

SENT BY FACSIMILE TRANSMISSION

**Mr. Donald Jimenez Cascante
Secretario General
Consejo Nacional de Ensenanza,
Superior Universitaria Privada
Ministerio de Educacion Publica
Apdo 10087-1000
San Jose
Costa Rica**

Dear Mr. Jimenez:

Some time ago, the U.S. Department of Education wrote to inform your country about a law passed in the United States in 1992 that changed the eligibility criteria for U.S. students who wish to finance their medical education in a country other than the U.S. with a loan through our country's Federal Family Education Loan (FFEL) Program. Eligible students must enroll in a medical school that is eligible to participate in the FFEL Program and that meets the accreditation or approval standards of the country in which the school is located.

Further, the accreditation or approval standards used by that country must have been reviewed by a panel of medical experts appointed by the U.S. Secretary of Education, which must have determined them to be comparable to the accreditation standards applied to medical schools in the United States. This panel of medical experts is known as the National Committee on Foreign Medical Education and Accreditation (NCFMEA).

I am pleased to inform you that the NCFMEA, at its March 4, 1999 meeting, determined that the accreditation or approval standards used by the Consejo Nacional de Ensenanza Superior Universitaria Privada (CONESUP) to evaluate the medical schools in Costa Rica are comparable to those used to evaluate programs leading to the M.D. degree in the United States. The NCFMEA has requested that CONESUP submit annual reports of its accreditation activities, with the first report due January 14, 2000. This determination of comparability will remain in effect for a period of four years from the date of this letter. Prior to the expiration of that period, the NCFMEA will seek to confirm that your standards and procedures for accrediting/approving medical schools in Costa Rica are still comparable to the accreditation standards applied to medical schools in the United States. If so, its previous determination of comparability will be extended for another four-year period.

As a result of the determination of comparability by the NCFMEA, any medical school in your country that is accredited or approved by CONESUP may apply, if it has not recently done so, to the U.S. Department of Education to participate in the FFEL Program. If a medical school's application is approved, otherwise eligible students enrolled in the school who are either U.S. citizens or permanent residents of the U.S. may receive loans to finance their medical education through the FFEL Program.

2 – Mr. Donald Jimenez Cascante

The U.S. Department of Education needs a list of the medical schools in Costa Rica that have requested accreditation by CONESUP, and the status of each school (whether provisionally accredited, fully accredited, denied accreditation or scheduled for an accreditation review and the date of the anticipated review). In the event that there are any substantial changes to the standards or procedures used by CONESUP for approving, evaluating or accrediting medical schools, please immediately notify the U.S. Department of Education of these changes. In addition, please immediately notify the U.S. Department of Education if there are any changes with respect to the accreditation or approval status of any of the medical schools recognized by CONESUP.

Please send the requested information to the Director of the Accreditation and Eligibility Determination Division at the following address:

Dr. Karen W. Kershenstein, Director
Accreditation and Eligibility
Determination Division
U.S. Department of Education
Room 3915, ROB-3
7th & D Streets, S.W.
Washington, D.C. 20202-5244
U.S.A.

If you have any questions concerning the above requests, Dr. Kershenstein can be reached at (202) 708-7417 (telephone), (202) 708-9469 (fax), and Karen_Kershenstein@ed.gov (e-mail).

Medical schools that wish to participate in the FFEL Program may obtain the proper application forms from the Initial Participation Branch at the address listed above.

I want to thank you for taking the time to respond to our requests for information about your accreditation or approval standards for medical schools. I very much appreciate the interest you have taken in this matter.

Yours sincerely,

Richard W. Riley

U.S. Department of Education



**Staff Analysis
of the
Standards Used by**

Costa Rica

For the Evaluation of Medical Schools

March 4, 1999

U.S. Department of Education
Staff Analysis
of the Standards Used by
Costa Rica
for the Evaluation of Medical Schools
Prepared January 15, 1998

TAB A

Background

Costa Rica appeared on the agenda of the February 1997 and March 1998 meetings of the National Committee on Foreign Medical Education and Accreditation (NCFMEA). At both meetings, the Committee determined that the country's standards for the accreditation/approval of medical schools were not comparable to those used to evaluate medical schools in the United States. During the February 1997 meeting, the Committee based its decision primarily on the lack of any response from the country to the Department's requests for information.

