and nominated from relevant organisations, including international associations and organisations.
- Training of experts (academic experts, employers, students).
- Development and examination of Standards and Guidelines for institutional/specialized accreditation of educational organisations/educational programmes.
- Development of internal regulations (Regulations, Guidelines, Recommendations) for accreditation.
- Development of proposals for improving institutional processes and internal mechanisms for ensuring the quality of educational organisations and improving educational programmes based on external assessment results.

8.4 External Expert Commission

The EEC fulfils its duration in accordance with the Regulation on the External Expert Commission, which is approved by the ECAQA Director General.

EEC is created by ECAQA to conduct institutional or specialized (programmatic) accreditation for compliance with current ECAQA standards during an external visit to a educational organisation. The composition of the EEC is formed in accordance with the Regulations on the EEC and includes the chair, certified experts of ECAQA in the field of higher, postgraduate and CPD education, foreign experts, employers and students. The qualitative composition of the EEC is formed in order to fully cover the expertise of the main activities of the accredited educational organisation, or key aspects of the educational programme in accordance with the standards and criteria of institutional and specialized accreditation.

The EEC conducts an external evaluation of the education organisation or educational programme based on the visit programme for a period of 2,5 to 4 days, which is developed by the ECAQA, coordinated with the EEC Chairperson and agreed with the heads of the educational organization. The programme of the site visit is approved by the ECAQA Director General.

The EEC, after the end of the visit and the external evaluation of the education organisation or educational programme, provides the ECAQA with a report on the results of the visit with sound conclusions and recommendations for improving the education organization or educational programme. The main documents that guide the EEC are the Guidelines for External Evaluation and the visit to the educational organisation and the Guidelines for the preparation of the EEC report.

EEC tasks:

- 1) assessment of the completeness and reliability of the results of the self-evaluation of the educational organisation or educational programme;
- 2) drawing up a report on the results of an external expert assessment of the education institution or educational programme for compliance with ECAQA standards;

3) development of recommendations for improving the activities of the educational organisation or educational programme;

4) providing an external evaluation report and developing recommendations to the ECAQA Accreditation Council in accordance with the Standards for institutional or specialized accreditation.

ECAQA provides certification of external experts, which confirms their competence in conducting the institutional/specialized accreditation procedure. The expert is issued with a Certificate valid for a period of 5 years. In the event of loss or damage to the certificate, a duplicate certificate is issued upon the expert's application. The certificate is registered by ECAQA in the certificate registration log. If violations are identified in the activities of an external expert, ECAQA has the right to revoke the certificate and to remove the expert from the ECAQA expert database.

ECAQA organises training workshops for experts, while engaging Kazakhstani speakers, ECAQA undertakes the costs of conducting them.

8.5 Experts

The ECAQA expert database is formed on the basis of the requirements for experts described in the Regulation on Experts and posted on the ECAQA website.

The structure of the ECAQA expert database is formed taking into account the requirements of the following regulatory documents: (1) "On Approval of the Requirements for an Accreditation Body in the Field of Higher and Postgraduate Education and the Rules for the Recognition of Accreditation Bodies in the Field of Higher and Postgraduate Education, including Foreign Ones", Order of the Minister of Education and Science of the Republic of Kazakhstan No. 629 dated 1 November 2016, registered with the Ministry of Justice of the Republic of Kazakhstan on 19 November 2016 under No. 14438; (2) "On Amendments to Order of the Minister of Education and Science of the Republic of Kazakhstan No. 629 dated 1 November 2016 'On Approval of the Rules for the Recognition of Accreditation Bodies, including Foreign Ones, and the Formation of the Register of Recognised Accreditation Bodies, Accredited Educational Organisations and Educational Programmes'", Order of the Minister of Education and Science of the Republic of Kazakhstan No. 531 dated 4 October 2018, registered with the Ministry of Justice of the Republic of Kazakhstan on 29 October 2018 under No. 17628; (3) "On Approval of the Requirements and Rules for the Recognition of Accreditation Bodies, including Foreign Ones", Order of the Minister of Education of the Republic of Kazakhstan No. 34 dated 13 February 2023, registered with the Ministry of Justice of the Republic of Kazakhstan on 14 February 2023 under No. 31902.

