

# Medical Education Accreditation Standards

2014



한국의학교육평가원

Korean Institute of Medical Education and Evaluation



## **Evaluation Standard by Area**

### **1. Governance and Administration**

#### **1-1 Mission**

**1-1-1 Does the medical school have a mission and does it include contents addressing the social responsibility of the medical school and the need to serve public interest ?**

**[Basic standard]** The mission of the medical school is stated.

**1-1-2 Is the autonomy and independence of the medical school guaranteed?**

**[Basic standard]** Independence and autonomy of the medical school's administration are respected by the university headquarter, medical center and/or educational foundation. The formal policy is provided for the independence and autonomy of the medical school .

[annotation] This item describes an overall opinion on the administration process of the medical school (education, facility, human resources, administrative and financial affairs etc). The administration of the medical school should be based on professionalism.

**1-1-3 Is the medical school exerting efforts to fulfill the WHO recommended social accountability ?**

**[Basic standard]** The medical school has education, research and health care policies regarding the implementation of social accountability and such policies are being implemented.

## 1-2 Administration and Governance

### 1-2-1 Is the work for the medical school's administration appropriately divided?

**[Basic standard]** The work of education, faculty and student affairs is divided while administratively associated. Each of the three areas is appointed by the separate vice dean.

**[annotation]** Vice dean refers to a person who receives separate compensation for being responsible for an certain administrative area. Depending on the relevance of two work areas, vice deans can be in charge of two work areas.

**[Quality development standard]** Sufficient numbers of vice deans including those for education, faculty, student and research areas, etc. have been appointed and such vice deans should demonstrate assigned activities.

**1-2-2 Is the medical school's staff work defined and are there sufficient administrative staffs for each individual work area?**

**[Basic standard]** The staff work is defined into areas such as education, faculty, student, research, post-graduate education, admissions and finance. The number of administrative staffs are at least 5.

[annotation] A staff can be in charge of two related work areas depending on the relevance of the work.

**1-2-3 Is the system for developing and maintaining the expertise of the academic leadership appropriate?**

**[Basic standard]** The medical school is exerting continuous efforts to secure the expertise of the academic leadership.

[annotation] The academic leadership refers to the dean and professors with administrative responsibilities.

**[Quality development standard]** Experience in various fields including education, faculty development and research is stated as the dean's leadership qualifications.

[annotation] The qualifications for dean candidates should be specified in the selection rules or the medical school's regulations/operational rules or internal rules. Describe whether qualifications for positions are publicly announced before actual appointment.

**1-2-4 Does the dean have autonomy in terms of the medical school's administrative planning and budget execution and is a medical school-based management system established?**

**[Basic standard]** The dean has the power over the medical school's administrative work and budget execution as delegated (or approved) by the university (or medical center) and such power is exercised autonomously by the dean under his/her own responsibility.

[annotation] There must be written regulations stipulating that a committee headed by the dean discusses matters such as hiring, promotion qualifications as well as overseas training qualifications for faculty. Lab costs and ordinary expenses should be executed at the dean's discretion and the medical school's academic schedule must be planned and managed under the dean's responsibilities.

[annotation] The discretionary spending amount of the dean does not refer to the business promotion expense or reserved budget included in the medical school's budget. The discretionary spending amount refers to the financial resources that the dean can execute at his discretion to achieve the medical school's mission and goal.

**1-2-5 Are policy decision structures and procedures of the medical school operated appropriately?**

**[Basic standard]** The medical school has appropriate policy decision structures and procedures for medical school administration.

[annotation] At least 1/3 of members of the human resources related committee should be appointed through an election. Other committees must have not more than 1/4 of ex-officio members. Committees should have a diverse membership to represent various job levels and fields (basic, clinical etc). Each committee must meet at least once during a semester.

**1-2-6 If the medical school hospital is geographically separated, is there a medical school administrative structure in each hospital to support student education and faculty research?**

**[Basic standard]** Each geographically separated medical school hospital must have an appointed faculty in charge of student education and faculty research. Each location must also have an administrative structure supporting education and faculty research.

**[annotation]** The medical school's affiliated hospitals must hold regular meetings to standardize students' clinical clerkship. There must be actual implementation of such meetings' results. In addition, the Dean's Group must be directly involved in the development, implementations and evaluation of programs provided at all education sites.

## **1-3 Educational Budget**

### **1-3-1 Is the medical school's financing system for medical school administration appropriate?**

**[Basic standard]** The medical school has prepared and is administrating a reasonable budgeting system.

[annotation] When preparing the budget, the medical school must collect each department's (classroom, department, integrated department) business plan and budgetary opinions.

**1-3-2 Does the medical school have appropriate financial resources related with education?**

**[Basic standard]** Educational budget is prepared appropriately.

[annotation] Describe what education related finances have been secured by item (student lab expenses, curriculum development and operation expenses, faculty development expenses, domestic/international faculty training support expenses, education-related seminar organizing cost, student community service activity support expenses etc) as well as the medical school's efforts and achievements. All material should cover the recent 6-year period with information organized by year to show change and trends.