After the Secretary informed Costa Rica of the Committee's decision following the February 1997 meeting, the Department received a formal request from the country that the Committee reconsider that decision at its March 1998 meeting. The request was accompanied by supporting documentation, some written in Spanish and some in English, and the country's response to Part II of the questionnaire. Department staff attempted to obtain a translation of the Spanish documents but was not able to do so in time for the meeting. Therefore, staff used only the documents provided in English and the country's response to Part II of the questionnaire to prepare the Department staff analysis. After reviewing these materials at its March meeting, the NCFMEA again determined that the Costa Rican system for the evaluation of medical schools was not comparable to the U.S. system, based primarily on concerns it had related to two statements contained in Article 3 of the Costa Rican Regulating Code for Law 6693 (Decree No. 25071-MEP) that appeared to indicate that the process for evaluating medical education in Costa Rica did not provide for a regular reevaluation of the medical schools. Those statements are as follows:

"That in the absence of surveillance and inspection regulations, CONESUP [Consejo Nacional de Enseñanza Superior Universitaria Privada] does not carry out a systematic process of permanent evaluation of the development of the Medicine and Surgery program."

"That the criteria upon which the Medicine and Surgery program was authorized were basically based on the requirements of the law and regulation in force in CONESUP, as a confirmation that the minimal conditions are met for the beginning."

Another factor in the Committee's decision to reaffirm its previous decision of noncomparability was the fact that the documents the country provided in English did not provide enough information for the Committee to determine the breadth and depth of the site visits conducted at the medical schools.

After the March 1998 meeting, Costa Rica submitted another request for reconsideration and provided both additional information and a full response to the Department questionnaire. That request is the subject of the Department staff analysis that follows.

It should be noted that in anticipation of submitting another request for reconsideration, Costa Rica began to modify some of its practices and procedures and to clarify existing policies so as to provide the NCFMEA with a better understanding of the standards and processes it uses for the accreditation/approval of medical schools. Although the country maintains that it has always performed a regular review of its medical schools, government officials nevertheless pulled together all of the laws, practices, and regulations governing the oversight of these schools, from the different government entities that maintain oversight functions, and compiled them into single set of documents. In the course of this activity, the officials eliminated the two statements listed above from the Regulating Code of 6693 that had been a major concern of the NCFMEA when it reviewed Costa Rica in March 1998.

Currently, there are six universities in Costa Rica that offer medical education. One is a public institution (the University of Costa Rica), while the other five are private (Universidad Internacional de las Americas (International University of the America); Universidad de Iberoamerica (University of the Iberoamerica); Universidad Autonoma de Centro America (Autonomous University of Central America); Universidad Hispanoamericana (Hispanic American University); and Latin University (approved in May 1998).

The one public institution is controlled by the National Chancellors Council (CONARE), which is not seeking to have its system for the evaluation of the university's medical school reviewed by the NCFMEA for comparability. According to the country, the University of Costa Rica was created by the Constitution of the Republic of Costa Rica, Article 84 of which gives the university absolute autonomy to regulate itself.

The five private institutions are controlled by the National Council of Private Higher University Education (CONESUP), the entity that authorizes (private) medical education in Costa Rica and seeks to have its system of oversight of these five institutions reviewed for comparability. The five institutions may seek to establish the eligibility of their medical schools to participate in the Federal Family Loan Program if the standards and processes used by CONESUP to accredit/approve them are determined to be comparable to those used to evaluate medical schools in the U.S.

It is important to note that in addition to the oversight of the six medical schools provided by the appropriate legal entities in Costa Rica (CONARE and CONESUP), all six institutions - because they graduate doctors who will practice medicine in Costa Rica - must undergo a compliance review by other entities that are involved in the completion of the medical degree, which includes clinic assignments in designated clinics, teaching facilities, and hospitals, and must be in compliance with their regulations as well. For example, the Center for Strategic and Informational Development in Health and Social Security (CENDEISS) is the agency in charge of granting authorizations for the use of clinical fields in the Health Teaching Entities. The Board of Directors of the Costa Rican Social Security System administer the regulations for CENDEISS. Thus, this agency becomes involved in monitoring the medical schools' compliance with its regulations, beginning with the second year of the medical program, because students begin their clinicals at this point.

Summary of Findings

Based on its analysis of the available information, including the country's response to the Department questionnaire, the documents previously submitted by the country in Spanish that Department staff had translated, and further documentation requested by Department staff during its review of the country, e.g., standards, procedures, Law 6693, etc., Department staff concludes that Costa Rica appears to have a system in place that substantially meets the guidelines established by the NCFMEA. Specifically, the standards and processes used by CONESUP to evaluate the five private medical schools in Costa Rica appear to be reasonably comparable to those used to evaluate medical schools in the United States.