The expert is guided in his actions and actions by the Code of Ethics of the external ECAQA accreditation expert, who signs the EEC when it is included. Violation of the requirements of this Code leads to the termination of relations with an expert. The Code is a publicly available and public document, posted on the ECAQA website and requires familiarization with it of all experts involved in the accreditation process.

The expert should ensure that the level of his qualifications complies with the established ECAQA requirements taking into account changes in the legislation of the Republic of Kazakhstan in education (including state educational standards and requirements), improving the forms and methods of conducting accreditation expertise, developing computer equipment and information technologies through advanced training, and also self-education.

The expert participates in seminars, conferences and other events held by the ECAQA.

8.6 Standards and guidelines for accreditation

Standards and guidelines for institutional and specialized accreditation are developed by members of the ECAQA Expert Board, analysed and approved by the Adviser, reviewed by the competent representatives of educational and health organisations, approved and enforced by order of the Director General.

Standards and guidelines are published on paper in the form of a brochure, posted on the ECAQA website and stored in the corresponding file of the file register and in electronic media. Standards and guidelines are available for download on the ECAQA website. Changes and additions are made to the current accreditation standard in order to further improve it.

Standards are updated every 5 years. Changes and additions to the standard are provided by ECAQA. In case of initiation of changes and additions to existing standards by stakeholders, proposals and comments are sent to ECAQA. Changes and additions to the current standards for accreditation after their approval are approved by the order of the ECAQA Director General in a new edition with amendments to the current standard.

The ECAQA accreditation standards are based on the International Standards of the World Federation for Medical Education (WFME) for the improvement of education quality (2015, 2020, 2023, 2025), the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), the International Standards for PhD Education in Biomedicine and Health Sciences in Europe of the Organisation for PhD Education in Biomedicine and Health Sciences in the European System (ORPHEUS), the Association of Medical Schools in Europe (AMSE) and the World Federation for Medical Education (WFME), taking into account national specifics and in accordance with the national needs and priorities of the healthcare system of the Republic of Kazakhstan.

The guides to self-assessment, institutional or programme, are developed based on the ECAQA Standards for accreditation. The guidelines are intended for the education organization to carry out an institutional or specialized (programmatic) self-evaluation procedure and include recommendations for the preparation of a self-evaluation report and preparation for an external assessment and a visit to the EEC.

The main objectives of the implementation of standards for accreditation are:

- introducing a system of internal and external quality assurance at the institutional and national level, harmonized with the principles of the best international practice for quality assurance in higher professional education;
- assistance in the development of a quality culture that is supported by students, academic staff, management and the AMP of the educational organisation;
- external evaluation of compliance with the requirements of standards for accreditation and quality assurance of educational programmes in the field of medicine, dentistry, pharmacy, public health and nursing, taking into account educational levels;
- external evaluation for compliance with the standards for accreditation and quality assurance of higher, postgraduate, continuing education organizations and colleges;
- promoting continuous improvement of the quality of educational programmes and the availability of resources in accordance with the requirements of rapidly changing conditions and needs of the labour market, and the achievement of competitiveness of the national system of higher professional education;
- protection of the interests of the state, society and consumer rights by providing accurate information to the public and authorized bodies in education and health about the results of accreditation.

8.7 Rules and procedures for the accreditation process

The accreditation process includes the following main elements and stages:

- 1) the provision by the education organization of an application and a brief description of its activities to the accrediting agency;
- 2) the signing of a bilateral agreement between the accrediting agency and the educational organisation on institutional (specialized) accreditation, indicating the cost of the procedure and deadlines;
- 3) the procedure of self-evaluation of the educational organisation (educational programme) in accordance with the criteria and requirements of this standard and the provision of a self-evaluation report to the accrediting agency;

- 4) consideration and review of the report on the self-evaluation of the educational organisation (educational programme) in the accrediting agency;
- 5) external assessment procedure - EEC visit to the education organization, which conducts an external assessment, prepares a report and recommendations for the Accreditation Council;
- 6) preparation of materials on the results of the EEC (the final report of the EEC) and their submission to the Accreditation Council;
- 7) consideration of the issue of accreditation of the education organisation (educational programme) and the adoption of a final decision by the Accreditation Council of the accrediting agency based on the materials provided and recommendations of the EEC;
- 8) the publication of a brief report on the accreditation of the educational organization (educational programme) on the website of the accrediting agency in the event of a positive decision;
- 9) follow-up procedures to verify the elimination of comments made by the education organization on the basis of the recommendations contained in the EEC report;

The procedure of institutional (specialized) accreditation is carried out in accordance with the Law of the Republic of Kazakhstan “On Education” dated July 27, 2007 No. 319-III at the expense of financial resources of educational organisations upon the application of this organisation.