**1-3-3 Is there the medical school's auditing system?**

**[Basic standard]** The auditing system of medical school is appropriate.

## **1-4 Development Plan**

**1-4-1 Is there an established medical school development plan and is the support from the university or board of foundation appropriate ?**

**[Basic standard]** The medical school development plan is described and the support from the university or board of foundation is appropriate.

**1-4-2 Is there a medical school development fund and is its management appropriate?**

**[Basic standard]** There is a medical school development fund and its management is appropriate.

**1-4-3 Are there appropriate participations of alumni or communities in medical school development and efforts of the medical school to encourage their active participation?**

**[Basic standard]** The alumni or communities participate in medical school development and the efforts of the medical school to encourage their active participation are appropriate.

## 1-5 Continuous renewal

### 1-5-1 Does the medical school have an organization that conducts self-assessment for quality management and improvement and does the medical school operate this organization appropriately?

**[Basic standard]** The medical school has an organization that conducts self-assessment for the medical school's continuous quality control and improvement. The operating budget of this organization is appropriate.

[annotation] The organization for the medical school's quality control and improvement must assess the medical school's progress in achieving management goals, regularly issue evaluation reports and reflect the results in medical school administration. There must also be a institutional device or specific effort to guarantee the expertise of committee members.

[annotation] The permanent organization for quality control and improvement of the medical school must have a specifically prepared budget supporting at least meeting expenses, workshop, external evaluation consulting fee, policy development research fee, program development expenses, research committee member activity fee and report writing fee etc. Also, such budgets should have been executed.

**[Quality development standard]** The annual budget of the relevant committee is sufficient and there are ongoing efforts to ensure the expertise of the committee members.

**1-5-2 Is the medical school reflecting previous accreditation results for continuous renewal?**

**[Basic standard]** There is a track record of continuous renewal in the medical school administration by reflecting the results of accreditation.

[annotation] While the evaluation should be comprehensively executed considering various factors including the short and mid-to-long-term improvement plans for each iarea needed for improvement, the amount of time since accreditation and the medical school's continuous renewal efforts, the medical school must demonstrate specific improvement results.

**1-5-3 Are the international exchanges with foreign medical schools appropriate?**

**[Basic standard]** The medical school has a dedicated organization for international cooperation with its own budgets and staffs. The overseas research and the student exchanges for education and clinical clerkship are being properly operated.

[annotation] The International Exchange Performance Reports must include documents proving such as exchange of letters regarding mutual visits or exchange student evaluation reports.

[annotation] The executed budget includes expenses paid by the student and documents proving school's support

**[Quality development standard]** The students can earn academic credits in overseas medical school and there are actual cases of students doing so.

## **2. Educational Program**

### **2-1 Educational Outcomes**

**2-1-1 Does the medical school have the educational aims and objectives that reflect its educational mission and unique characteristics?**

**[Basic standard]** The educational aims and educational objectives are described and the educational objectives are regularly evaluated.

**2-1-2 Are there graduate outcomes based on the educational objectives?**

**[Basic standard]** The medical school has specific graduate outcomes based on educational objectives and conducts regular evaluation to improve graduate outcomes.

**2-1-3 Is the curriculum appropriate for achieving educational objectives and graduate outcomes?**

**[Basic standard]** The medical school operates its curriculum based on self-developed curriculum principles. The curriculum reflects its educational objectives and graduate outcomes. The principles of the curriculum are continuously evaluated.

## **2-2 Curriculum Development and Support**

**2-2-1 Are the medical school's educational objectives well known to students and faculty/staffs and is the medical school making appropriate efforts to raise the awareness about educational objectives?**

**[Basic standard]** The medical school constituents are familiar with the educational objectives and the medical school is exerting various efforts to further raise the level of awareness. A survey of the medical school constituents' awareness of education objectives is conducted at least once every 2 years.

[annotation] Efforts by medical schools to raise constituents' awareness of the educational objectives include public announcement, seminars, workshops and posting on classrooms and laboratories, etc. Describe whether the questionnaire items for the survey on the awareness of educational objectives are appropriate and also describe the results of such regularly conducted surveys.

**2-2-2 Are the activities of the education related committee in charge of improving and managing curriculum appropriate?**

**[Basic standard]** The composition, role, authority and responsibilities of the committee in charge of curriculum improvement and management are clearly defined. The committee is organized independently and there are systematic devices to maintain a continuity in the committee's activities.

[annotation] Also describe regarding the committee in charge of curriculum improvement and management, 1) the degree of participation by faculties, students and administrative staffs, 2) whether or not an education expert participates in curriculum development and evaluation and 3) whether there are the medical school's internal rules that enable management and operation of the curriculum independently from interdepartmental interests and political influences.