Staff Analysis

The National Committee on Foreign Medical Education and Accreditation is charged with determining whether the standards of accreditation used by a foreign country to accredit medical schools offering programs leading to the M.D. (or equivalent) degree are comparable to standards of accreditation applied to M.D. programs in the United States.

In making this determination, the Committee uses the following guidelines which it has determined provide an appropriate framework for the thorough evaluation of medical schools offering programs leading to the M.D. (or equivalent) degree. The Committee wishes to make it clear that these are in fact guidelines and that a foreign country's review and approval process can differ substantially from these guidelines and still be determined to be comparable to the standards used in the United States, provided the foreign country can demonstrate that its standards and processes of evaluation are effective alternatives to those used in the United States.

PART I: Accreditation/Approval Standards

1. Objectives

The accreditation/approval process used by the foreign country should determine whether the educational mission of the medical school serves the general public interest and whether its educational program is appropriate in light of the mission and objectives of the school. Approval should not be granted if it is determined that the educational program is inconsistent with the mission and objectives of the school.

The accreditation/approval process should determine whether the program is legally authorized to provide medical education in the country in which it is located. Approval should not be granted to a program that is not legally authorized to provide such education.

The General Public Interest

In its response to the Department questionnaire, Costa Rica indicates that Article 9 of the Regulating Code for Law 6693 (Decree No. 25071-MEP) states, "Within the terms of this law, private universities, as private higher education institutions, will enjoy complete freedom in education, in scientific research and the dissemination of culture. They will contribute to the study and solution of national problems, for which they will establish obligatory community work programs or social services that are equivalent or similar to the ones in place at public universities."

The Medical School's Mission and Objectives

Because of Article 9 of Regulating Code for 6693 (Decree No. 25071-MEP), Costa Rica maintains that "every school of medicine and surgery in the country must state, in its mission, its commitment to instruction, research, patient care and to serve the general public interest."

Legal Authorization

Costa Rica indicates that medical schools are required to be legally authorized. In its response to the Department questionnaire, it states further that "According to Regulating Code 6693 of November 27, 1981, it is mandatory for the functioning of private universities and for the careers they offer, among them medicine and surgery, the prior authorization from the Consejo Nacional de Enseñanza Superior Universitaria Privada (CONESUP)(National Council for Private University Higher Education Studies). Additionally, the Constitutional Chamber of the Supreme Court of Justice, in vote number 7494-97, given on November 11, 1997 at 3:15 pm, states that for a private university to operate, authorization from the Costa Rican Government is required."

2. Governance

The accreditation/approval process should determine whether there is an appropriate accountability of the management of the institution to an ultimate responsible authority external to and independent of the institution's administration. Approval should not be granted if the school lacks such a system of external accountability.

In its response to the Department questionnaire, Costa Rica describes the governance of medical schools as being independent from the institution's administration. Specifically, "every school must have, at least, its own Academic Council composed by professors, student representatives and administrative staff of the school. These members must comply with the academic requirements stated in Regulating Code for Law 6693 (Decree No. 25071-MEP)." The country further requires that student representatives be among the best students and aspire to high moral and ethical principles.

The Academic Council is in charge of the following:

- Formulating institutional policy;
- Strategic planning, and achievement of the mission and objectives;
- Publishing policies regarding conflicts of interest for the board and institution;
- Appointing the dean and exercising control through that individual;
- Ensuring that the meetings are maintained and the minutes are registered;
- Recommending the destination of funds from the institution's administrations for school purposes; and
- Developing and monitoring succession of plans.

Medical schools are regulated according to their financial administration by the Law of Foundations No.5338 and the Law of Associations No.218, which subjects them to the current accounting and tax systems of the country before the Ministerio de Hacienda (Ministry of the Interior) and the Contraloria General de la Republica (The Regulating Authority). For example, Article 15 of the Law of Foundations states that "The Administrative Board will provide, on the first day of January of each year, an

accounting report of the activities of the foundation to the Contraloria General de la Republica (The Regulating Authority).

Further, Article 21 of the Law of Associations No.218 states that "The administrative and fiscal exercise of associations will be one year in duration. In the first fifteen days of each association exercise, the board will meet ordinarily to hear the reports of the President, the Auditor, and the Treasurer, about the dealings during the last immediate exercise."

3. Administration

The accreditation/approval process should determine whether the administration of the school is effective and appropriate in light of its mission and objectives. Approval should not be granted if it is determined that the administration is ineffective or inappropriate in light of the stated mission and objectives.

The accreditation/approval process should determine whether the chief academic official of the medical school is qualified by education and experience to provide leadership in medical education. Approval should not be granted if the chief academic official's credentials and training background are not appropriate for fulfilling his or her responsibilities.