Under the terms of the accreditation Contract concluded with the educational institution (organization), the accreditation agency conducts a training seminar on the accreditation process and the application of accreditation standards in the self-assessment procedure.

After completion of the self-evaluation procedure, the education organization no later than 2 months before the intended visit, the EEC sends to the accrediting agency electronic version of the self-evaluation report on its educational activities (educational programme) in three languages (State, Russian, English). The report must be accompanied by a letter signed by the first head of the educational organization, which will certify the truthfulness of the data of the self-evaluation report;

Reports are carefully studied by all members of the expert group before visiting the education organization. The experts prepare a list of questions and a list of documents, which they intend to study before the visit to the educational organisation. The educational organisation may read the list of questions and make additions to the self-assessment report before the visit of the expert commission. The EEC conducts a visit to evaluate the credibility of the results of the institutional (specialized) self-assessment;

The rules of the EEC work in the educational organisation are carried out in accordance with the standard and guidelines for external evaluation when visiting in the educational organisation approved by the accrediting agency;

8.8 Requirements for the formation of an external evaluation report

ECAQA has developed Guidelines on the Preparation of the EEC Report. The report on the results of the external evaluation of the educational organisation (educational programme) being accredited is submitted by the experts to the accrediting agency no later than 14 working days after the completion of the EEC visit. The report is then sent by the accrediting agency to the educational organisation for review and factual verification. The final version of the report is submitted to the Accreditation Council in advance of the planned date of the meeting. Subsequently, after the Accreditation Council has taken its decision, the EEC report is submitted to the educational organisation for the development of a corrective action plan during the post-accreditation monitoring period.

The decision of the Accreditation Council is taken on the basis of the self-assessment report of the educational organisation (educational programme), the final report of the external expert commission, and the presentation by the Chair of the EEC at the meeting of the

8.9 Decision-making on appeals and complaints

8.9.1 Appeal procedure

The grounds for lodging an appeal are the disagreement of the educational organisation with the decision of the Accreditation Council following institutional/specialized accreditation. The educational organisation has the right to apply to ECAQA within 7 (seven) working days from the date of the written notification to the educational organisation of the decision taken at the meeting of the Accreditation Council. The educational organisation's appeal is registered and forwarded to the Director General of ECAQA, who refers it to the Chair of the Commission. A notification of receipt of the appeal is sent to the "Applicant" at the e-mail address specified in the application.

To make a decision on the appeal, the ECAQA forms the Appeals Commission (hereinafter the Commission), acting on the basis of the Regulation on the Appeals Commission and operating as a collegiate body of ECAQA.

The Commission is guided in its activities by: the Constitution of the Republic of Kazakhstan, the Civil Code of the Republic of Kazakhstan, other laws and regulations of the Republic of Kazakhstan, international treaties and agreements in the field of accreditation of educational organisations.

The Commission consists of 6 (six) members, which are 4 (four) permanent members (chair, foreign expert as a vice-chair, secretary, lawyer) and 2 (two) non-permanent members, including one student representative

The Chair and Deputy Chair of the Commission are appointed on the basis of proposals from professional associations of employers/educational organisations and are approved by a decision of the Director General of ECAQA. In the absence of the Chair of the Commission for a valid reason, his/her powers are exercised by the Deputy.

The term of office of the permanent members of the Commission is three years. Upon expiry of the term of office, a new composition of the Commission is elected in accordance with the above principle or, in the case of the proper performance of their duties, the term of office of the current members of the Commission is extended by a decision of the Director General of ECAQA.

The non-permanent members of the Commission are selected by the Chair of the Commission and formalised by an order of the Director General of ECAQA.