**2-2-3 Has the curriculum committee secured a budget for curriculum development, management and evaluation and is this budget being executed appropriately?**

**[Basic standard]** The annual budget of the curriculum committee is appropriate.

[annotation] The budget of Curriculum Committee could be calculated by including the budget of various education-related committees. However, the actual education expenses incurred during conduct of OSCE and PBL etc. or the budget of the department of medical education and the student guidance committee etc. should not be included. In other words, it refers to the budget for the operation (meeting, seminars, research and development and workshops etc.) of the education-related committees.

**[Quality development standard]** The Curriculum Committee is held regularly at least once a month and its annual budget is sufficient.

**2-2-4 Are various instructional and learning methods being developed and applied for delivering curriculum effectively?**

**[Basic standard]** There are lesson plans reflecting instructional and learning methods. Also, 5% or more of the total lessons are conducted using various instructional and learning methods.

[annotation] Various instructional and learning methods refer to PBL and TBL etc. excluding traditional lecture methods and laboratory exercising).

**[Quality development standard]** Lesson plans are made available to students in advance and 20% or more of the total lessons are conducted using various instructional and learning methods.

**2-2-5 Is the support for educational expenses related with student education appropriate?**

**[Basic standard]** Educational expense related with student education is appropriate.

[annotation] Educational expenses related with student education include basic medicine laboratory exercise expenses, CPX- and OSCE-related expenses, costs for teaching materials, computer programs for student education, labor costs for standardized patients , development expenses for test questions , costs for clinical skill laboratory-related consumables, PBL and TBL operation expenses and clinical clerkship-related expenses.

**[Quality development standard]** Educational expenses related with student education is sufficient.

## **2-3 Curriculum Structure, Composition and Duration**

**2-3-1 Does the curriculum appropriately consist of the basic medicine, clinical medicine and medical humanities for achieving the education objectives and graduate outcomes?**

**[Basic standard]** The medical school is operating curricula capable of achieving education objectives and graduate outcomes. It also has specific operation guidelines.

**2-3-2 Are there phase outcomes of the basic medicine, clinical medicine and medical humanities being developed on the basis of the graduate outcomes?**

**[Basic standard]** The medical school has developed phase outcomes of the basic medicine, clinical medicine and medical humanities and those outcomes should reflect the graduate outcomes.

**2-3-3 Is the integrated curricula of the basic medicine, clinical medicine and medical humanities appropriate?**

**[Basic standard]** The medical school is operating appropriately integrated curricula of the basic medicine, clinical medicine and medical humanities.

**2-3-4 Is there a professor in charge of the integrated curriculum and are the rights and responsibilities of the professor appropriate?**

**[Basic standard]** There is a professor in charge of the integrated curriculum and there are rules regarding the rights and responsibilities of the professor.

[annotation] An integrated curriculum refers to interdisciplinary & multidisciplinary integrated courses (e.g. normal structure of the human body, hemato-oncology, growth and aging etc). There should exist a separate professor designated to operate the each integrated course.

**2-3-5 Are the outcomes of the both course and lesson defined and reflected in instruction?**

**[Basic standard]** Each course has specific learning outcomes and these outcomes are reflected in instruction.

**2-3-6 Are the educational contents of the basic medicine appropriate in order to achieve education objectives and graduate outcomes?**

**[Basic standard]** The contents of the basic medicine are comprised appropriately to achieve the educational objectives and graduate outcomes.

**2-3-7 Are the educational contents of clinical medicine appropriate in order to achieve educational objectives and graduate outcomes?**

**[Basic standard]** The educational contents of clinical medicine are comprised appropriately to attain the educational objectives and graduate outcomes.

**2-3-8 Are there preparatory instructions for the clinical clerkship before it starts?**

**[Basic standard]** Prior to the clinical clerkship, there exist preparatory instructions which include trainings of patient communication skills and basic clinical skills. Such preparatory instruction courses must have a minimum of 4 weeks or more if provided as a block or have been established for at least 2 semesters if provided as a longitudinal course.

[annotation] Preparatory instruction for the clinical clerkship refers to ICM(Introduction to Clinical Medicine) or FCM (Fundamentals of Clinical Medicine) etc. If it is provided as a block or longitudinal course, each student must receive at least 40 hours of instruction.

**2-3-9 Are the guide books of clinical clerkship provided to students and are they actually utilized?**

**[Basic standard]** Students are provided with guide books of clinical clerkship that contained basic clinical skills that students must acquire. The guide books are actually utilized.

[annotation] Basic clinical skills refer to simple diagnostic or treatment techniques such as vital sign measurement, blood sampling, blood smear test, taking EKG, intravenous and intramuscular injections, urinary catheter insertion, performing enema, wound disinfection and closure, and nasogastric tube insertion.

[annotation] The minimum required patients group refers to those with the common symptoms and signs or diseases that students must know in each department to gain a primary care physician's competency.

**[Quality development standard]** The guide books of clinical clerkship provide separate descriptions for basic and observation clinical skills. A minimum required patient groups are presented in each training department so that students can experience them. There are internal regulations on the scope of techniques and practice that can be provided by students during the clinical clerkship.