The accreditation/approval process should determine whether the faculty are appropriately qualified to teach and are involved in decisions involving admissions and curriculum. Approval should not be granted to schools that fail to demonstrate appropriate faculty qualifications and faculty involvement in admissions and curriculum development and delivery.

Effective and Appropriate Administration

In its response to the Department questionnaire, Costa Rica indicates that schools of medicine "must have an adequate and appropriately credentialed full-time administrative staff to ensure the success of the school." Administrative organization must have clear lines of authority, responsibility, and communication, and principal officers must be qualified by training and experience relative to their assigned responsibilities. In addition, schools must have full-time support staff qualified by training and experience relative to their assigned responsibilities.

Chief Academic Official of the Medical School

Costa Rica cites Article 14 of the Regulating Code for Law 6693 (Decree No. 25071-MEP) as requiring the chief academic officer or dean to be qualified by training and experience to direct the development of the education program. The dean must have

at least the degree of the Licentiate and have academic experience in national or foreign universities of no less than eight years. Specifically, Article 14, requires "the Provost, Deans and Diprovost of academic units or their equivalents to possess, as a minimum, the degree of Licentiate and have experience in nation or foreign universities for no less than ten, eight and four years respectively. With regards to any other university academic authority, the degree of Licentiate will be required as a minimum and academic experience of four yours. Those who substitute Provost, deans, or academic unit Diprovosts, will fulfill the same requirements asked of these."

Faculty

Article 6(c and ch) of Regulating Code for Law 6693 (Decree No. 27051-MEP) requires that institutions be staffed by necessary teaching personnel suitably trained to carry out their activities. In addition, they must have sufficient qualified professional staff to fill the university administrative positions called for in the bylaws. Further, Article 11 of Regulating Code for Law 6693 (Decree No. 25071-MEP), Chapter II (Authorization for the Operation of Private Universities), requires that institutions submit "a list of faculty along with their courses of instruction, their rank, academic experience, publications, and other meritorious activities proper of university faculty."

Department staff cannot determine the extent of involvement by faculty in the design of the curricula. However, Article 3(c) of the same law authorizes CONESUP to approve "the schools and their courses of study once they have been subjected to study by the National Higher Education Planning Office (Oficina de Planificación de la Enseñanza Superior (OPES).

4. Educational Program

The accreditation/approval process should examine whether the educational program of a medical school is of sufficient length to meet the mission and objectives of the school and to provide students with the knowledge and skills necessary to become a qualified physician. Approval should not be granted to a school that does not provide an educational program of at least 32 months in duration.

The accreditation/approval process should determine whether the curriculum provides an education in the sciences basic to medicine, a variety of clinical subjects, and various ethical, behavioral, and socioeconomic subjects pertinent to medicine. Approval should not be granted to a school whose educational program does not provide such a broad-based curriculum.

The accreditation/approval process should determine whether the requirements for successful completion of the program of medical education conform to commonly accepted standards, with a particular focus on clerkships (or their equivalent) and other forms of clinical training. Approval should not be granted if such training is of insufficient breadth, is not conducted in suitable medical facilities, or is not adequately supervised.

Length of Program

In its response to the Department questionnaire, Costa Rica states that "the medical education program must be based upon a realistic set of general and specific educational objectives for the basic and clinical sciences and must be of appropriate length and content to cover the essential education required in the basic and clinical sciences. Clear educational objectives must be developed for each course, clinical experience, and area of study, and they must be revised on a periodic basis, and disseminated to appropriate parties." In addition, in accordance with "The Nomenclature Agreement for Degrees and Titles for Higher Education," signed by members of the National Council of Provests, the minimum requirement for the preparation of a Licentiate in Medicine is 10 cycles of 15 weeks, or its equivalent.

Article 20 of the Regulating Code No. 6693 (Decree No. 25071-MEP) further stipulates that "CONESUP will only approve university courses of study that lead to a degree for which there is a minimum requirement of 120 credits. A credit is a valuation unit of work of a student, equivalent to three hours weekly of classes during 15 weeks; applied to an activity that is supervised, evaluated, and approved by the teacher."

Required Subjects

Costa Rica states that Article 13 of Regulating Code for Law 6693 (Decree No. 25071-MEP) requires the basic science curricula of medical schools in private universities to be the same as those offered in state or public universities. Specifically, the study plans in these universities must be similar to those of the public university in the country, or other universities of "recognized prestige," and deemed equivalent for purposes of recognition.