Within 30 (thirty) calendar days of receiving the appeal, the Commission takes a decision containing recommendations on the appeal for the AC, which is submitted for consideration at its next meeting. No repeat appeal is conducted. The meeting of the Commission is closed and may be held remotely using online platforms. A meeting of the Commission is valid if all members of the Committee have taken part in it. The decision on the appeal is taken by open vote on the basis of a majority of the votes of the Commission members and is formalised in minutes signed by the Chair of the Commission and its members. In the event of a tie, the vote of the Chair of the Commission is decisive.

The decision of the Commission is final, is drawn up in writing and is reflected in the minutes, which are submitted to the Director General of ECAQA for review. No repeat appeal is conducted. Claims regarding the results of the appeal are not considered.

The decision of the Commission, in writing and signed by the Director General of ECAQA, is sent to the Applicant upon expiry of 30 (thirty) days after the lodging of the appeal.

The decision of the Committee serves as the basis for making changes to the ECAQA Register of Accredited Educational Institutions and/or Educational Programmes and to the Register of the UHES of the MSHE of the Republic of Kazakhstan.

8.9.2 Complaints Review Procedure

The grounds for lodging a complaint may be any decisions, actions or omissions of ECAQA staff and external experts, if such decisions and actions have infringed the rights and

obligations of the applicant. The educational institution's complaint is registered and forwarded to the Director General of ECAQA, who refers it to the Chair of the Commission. A notification of receipt of the complaint is sent to the "Applicant" at the e-mail address specified in the application.

To take a decision on the complaint, ECAQA forms a Complaints Review Commission (hereinafter – the Commission), which operates on the basis of the Regulation on the Complaints Review Commission and functions as a collegial body of ECAQA.

In its activities, the Commission is governed by: the Constitution of the Republic of Kazakhstan; the Civil Code of the Republic of Kazakhstan; other laws and regulatory legal acts of the Republic of Kazakhstan; international treaties and agreements in the field of accreditation of educational institutions; and this Regulation and the regulatory documents of ECAQA.

The Commission consists of 5 (five) independent members on a voluntary basis, of whom 3 are permanent members (the chair, the deputy chair and the secretary) and 2 are non-permanent members.

The permanent members of the Commission are selected on the basis of proposals from professional associations of employers/educational organisations and are approved by a decision of the Director General of ECAQA. In the absence of the Chair of the Commission for a valid reason, his/her powers are exercised by the Deputy.

The term of office of the permanent members of the Commission is 5 (five) years. Upon expiry of the term of office of the permanent members of the Commission, a new composition of permanent members is elected in accordance with the above principle or, in the case of the proper performance of their duties, the term of office of the current permanent members of the Commission is extended by a decision of the Director General of ECAQA. The non-permanent members of the Commission (including students) are selected by the Chair of the Commission and formalised by an order of the Director General of the accreditation body. The term of office of the non-permanent members of the Commission is equal to the period of consideration of the complaint.

A member of ECAQA staff is appointed as the Secretary of the Commission for a period of 5 years; this person does not participate in the discussion of the substance of the complaint or in the taking of decisions, but provides organisational and technical support and records the results of the Commission's work in the minutes. Before the Commission begins its work, the absence of a conflict of interest with the applicant is verified. In the event of a conflict of interest, another ECAQA employee is appointed by an order of the Director General of ECAQA.

When the complaint is considered by the Commission, the confidentiality of information constituting a commercial secret and of personal data is observed. The Commission may request copies of the documents necessary for the consideration of the subject of the complaint, as well as additional information (including in oral form), from ECAQA and from the Chair and members of the EEC. Within 30 (thirty) calendar days of receiving the complaint, the Commission takes a decision containing recommendations on the complaint for the Director General of ECAQA. The meeting of the Commission is closed and may be held remotely using online platforms.

The decision on the complaint is taken by open vote on the basis of a majority of the votes of the Commission members and is formalised in minutes signed by the Chair of the Commission and its members. In the event of a tie, the vote of the Chair of the Commission is decisive.

Following the consideration of the application, the Commission has the right to recommend that the Director General of ECAQA take appropriate measures.