[annotation] Observation clinical skills refer to skills that must be observed at least once during the clinical clerkship and may be different depending on the medical school. (e.g. paracentesis, thoracentesis & pleural biopsy, bone marrow aspiration & biopsy, venous sampling of infectious patients, percutaneous fine needle aspiration, paricardiocentesis, central venous catheter insertion, hemodialysis and peritoneal dialysis, esophagogastroduodenoscopy, colonoscopy, bronchoscopy and CPR.) The students must also be able to explain the purposes, methods and risks of these skills.

**2-3-10 Is the clinical clerkship conducted in a way that enables students to acquire the doctor's role?**

**[Basic standard]** Clinical clerkship is formulated with not only passive methods such as simple observation but also active participation in patient care as a member of the medical team so that students can learn their work as doctors.

**[Quality development standard]** A student internship program in which all students can participate for at least 4 weeks is provided.

[annotation] The student internship program must be conducted 1) mainly with a focus on the core departments (internal medicine, obstetric and gynecology, pediatrics, psychiatry and emergency medicine) 2) chiefly with hospitalized patients (carrying out prescription, treatment, and evening or night duties etc.) and 3) with differentiation from the existing clinical clerkship.

### **2-3-11 Is clinical clerkship conducted long enough?**

**[Basic standard]** Clinical clerkship must be conducted for at least 52 weeks (36 hours a week) or a period equivalent to this time. Clerkship in internal medicine, surgery, obstetric and gynecology, pediatrics, psychiatry and emergency medicine must be included.

**[Quality development standard]** Clinical clerkship is conducted for at least 72 weeks (36 hours a week) or a period equivalent to this time.

**2-3-12 Are there various hospitals and community clinics for the clinical clerkship and is the out-patients-centered clerkship appropriate?**

**[Basic standard]** Clinical clerkship for core departments, supportive departments and family medicine must be conducted in primary and secondary hospitals as well as in tertiary hospitals. The out-patient centered clerkship must account for at least 25% of total clinical clerkship time for core departments.

[annotation] Core departments refer to internal medicine, surgery, obstetric and gynecology, pediatrics, psychiatry and emergency medicine.

**2-3-13 Are there any elective courses in clinical clerkship?**

**[Basic standard]** The medical school provides suitable elective courses students can choose freely.

[annotation] In elective courses a student is able to train at any site of his/her choice in the courses of basic medicine, clinical medicine and domestic/international research institutes etc..

**2-3-14 Is a professor in charge of clinical clerkship designated and are the guidance, supervision and feedback for students appropriate?**

**[Basic standard]** The professor in charge of clinical clerkship and the resident in charge of clinical education are appointed in each department. Guidance and supervision as well as feedback are provided to students.

**[Quality development standard]** The medical school has regulations stating resident's roles and duties as an educator and conducts the education and training related to the methods of student guidance, supervision and feedback for residents in charge of major clinical clerkship on a regular basis.

[annotation] Education/training programs for Resident as Teacher (RAT) include effective guidance in clinical clerkship, communication skills with students, student assessment methods, and educator ethics.

**2-3-15 Are the educational contents of medical humanities appropriate in order to achieve educational objectives and graduate outcomes?**

**[Basic standard]** The medical humanities curricula to achieve educational objectives and graduate outcomes has been operating throughout the school years. The medical humanities curricula also include contents such as integrative medicine and alternative medicine.

**2-3-16 Are the instructional, learning and assessment methods appropriate to deliver the curricula of medical humanities?**

**[Basic standard]** Various instructional, learning and assessment methods are applied to deliver the curricula of medical humanities.

[annotation] Various instructional and learning methods other than simple lectures refer to methods that use 50% or more of the lesson time in activities such as discussion, presentation or question & answers as well as team-based learning, problem-based learning and discussions in small groups. Only methods announced in advance in lesson plans will be recognized.

## **2-4 Academic Achievement Evaluation**

**2-4-1 Is the medical school evaluating the student's academic achievements based on learning outcomes and are students given feedback of evaluation results?**

**[Basic standard]** The medical school is applying evaluation methods that can check the learning outcomes defined for each course and 1/3 or more of the courses provide feedback to students at least once.

**[Quality development standard]** Ten percent or more of the total courses are conducting formative evaluation.

**2-4-2 Are the students' performance evaluated appropriately in the clinical clerkship?**

**[Basic standard]** Clinical performance examination is conducted at least once a year.

**[Quality development standard]** Clinical performance examination is conducted for each core clinical clerkship.

**2-4-3 Is the medical school comprehensively evaluating the academic achievement based on phase outcomes or graduate outcomes and is the method of such evaluation appropriate?**

**[Basic standard]** The medical school is conducting a comprehensive evaluation capable of checking phase or graduate outcomes.

**[Quality development standard]** Comprehensive evaluation for both phase and graduate outcomes is conducted and the results of such evaluation are used for grade promotion and graduation review of the student.