In addition, Costa Rica indicates that the Constitutional Chamber of the Supreme Court judged that "What is set forth (...) is an equivalence with regards to minimum requirements in curriculum, without hindrance to the ability of other universities that wish to establish more courses, longer study plans, greater complexity, greater academic excellence, being that there is the possibility of establishing mechanisms for the examination of the fulfillment of those minimum requirements, once the student has completed the educational study programs of the higher education center that took care of his/her academic preparation."

The basic sciences that must be included in the medical program are chemistry, biology, biochemistry, physics, anatomy, histology, embryology, mathematics, statistics, genetics, physiology, microbiology, parasitology, pathology, and pharmacology. The basic science instruction should include didactic and laboratory courses which should provide a knowledge base to achieve the established educational objectives and to prepare the student for the clinical component of their training, and the research component of the institution's mission. In addition, Costa Rica indicates that the medical program include courses in the field of humanities such as history of medicine (2 credits), medical ethics (2 credits), and legal medicine (2 credits).

Conformance to Commonly Accepted Standards/Focus on Clerkships or Equivalent

The country's response indicates that the medical school curriculum does include the study of clinical sciences. According to Costa Rica, "the clinical science instruction must have didactic and proficiency based courses and supervised patient care to enable the orderly progression of clinical competency. Established educational objectives serve to guide clinical science instruction and prepare graduates for entry-level residency training."

Costa Rica further indicates that "institutional policies and the level of supervision afforded should be sufficient to ensure that faculty and students are responsible for maintaining patient safety, privacy, and dignity. A sufficient volume and diversity of experiences in the supervised care of patients should be available to develop the knowledge, skills, and attitudes necessary for student achievement of the objectives for clinical education."

In addition, the country expects clinical instruction to "ensure student understanding of the ethical and moral basis in the care and treatment of patients and utilizes a wide variety of clinical training settings. External clinical should provide experiences consistent with educational objectives and are evaluated periodically to assess their relationship."

The clinical sciences included as a parameter for the study plans of the private universities are listed below. They are based on the requirements of Article 13 of Regulating Code for Law 6693 (Decree No. 25071-MEP) and the study plan of the Medical School of the University of Costa Rica, the State University.

Physiology and semiology:	10 credits
Internal Medicine:	22 credits
Pediatrics:	12 credits
Psychiatry:	6 credits
Gynecology:	6 credits
Obstetrics:	6 credits
Radiology:	2 credits
Surgery:	12 credits

Public Health:	8 credits
Clinical Pharmacology:	3 credits
Internship in Surgery, pediatrics, gynecology and obstetrics, and medicine:	1 year

Finally, Costa Rica states that "clinical rotations start on the fifth quarterly cycle or fourth semester cycle until the end of the study plan, according to the case and according to what was authorized by CONESUP for each particular medical school. All students must also complete a year of rotating internship, with a length of three months in each of the four great areas: Internal Medicine, Pediatrics, Surgery, and Gynecology-Obstetrics."

The country indicates that "to authorize the functioning of a school, CONESUP demands the assuring of the necessary installations for the clinical practice of students. In Costa Rica, medical schools have their clinical rotations in hospitals of the Caja Costancense de Seguro Social (Social Security Department), which is the institution that administrates public hospitals in the country and that is dully regulated by the Health Ministry. The Reglamento de la Actividad Clínica Docente en la Caja Costancense del Seguro Social (Regulating Code for Educational Clinic Activity in the Social Security Department) is the norm that regulates the inspection of medical students in their clinical experience."

5. Medical Students

The accreditation/approval process should determine whether the medical school admits only those students who possess the intelligence, integrity, and personal characteristics that are generally perceived as necessary to become effective physicians. Approval should not be granted to a school that fails to admit qualified students.

The accreditation/approval process should determine whether the medical school carefully monitors the progress of students through the educational program and graduates only those students who successfully complete the program. Approval should not be granted if the school fails to monitor students for satisfactory academic progress.

Student Characteristics

In its response to the Department questionnaire, Costa Rica cites Regulating Code for Law No. 6693 as the authority that addresses admissions requirements at medical schools, one of which is a high school diploma. In addition, "for each school of medicine, CONESUP studies and authorizes admissions criteria, which include an

admission exam. Also, as a requirement to enroll in clinical courses, approved study plans demand the passing of basic sciences for medicine."

Further, Costa Rica states that "medical schools must publish admission policies that are designed to secure the best possible students for medicine. Policies describe requirements for accepting transfer students and granting advance standing. Policies describe the technical or physical standards for the profession and for the education of physicians. Admissions requirements focus on satisfactory prior scholastic achievement, personality, motivation, industry, and emotional characteristics. Interviews are conducted of all qualified applicants who are under final consideration."