8.10 Post-accreditation monitoring

ECAQA conducts post-accreditation monitoring during the entire accreditation period of the educational organisation or educational programme.

Post-accreditation monitoring of the educational organisation is carried out by submitting to ECAQA an annual report on the implementation of the improvement plan based on the recommendation of the EEC.

ECAQA is entitled to send an expert commission to deal with complaints about the quality

of training or the inappropriate implementation of educational programmes by this organisation.

9. Continuous Renewal

ECAQA continuously improves its activities based on international best practices in the field of accreditation and quality assurance in education and healthcare.

The goal of continuous improvement is to achieve the optimum quality of services provided by ECAQA.

ECAQA seeks to continuously improve its performance by:

- incorporating relevant objectives into the ECAQA Development Strategy;
- engaging staff, experts, and other stakeholders in continuous improvement processes;
- conducting management analysis of the internal quality assurance system;
- conducting regular internal audits;
- assessing stakeholder satisfaction;
- evaluating the process of organising and conducting accreditation;
- developing corrective and preventive actions.

The ECAQA Strategic Development Plan and the annual Action Plan include objectives for the continuous improvement of core activities. The processes of the internal quality assurance system are designed in accordance with the requirements of the recognition bodies.

The following information is studied and analysed:

- information on best accreditation practices abroad;
- information on the characteristics, criteria, and trends of processes and services in the field of accreditation, including the possibility of applying preventive actions;
- information from external sources on trends, new technologies, changes in requirements, and consumer preferences in the field of accreditation, particularly those of higher education institutions (HEIs), educational organisations, the state, and society as a whole.

ECAQA assesses the quality of its activities using the following mechanisms:

1) Evaluation of the Effectiveness and Efficiency of the Internal Quality Assurance System

The effectiveness and efficiency of the internal quality assurance system are evaluated through an analysis of quality assurance processes by ECAQA senior management, including:

- analysis of key ECAQA activity processes, including monitoring, accreditation, administration, planning, provision of resources, financing, provision of information and communication tools, international cooperation, public relations, and website management;
- discussion of the processes and quality of developed documents and the efficiency of office work;
- discussion of the organisation of the accreditation process;
- analysis of the processes of the Expert Board (EB) and Accreditation Council (AC).

The results of the assessment of the effectiveness and efficiency of the internal quality assurance system are presented for discussion on a monthly basis at joint meetings of ECAQA management, heads of departments, and the Chairpersons of the EB and AC.

If the processes do not achieve the expected results, corrective actions are developed.

2) Internal Performance Assessment

Internal performance assessment is conducted through a quality review of the functioning of ECAQA departments in accordance with the approved departmental work plans.

An internal assessment of the quality assurance system is planned taking into account the priority of the type or area of work being reviewed and the relevant business processes.

The ECAQA Director General is responsible for determining the requirements for planning and conducting internal audits, as well as for reporting and record-keeping.

The ECAQA Director General establishes a working group to conduct each internal audit. Auditors do not audit their own work.

Based on the results of internal performance assessments, validation reports are prepared and provided to the responsible employees for review and for planning further corrective and improvement actions.

The date of the follow-up review is agreed in advance. During the follow-up review, the responsible officer must provide evidence of the changes and improvements implemented.

3) Assessment of Consumer Satisfaction

Consumer satisfaction is assessed through in-person or online surveys, questionnaires, and the collection of feedback from accredited educational institutions and external experts.

The information obtained is analysed and used to improve the accreditation process and the methodological support provided for accreditation.

The questionnaires and surveys are developed by ECAQA. They are designed for:

- staff and teachers of educational institutions;
- practising specialists;
- students at different levels of education.

Responsibility for assessing consumer satisfaction lies with the Head of the Accreditation and Monitoring Department.

Analytical reports are endorsed by the Head of the Accreditation and Monitoring Department and submitted to the Expert Board for discussion.

The analytical reports are maintained both in paper form in the File Register and in electronic form.

4) Assessment of the Process of Organising and Conducting Accreditation

The assessment of the process of organising and conducting accreditation is a key activity of ECAQA.

A planned approach is applied to the accreditation process and follow-up activities, including:

- the decision-making procedure of the Accreditation Council (AC);
- submission of the AC decision to the Ministry of Science and Higher Education of the Republic of Kazakhstan (MSHE RK);
- post-accreditation monitoring.