## **2-5 Curriculum Evaluation and Improvement**

### **2-5-1 Is the medical school reviewing course outcomes periodically and reflecting results in curriculum improvement?**

**[Basic standard]** The medical school annually reviews the appropriateness of course outcomes and the degree of how much is reflected in instruction and evaluation. The medical school also has actual examples of using such review results to improve instruction and evaluation or course outcomes.

**2-5-2 Is the medical school accordingly improving its curriculum followed by reviewing and updating of phase and graduate outcomes?**

**[Basic standard]** The medical school is reviewing whether phase and graduate outcomes are reflected in the curriculum and is using such review results to improve the curriculum.

**2-5-3 Is the medical school conducting an overall evaluation on curriculum for improvement?**

**[Basic standard]** The medical school is conducting an annual evaluation on the appropriateness of the curriculum and the results have been used for actual improvement.

### **3. Students**

#### **3-1 Admission Policy and Student Selection**

**3-1-1 Does the medical school have admission policies that clearly describe student selection methods?**

**[Basic standard]** The medical school has an admission policy that clearly states various student selection methods consistent with its education mission and social responsibility. The medical school also publicly advertises its admission policy.

**3-1-2 Is the medical school making efforts to develop and improve its student selection system?**

**[Basic standard]** The medical school is exerting efforts to develop and improve student selection criteria and procedures. If the medical school accepts transfer students, the medical school must operate a student selection committee in a professional and continuous manner.

[annotation] The appropriateness of admission policies and student selection systems should be based on evaluation of the student selection criteria and procedure as well as the academic achievements of enrolled students. Describe activities of admission policy related organizations or committees to explain improvement results and plans. If the medical school accepts transfer students, the student selection committee must be comprised of inside and outside experts of the medical school.

**3-1-3 Are the student selection methods, procedures and criteria of the medical school appropriate?**

**[Basic standard]** The student selections of the medical school are performed reasonably and fairly.

**3-1-4 Does the medical school have a strategy for selecting students with the personal and emotional characteristics necessary for them to become effective physicians?**

**[Basic standard]** The medical school has a process of selecting students with the personal and emotional characteristics necessary to become effective physicians.

**[Quality development standard]** The medical school is conducting systematic and in-depth interviews to select students with the personal and emotional characteristics necessary to become effective physicians.

## 3-2 Student counseling and Support System

### 3-2-1 Does the medical school have an appropriate student counseling and support system and is it being operated properly?

**[Basic standard]** The medical school must organize and operate a student counseling and support committee. Student counseling and support must be performed professionally and in an integrated manner by dividing its areas into learning, living and career guidance.

**[Quality development standard]** Student counseling and support systems have been established for all students, each grade, each group and each individual, respectively to facilitate the students' school lives. (e.g.: Is the role of the student counseling and support committee chair clearly defined and is it publicly announced to and understood by students?)and are operated professionally.

학습 지도 Academic counseling and support based on monitoring of student progress

생활 지도 program of student support, addressing social, financial and personal needs

진로 지도 career guidance and planning

**3-2-2 Are the contents of academic counseling and support based on monitoring of student progress appropriate?**

**[Basic standard]** The medical school has a system where students can receive counseling autonomously. It checks students' academic achievement level regularly and provides programs for underachieving students.

**[Quality development standard]** The medical school has actual performances of learning guidance on underachieving students counseling. If there was a sudden change in retention rate in a certain grade, the medical school has tried to analyze any problems that could be the causes. In addition, there is a way to salvage the retained students.

**3-2-3 Is the medical school appropriately conducting student's academic evaluation, retention or graduation review and disciplinary actions according to school rules?**

**[Basic standard]** The medical school has criteria for students' academic evaluation, retention or graduation review and disciplinary actions according to school rules. It is enforcing such rules appropriately.

**[Quality development standard]** Students preview his/her academic records including clerkship grades before grades are finalized and are guaranteed an opportunity to appeal against grade, retention, graduation postponement and expel decisions. There are actual examples of such student appeals.

[annotation] To guarantee students an official appeals process, the medical school must have a related committee consisting of professors not involved in student evaluation and must publicize the existence of such a committee to students.

**3-2-4 Is the program of student support addressing social, financial and personal needs appropriate?**

**[Basic standard]** Professors meet students regularly for student support addressing social, financial and personal needs and the results of such meetings are kept as records.

### **3-2-5 Are the contents of the student career guidance and planning appropriate?**

**[Basic standard]** The medical school has programs and actual cases of providing student career guidance and planning

**[Quality development standard]** There are reliable mentors and mentor development programs to responsibly perform guidance activities such as students' selection of intra- and extramural elective courses, post-graduate career guidance and advisory support.

**3-2-6 Is the medical school encouraging students sound professional activities in and outside the school and providing appropriate guidance and support?**

**[Basic standard]** The medical school is encouraging students sound professional activities in and outside the school and is providing appropriate guidance and support.