Graduates Only those Students who successfully complete the Program

In its response in the Department questionnaire, Costa Rica indicates that "medical schools must evaluate the performances of students in relation to the achievement of the educational objectives." There are legal requirements to ensure that schools of medicine monitor the progress of students throughout their educational program and graduate only those students who successfully complete the program. For example, Article 51 of Regulating Code for Law 6693 (Decree No. 25071-MEP) requires that, during the exercise of its powers of inspection, "CONESUP, either directly or through its Technical Secretariat, will be capable of requesting from universities the information it deems necessary, or to prove on-site the facts and circumstances that are of its interest, with the object of verifying the fulfillment of the norms on behalf of the institution, or due to a procedure that is pending a resolution. It is the obligation of the institutional authorities to facilitate the exercise of those powers. The object of inspection on behalf of CONESUP is the proper follow-up of the student's progress."

Article 7 of The Regulating Code for Education Clinical Activity in the Social Security Department "establishes the process for the follow-up of students' progress in the clinical training through reviewing permanent reports from each institution." In addition, Article 32 of the same Regulating Code requires that "CENDEISS and the learning entities will perform evaluations at least once a year in order to ensure the professional formation and to verify the institutional policies in the area of health."

Finally, Articles 37, 38, and 39 of Regulating Code for Law 6693 (Decree No. 25071-MEP) require that "the titles conferred by private universities that have the object of accrediting a university degree, will be confirmed by the Technical Secretariat and registered in CONESUP." The requesting university's president must provide an affidavit or sworn statement indicating that the titles have been issued in accordance to the law and verifying that the holders have fulfilled their academic requirements. The title will be conferred within 15 days by the Technical Secretariat after receipt of the application, unless it determines some irregularity, in which case it will inform CONESUP.

6. Resources for the Educational Program

The accreditation/approval process should determine whether the medical school has physical facilities that are quantitatively and qualitatively adequate for the size and scope of the educational program, as well as the size of the student body. Approval should not be granted if the facilities are inadequate.

The accreditation/approval process should determine whether the faculty provides effective teaching and is of sufficient size to provide the scope of the educational program offered. Approval should not be granted if there is an insufficient number of qualified faculty.

The accreditation/approval process should determine whether the medical school has a library sufficient in size, breadth, and depth to support the educational program. Approval should not be granted if the library is inadequate.

Physical Facilities

Costa Rica requires the physical plant of the schools of medicine to be "appropriate, sufficient, well-maintained and properly equipped to provide an environment that is conducive to teaching, learning, and research in keeping with the mission and objectives of the college." Appropriate scientific instruments, apparatus, and audio-visual aids must be available in addition to short and long range plans noting how the equipment will be repaired or upgraded. This assertion is validated by the requirement of Article 18 of Regulating Code for Law 6693 (Decree No. 25071-MEP) that states "When appropriate, the physical plant standards of the Health and Occupational Safety in Construction Regulations shall be applied in order to provide for the minimum conditions for academic activities. Likewise for those purposes, a Ministry of Health permit must be obtained. Compliance with these standards is essential to obtain approval of the university or its entities. In all cases, the physical plant where the university will carry out its activities must have the permits required by and issued by the appropriate agencies, which must confirm that the plant meets the technical and health specifications necessary for its teaching activity."

Costa Rica indicates further that "classroom, laboratory, patient care related study, and office space must be quantitatively and qualitatively adequate and reasonably accessible for use, and maintained in a good state of function and cleanliness. When necessary, a suitable environment and procedures exist for the care and protection of live animals. The patient care facilities are maintained in compliance with governmental standards."

Faculty

In its response to the Department questionnaire, Costa Rica indicates that Article 13 of Regulating Code for Law 6693 (Decree No. 25071-MEP) establishes the requirements for professors. These requirements are necessary for the creation of a private university and require the entity to demonstrate that "the proposed university has the necessary academic, qualified personnel to carry out its operations, as required by subsection (c) of the Article 6 of the law. Therefore, the teaching staff must meet the following requirements:

- a) Persons who hold university titles that are legally valid or properly recognized by the appropriate official agencies.
- b) At a minimum, 75 percent must hold the degree of licentiate or equivalent.
- c) Ten percent must hold a degree beyond the licentiate.
- d) Fifty percent must have published at least three articles in prestigious specialized journals on topics related to those they will teach. In the case of artists, the publications may be substituted by public exhibits or public performances. Meritorious books may also substitute for the publication of articles, either partially or totally.
- e) In the case of specialists in technical subjects, the requirements of the previous subsection can be met by works of other types, such as plans, maps, execution of significant projects, or scientific or technical contributions, depending on the characteristics of the subject involved.
- f) Ten percent of the professors must have academic teaching or research experience for a least ten years and twenty-five percent for at least five years.
- g) For the doctoral program, all of the professors must hold a doctorate. Analogous requirements must be met for other degrees.
- h) None of the teaching staff may have a teaching load of more than 24 hours per week at the universities, which will be shown by sworn affidavit of the professors."