ECAQA accreditation experts prepare organisational materials, including applications and contracts, and develop methodological support for the accreditation process, including standards, guidelines, recommendations, quality profiles, and external evaluation criteria.

The Accreditation and Monitoring Department, together with members of the Expert Board, drafts, coordinates, and approves the composition of the External Expert Commission (EEC), which is responsible for evaluating compliance with the accreditation standards.

Records are maintained to confirm the completion of the accreditation stages and the visits of the EEC to the educational organisation.

After the accreditation is completed and the decision is made by the AC, the accrediting agency proceeds to post-accreditation monitoring in order to assess the compliance and further adherence of the educational organisation to the standards for accreditation and the implementation of the recommendations of the EEC.

The quality assessment of the accreditation process is carried out by determining:

- level of stakeholder satisfaction (teachers, students, employers) as a result of the survey of an educational organisation;
- survey of experts who participated in the work of the EEC;
- qualitative composition of the EEC;
- compliance with the regulations of the site visit programme of the EEC;
- absence of complaints and appeals from the educational organisation;

Data on the effectiveness of the processes are analysed at weekly meetings, meetings of working groups of the Expert Board and Accreditation Council. The results of this analysis which

are recommendations (including preventive actions) shall be transmitted for review of the management.

1) Development of corrective and preventive actions

In order to eliminate the causes of nonconformities, in order to prevent their recurrence, ECAQA develops and takes corrective actions that include:

- analysis of nonconformity;
- determining the causes of nonconformity;
- assessment of necessary actions to prevent recurrence;
- identification and implementation of necessary actions;
- recording the results of actions taken;
- analysis of the results of actions taken.

10. Revision Commission

Pursuant to Clause 3 of the Charter of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education (hereinafter referred to as "ECAQA" and the "Charter"), the Revision Commission is a supervisory body of ECAQA.

In accordance with Clause 3.5 of the Charter, the Revision Commission is responsible for assessing the accuracy of reports and the compliance of ECAQA's activities with the applicable legislation and the Charter.

Pursuant to Paragraph 6 of Article 12 of the Law of the Republic of Kazakhstan "On Non-Commercial Organisations" (hereinafter referred to as the "Law"), ECAQA may conduct audits of its financial activities in accordance with Clause 3 of the ECAQA Charter. Such audits shall be conducted by an auditor or an audit organisation.

The procedure for electing an auditor, establishing a Revision Commission, or engaging audit organisations shall be carried out in accordance with Regulatory Resolution No. 11-NK of the Accounts Committee for Control over the Execution of the Republican Budget dated 28 November 2015, "On Approval of the Model Regulation on Revision Commissions of the Capital, Regions, and Cities of National Significance", registered with the Ministry of Justice of the Republic of Kazakhstan on 26 December 2015 under No. 12514.

The Revision Commission, appointed at the initiative and by decision of the Founder of ECAQA, shall conduct an assessment of the financial and economic activities of ECAQA and, based on the results of the assessment, shall prepare and submit a report (or statement) to the Founder for consideration and approval.

Persons who are members of the executive body of ECAQA, including the Director General, as well as ECAQA employees, may not be members of the Revision Commission in order to avoid conflicts of interest. The number of members and the term of operation of the Revision Commission shall be determined by the Founder of ECAQA on the basis of the objectives and tasks established by the Founder prior to the commencement of the Revision Commission's work, but shall not exceed five persons.

The Founder shall notify the Director General of ECAQA in writing, in free form, of the intention to establish a Revision Commission at least one month prior to the commencement of its work, indicating the reason for establishing the Revision Commission.

Given that ECAQA's financial transactions are carried out exclusively through official bank accounts held in different currencies with a bank in Kazakhstan, the Founder may, through the accountant and with prior notification of the Director General of ECAQA, conduct an assessment of the appropriateness of expenditures.

The basis for such assessment shall be ECAQA's annual budget, developed by the Planning and Administration Department and approved by the Director General. The budget shall be submitted to the Founder at the beginning of each year.

At the end of the year, ECAQA shall submit a financial report to the Founder.



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