**[Quality development standard]** The student delegates have been involved in education and student-related committees.

### **3-3 Student Welfare and Safety**

**3-3-1 Does the medical school have a scholarship program that is operated fairly and is the scholarship to tuition ratio appropriate?**

**[Basic standard]** The medical school has a scholarship program that is operated fairly.

**[Quality development standard]** The annual average scholarship to full tuition ratio is excellent.

**3-3-2 Is the medical school providing students with appropriate financial support ?**

**[Basic standard]** Students can receive tuition loans with the help of the medical school when necessary.

**[Quality development standard]** In addition to tuition loans, the medical school has a system for providing financial counseling to students and this system has actual performances.

**3-3-3 Does the medical school determine the residential status of students and is the dormitory operated appropriately?**

**[Basic standard]** The medical school is aware of the current residential status of students and the dormitories are operated appropriately.

**[Quality development standard]** The medical school has an exclusive dormitory that can accommodate all applicants. If the training hospital is in a remote location, its dormitory facilities are provided for clerkship students.

**3-3-4 Are there staffs or systems for student health services?**

**[Basic standard]** The provisions and facilities for the student health services exist in the medical school. Staffs in charge of the student health services are present at the health care center or infirmary and there is a system that allows students to access the hospitals easily when necessary.

**[Quality development standard]** For health management purposes, students receive health check-ups at admission to premedical course, entry to medical school and start of clinical clerkship. There is a connection system with outside medical facilities where students are allowed to access those facilities if they want to. Before start of clerkship, students are checked on whether their vaccinations were carried out according to Korean adult immunization guidelines.

### **3-3-5 Is the counseling system for students appropriate?**

**[Basic standard]** There is a counseling system for students. Psychological tests are conducted and their results are being used for student guidance and counseling.

**[Quality development standard]** There is a student counseling room and one or more full-time counselors are working. Also, when necessary, students can receive psychiatric or psychological treatment from outside medical experts.

[annotation] The condition that a full time counselor is working means that the professional staff dedicates to the consultation. Guidance provided by a staff member of the student affairs or the vice-dean for student affairs is not considered to be professional consultation. When a counseling center is located not in the medical school but in the university, the medical school would be considered to have a counseling system only if the counseling center is geographically easily accessible to and has a separate professional counseling system exclusively for the medical students with actual counseling cases of them.

**3-3-6 Are students taught about prevention and measures against infectious and environmental hazards before the clinical clerkship?**

**[Basic standard]** Students are educated about prevention and measures against infectious and environmental hazards before the clinical training.

**[Quality development standard]** The medical school provides students with management and treatment measures as well as necessary financial means for when a student is exposed to infectious or environmental hazards.

**3-3-7 Does the medical school have plans for preventing and protecting students from harm by unjust behaviors?**

**[Basic standard]** The medical school conducts preventive education and advertizing activities to protect students from unjust behaviors by students, faculty and other constituents of the medical school. There are plans for providing protection and relief to victimized students.

### **3-4 Post-graduate Career**

#### **3-4-1 Is the medical school's support for students advancing into non-clinical medicine appropriate?**

**[Basic standard]** The medical school has a policies, such as scholarships and special funds etc., to secure experts in the fields of non-clinical medicine or the actual track record of its graduates advancing into non-clinical medicine is appropriate.

**[Quality development standard]** The actual track record of its graduates advancing into non-clinical medicine is excellent.

**3-4-2 Does the medical school analyze the results of the national medical exam and exert efforts to improve any issues?**

**[Basic standard]** The medical school is analyzing the results of the national medical exam and is exerting efforts to improve issues.

## 4. Faculty

### 4-1 Full-time Faculty

#### 4-1-1 Does the medical school have an appropriate number of basic medicine full-time faculties?

**[Basic standard]** The medical school has appropriate number of faculties in each field (13 fields) of basic medicine as recommended by WFME.

[annotation] Field does not refer to subject or department but to education contents.

[annotation] Part-time professors are not included in the count but endowed professors who receive regular pay from the medical school are included. Part-time professor refers to those who have positions at other medical schools or universities but also serve as a faculty member at the medical school. Endowed professors will be included if they are confirmed to conduct the same teaching, research and patient care activities as full time professors even though not included in the Ministry of Education faculty count.

[annotation] WFME' s classification of basic medicine includes anatomy, physiology, biochemistry, immunology, pathology, pharmacology, microbiology, genetics, molecular biology, biophysics, cell biology, preventive medicine and parasitology.

**[Quality development standard]** Each field of basic medicine has a full-time faculty with excellent teaching experiences.

[annotation] The teaching experience of basic medicine full-time faculty refers to experience working in higher education institutions after graduating medical school. It is the experience in education related fields including teacher assistant experience.

**4-1-2 Is there an appropriate number of full-time faculties in the department of medical education?**

**[Basic standard]** The department (division, center etc.) of medical education is established and there is at least 1 full-time faculty.

[annotation] The full-time faculty is someone who has majored in the medical education and is a research lecturer status or higher. In the case of medical school professors, he/she must be administratively assigned to the department of medical education without any assignment to other department. He/she must dedicate 80% or more of his/her working hours to medical education work.

**[Quality development standard]** There are sufficient number of full-time faculties or assigned faculties in the department of medical education.