Library

Articles 11(i) and 19(g) of Regulating Code for 6693 (Decree No. 25071-MEP) establish library requirements. Article 11(i) requires a "detailed description of the installations and infrastructure available for the operation of the university, with special reference to classrooms, libraries, physical plant, and if applicable, workshops or installations for field work, laboratories and other facilities necessary for the fulfillment of the activities

provided in the study plan..." Article 19(g) requires a description of the library services, bibliographical resources, availability of laboratories and general infrastructure at the time the application is submitted, as well as the investment and acquisition plan provided for the adequate operation of the major.

The country further asserts that information technologies and services shall be available to faculty and students and shall be of the quality, depth, and currency to support the institution's mission and the objectives of the academic program. The information technologies shall include computer hardware and software, and related sources shall be reviewed and updated on a continuous basis to meet the emerging needs. The country indicates that support and training are provided to assist faculty and students learn and apply information technologies.

PART II: Accreditation/Approval Evaluation Procedures

1. There should be a clearly recognized body responsible for evaluating the quality of medical education in the country and that body should be legally authorized to accredit/approve medical schools offering educational programs leading to the M.D. (or equivalent) degree.

In its response to the Department questionnaire, Costa Rica states that "the Inspection Committee for the medical schools of CONESUP is the entity in charge of exercising the inspection of the medical education according to an agreement taken by CONESUP in a meeting held on August 27, 1998. CONESUP is the legal authority to approve the function of medical schools according to the Regulating Code for Law 6693 (Decree No. 25071), Article 3(e)."

2. The accreditation/approval process should include effective controls against conflicts of interest and inconsistent application of the accreditation/approval standards.

Costa Rica cites Articles 230, 234, and 236 of the General Law of Public Administration as the authority to prevent conflicts of interest in the operation of CONESUP. Article 230 deals with motives for abstentions and recusals set forth in the Organic Law of the Judicial Power and in article 102 of the Law of the Financial Administration of the Republic. Article 234 deals with the motives of members of collegiate bodies and provides directions for the members to abstain and separate themselves from proceedings. Article 236 provides further direction for the procedures of the abstentions and recusals.

Although these laws are clear on the procedures for abstentions and recusals of certain entities, Department staff cannot determine whether these laws specifically apply to those proceedings that involve decisions regarding whether a medical school should receive accreditation. However, Costa Rica did provide a further response that CONESUP "will be empowered to do all inspections that are required for the proper verification of the fulfillment of the standards." If the universities fail to fulfill these standards, "Articles 17, 18, 19, and 32 of the Regulating Code for Law 6693 (Decree No. 25071-MEP) will be followed, with sanctions ranging from reprimands to the closing down of the educational entity. In this case, an intervening Board is created that guarantees the rights of the students."

3. The accreditation/approval process should provide for the regular reevaluation of approved medical schools in order to verify that they continue to comply with the approval standards.

In its response to the Department questionnaire, Costa Rica indicates that during a meeting held on August 27, 1998, CONESUP agreed to reevaluate medical schools at least once every five years in order to determine if they continue to comply with the approval standards.

4. The accreditation/approval process should normally include a thorough on-site review of the school (and all its geographically separated sites, if any) during which sufficient information is collected to determine that the school is in fact operating in compliance with the accreditation/approval standards. This review should include, among other things, an analysis of the admission process, curriculum, qualifications of the faculty, and facilities available to medical students. If there is not an on-site visit, there should be some appropriate alternative that ensures a thorough review of the school for compliance with the accreditation/approval standards.

In its response to the Department questionnaire, Costa Rica indicates that there is a formal evaluation process for the accreditation/ approval of medical schools. The Inspection Committee of CONESUP conducts site visits in accordance with CONESUP's Agreement of August 27, 1998. The site visits include a review of the entire medical school facility, as well as interviews with the professors, students, and administrative personnel. CONESUP may authorize the Inspection Committee to conduct as "many visits as it deems necessary, but at least it should conduct one visit every two years."