[annotation] Assigned faculties are those appointed to the department of medical education while also serving other positions and are subjected to separate achievement evaluations and promotion rules. The assigned faculty's work related with medical education must be proven.

**4-1-3 Does the medical school have an appropriate number of full-time faculties in the area of medical humanities?**

**[Basic standard]** The medical school must have appropriate number of full-time or assigned faculties in the area of medical humanities.

[annotation] Medical humanities refers to majors such as language and literature, history, philosophy, ethics, social sciences, law, business management, anthropology, psychology or art.

[annotation] Full-time faculties are those who majored in the relevant field and at least a research lecturer. If he/she is a medical school faculty, he/she must be administratively appointed to the medical humanities department and not serve with any other position in other departments.

[annotation] Assigned faculties are medical school faculties who are assigned to the medical humanities curriculum.

**[Quality development standard]** The medical school has established the department (division, center etc.) of medical humanities and there are sufficient number of full-time faculties in it.

**4-1-4 Are there appropriate human resources to assist teaching and research of basic medicine, medical education and medical humanities?**

**[Basic standard]** There are appropriate number of teaching assistants or researcher assistants who receive direct financial support from the medical school and assist the instructions and researches in basic medicine, medical education or medical humanities.

**[Quality development standard]** There are sufficient number of teaching assistants or researcher assistants who receive direct financial support from the medical school and assist the instructions and researches in basic medicine, medical education or medical humanities.

**4-1-5 Does the medical school have an appropriate number of full-time faculties in each department of clinical medicine?**

**[Basic standard]** Medical school has an appropriate number of full-time faculties in each department of clinical medicine.

**[Quality development standard]** The number of full-time faculties in each department of clinical medicine with appropriate experience in education, research and medical practice is excellent.

**4-1-6 Is the composition of full-time faculties for basic medicine, medical education, medical humanities and clinical medicine proportionally appropriate?**

**[Basic standard]** The ratio of faculty members who graduated from the same medical school is appropriate.

**[Quality development standard]** The departments of basic and clinical medicine appoint head professors through an open application process.

## **4-2 Faculty Activities**

### **4-2-1 Is the faculty producing appropriate research achievements?**

**[Basic standard]** The research achievements of full-time faculties are appropriate.

**[Quality development standard]** The research achievements of full-time faculties are excellent.

**4-2-2 Are the research funds received from outside the medical school appropriate?**

**[Basic standard]** The amount of research funds received from outside the medical school during the past 2 years is appropriate.

**[Quality development standard]** The amount of research funds received from outside the medical school during the past 2 years is excellent.

**4-2-3 Is the intramural research budget of the medical school appropriate?**

**[Basic standard]** The intramural research budget of the medical school during the past 2 years is appropriate.

**[Quality development standard]** The intramural research budget of the medical school during the past 2 years is excellent.

**4-2-4 Are the research and academic activities of research centers in the medical school appropriate?**

**[Basic standard]** The medical school operates a research center with its own research fund and the research fund of the research center has been used to support academic or research activities during the past 2 years.

**4-2-5 Does the medical school guarantee the faculty's social services activities and participation in academic societies?**

**[Basic standard]** The faculty's social services activities such as participation in academic societies are guaranteed.

## **4-3 Faculty Development**

### **4-3-1 Does the medical school conduct faculty achievement evaluations and are the results used appropriately?**

**[Basic standard]** The faculty achievement evaluation system is established and it is reflected in the faculty's promotions.

**[Quality development standard]** The faculty performance evaluation is carried out differently by faculty rank (research fellow, assistant professor, associate professor, professor) and by function (basic medicine, clinical medicine, medical humanities, medical education etc.). The provisions relating to promotion is differentiated and there is a separate achievement evaluation system.

**4-3-2 Do the faculty achievement evaluation standards include contents related with medical education and faculty development and is the participation of faculties in extramural medical education training or intramural faculty development programs appropriate?**

**[Basic standard]** Rules on faculty achievement evaluation stipulate the number of hours that full-time faculty must participate mandatorily each year in medical education related training or faculty development programs. Also, there has been an appropriate participation of faculties in medical education related training during the past 2 years.

**[Quality development standard]** Participation in medical education training is mandatory according to faculty achievement evaluation rules and there are faculty achievement evaluation rules that enable promotion based on educational achievement. Also, there are incentive programs for education activities other than classical lecture for students (variety of education programs such as PBL, TBL etc.). The participation of faculty in medical education related training during the past 2 years is excellent.

**4-3-3 Is a medical education training course being appropriately implemented for newly appointed faculties to the medical school?**

**[Basic standard]** A medical education training course is mandatory to all newly appointed faculty members to the medical school and it is carried out over an appropriate time within 1 year of appointment.

**4-3-4 Do the faculty achievement evaluation standards include social service?**

**[Basic standard]** The faculty achievement evaluation criteria include evaluation standards on activities in academic society or public purpose social service.

**4-3-5 Does the medical school have an appropriate financial support system to help faculties participate in short and long-term overseas training and attend domestic or overseas academic symposia?**

**[Basic standard]** The financial support for faculty's short and long-term overseas training and attendance of domestic or overseas academic symposia is appropriate.

**[Quality development standard]** The financial support for faculty's short and long-term overseas training and attendance of domestic or overseas academic symposia is excellent.

**4-3-6 Is the education on research ethics being provided?**

**[Basic standard]** The medical school has its own regulation on research ethics. Training on research ethics is conducted regularly.

**4-3-7 Is sexual harrassment prevention training conducted?**

**[Basic standard]** The medical school has its own operation regulation on sexual harrassment prevention. Prevention training is conducted regularly.

## **5. Education and Research Resources**

### **5-1 Educational resources**

**5-1-1 Does the medical school sufficiently have fundamental facilities for student education?**

**[Basic standard]** The medical school sufficiently has appropriately equipped and conditioned fundamental facilities for student education.

[annotation] The medical school's fundamental facilities refer to lecture rooms and labs for students.

[annotation] The facility's equipment and conditions refer to multimedia equipment, lighting, heating, air conditioning, sound insulation, ventilation and cleanliness etc.

**5-1-2 Does the medical school have sufficient supporting facilities for student education?**

**[Basic standard]** The medical school has sufficient supporting facilities for student education.

[annotation] Supporting facilities for student education include problem-based learning room, team-based learning room, small group discussion room, self-study room, computer room, clinical skill lab, education and evaluation facility using standardized patients and multimedia facilities capable of computer-based testing etc. Students must use support facilities for student education in accordance to the curriculum.

[annotation] A clinical skill lab of an appropriate size must have fundamental equipment for clinical skills education and the size of the lab must be appropriate compared to the number of students. It must not belong to a certain specialty department and be installed in an independent space so that students can use it conveniently. The education and evaluation facility using standardized patients must be a facility that is continuously used for lectures, clinical skills education and evaluation in accordance to the medical school's curriculum.

**5-1-3 Does the medical school equip appropriately with facilities for student well-being and convenience?**

**[Basic standard]** The medical school equips appropriately with student council room, club rooms, male and female rest rooms, gym, cafeteria, shop, vending machines and personal lockers etc.

**5-1-4 Does the medical school efficiently manage the facilities and equipment for student education and welfare?**

**[Basic standard]** The medical school has a staff for managing the facilities and equipment for student education and welfare and an appropriate budget is allocated.

**5-1-5 Does the medical school have a university teaching hospital for the clinical clerkship and does the hospital have facilities for the student education?**

**[Basic standard]** To provide the clerkship, the medical school must have a teaching hospital of at least 500 beds. The hospital must have various facilities for student education and adequate exclusive spaces for students in the hospital.

[annotation] If the clerkships are conducted in affiliated hospitals, the affiliated hospital must have the same facilities and equipments for student education as a teaching hospital.

**[Quality development standard]** An space for night-duty room is provided for student internship programs.

**5-1-6 Does the medical school have a convenient academic information system to support education and research?**

**[Basic standard]** The medical school has established an independent academic information system to support education and research and the annual spent budget is appropriate. Experts to support education and research (a medical librarian) must be available.

**[Quality development standard]** The annual spent budget and number of experts (medical librarian) are enough.

**5-1-7 Does the medical school have a convenient education information system?**

**[Basic standard]** The medical school has an education information system related with student affairs and curriculum operation and it can be conveniently used by constituents.

[annotation] E-Learning is not just providing teaching-learning material but must be interactive. Educational contents are provided through the system and actual teaching-learning takes place. Learning management is also possible. The medical school must be able to prove the actual utilization of e-learning with actual course offerings through e-learning (cyber lectures etc.).

**[Quality development standard]** There is an e-Learning system that is being actually used.

## 5-2 Research Resources

**5-2-1** Does the medical school have enough individual offices for faculties and an administrative support system?

**[Basic standard]** The medical school have enough individual offices and administrative support system for faculties

**[Quality development standard]** All of the faculties have their individual offices.

**5-2-2 Does the medical school have sufficient research resources for faculties?**

**[Basic standard]** The medical school has sufficient space, facilities and equipments for the faculties' research.

## **6. Postgraduate Education**

### **6-1 Graduate School Education**

#### **6-1-1 Is the graduate school education being conducted faithfully under systematic planning?**

**[Basic Standard]** Each major must have a lesson plan that includes learning objectives. The instruction is conducted faithfully according to the lesson plan.

**6-1-2 Is the graduate school affairs system appropriate?**

**[Basic Standard]** There exist the structure and personnel exclusively for the graduate school affairs and the amount budget for its operation as well as the budget's execution are reasonable.

**6-1-3 Are the student selection and support systems appropriate?**

**[Basic Standard]** The experience and background of students are diverse enough to suit a specialized graduate school system and the internal/external scholarships or special support payments are reasonable.

**[Quality development standard]** The internal/external scholarships or special support payments are excellent and there exists a research space exclusively for the graduate school students.