Costa Rica cites Article 51 of Regulating Code for Law 6693 (Decree No. 25071-MEP) as the authority for CONESUP, either directly or through its Technical Secretariat, "to

be able to obtain from universities the information it needs or to verify the facts and circumstances that are of its interest, with the object of verifying the fulfillment of the norms on behalf of the institution, or due to a procedure that is pending a resolution.”

The self-evaluation process for the medical school occurs every five years at which time Costa Rica maintains that there is an “elaboration of a formal report.” The report is prepared by a self-examination committee, and the Dean of the medical school is responsible for presenting it in accordance with the CONESUP agreement passed during the August 27, 1998 meeting.

5. The accreditation/approval process should use competent and knowledgeable individuals, qualified by experience and training in the basic or clinical sciences, responsible for the on-site evaluation, policy-making, and decision-making.

Costa Rica states that in accordance with the August 27, 1998 agreement passed by CONESUP, “individuals who conduct the self-evaluation of the Medicine Surgery major must: have university research or teaching experience of at least four years in higher education; have at least three publications or works of merit; and have at least one medical specialty or a specialty in basic sciences depending on the case.” The document that contains the “Procedures for Inspection of Medical Schools in Costa Rica” indicates that the Inspection Committee named by CONESUP consists of a representative of the Ministry of Health, a representative of the Center for Strategic and Information Development in Health and Social Security (CENDEISS), a representative from the Board of Surgeons and Physicians, and a renowned member of the academic community. The Committee meets twice a year.

6. The accreditation/approval process should ensure that all accreditation/approval decisions are based on the accreditation/approval standards.

As stated in the “Procedural Overview” section of the procedures for the Inspection Committee, Costa Rica believes that its five-step inspection process serves as a guide for assisting CONESUP in its deliberations regarding whether a medical school is in compliance with the standards. Briefly, the five-step process is as follows:

1. Completion of a self-study by the program which compares findings to CONESUP’s standards and generates a report of strengths and weaknesses.

2. Visitation to the program by the Inspection Committee to validate the findings of the self-study and to assess compliance with the standards. A report is generated by the Committee subsequent to the visit.
 3. Opportunity for the institution to respond to the report.
- Subsequent to the institution's response to the report, the report, the self-study, and any other information the institution wishes to provide following the site-visit are reviewed by CONESUP. At this point, based upon a recommendation from the Inspection Committee, CONESUP decides whether to certify the school's compliance with the standards.
4. If certification of compliance with the standards is withheld or withdrawn, opportunity for the institution to seek a review of the decision in accordance with CONESUP's procedures.
 5. Provisions for periodic reviews to determine the school's continued compliance with the standards as well as progress in improving the quality of the educational program.

It appears to Department staff that if this five-step process is followed, Costa Rica's accreditation/approval decisions would in fact be based on CONESUP's standards.

Documentation

Costa Rica's Response to the Questionnaire, dated September 1, 1998
 Costa Rican Social Security System - Board of Directors, Regulations for Clinical Teaching Activity
 General Regulations for the National Council of Private Higher University Education (CONESUP), 1996
 Law No. 6693 of November 27, 1981, Decree no. 25071-MEP
 Procedures for the Inspection of Schools of Medicine in Costa Rica
 Standards and Requirements for the Inspection of Schools of Medicine in Costa Rica
 CONESUP Checklist of Applicable Standards for the Inspection of Schools of Medicine in Costa Rica
 File of one of the private institutions, the International University of Americas



AGENCY
RESPONSE

TO: Naomi Randolph

FROM: Leonor Antillón S.

DATE: 02-03-99

Dear Naomi:

We would like to appoint some important matters to the Staff Analysis of the Standards Used by Costa Rica, for the Evaluation of Medical Schools, prepared for that Department on January 15, 1999 and send by Fax.

1- In page 4, about Legal Authorization: indeed, the Constitucional Chamber of the Supreme Court of Justice, in vote # 7494-97, stated that "for a private university to operate, authorization from the Costa Rican Government is required", but also in the same vote, the Chamber added that: CONESUP is the government organ in charge not only of this authorization, but as well it must control, through the supervision and surveillance, the observance of the rules and minimum requirements.

2- In page 7, in reference with the Faculty, we must clarify, based on the answer to the Department questionnaire, as well as on the documents in reference to the standards and procedures for the inspection of the schools of medicine in Costa Rica, that the curricula proposal is the result of the work of a numerous and different sections of the same school, not only in the bases of the courses, but in the academic board, then, this is analyzed by CONESUP and send to OPES and to the Board of Surgeons and Physicians, in order to get an analysis of such curricula and verify the quality of the faculty, the contents of the courses and all the generalities of the proposal, with such criterion CONESUP decides.

3- In page 9, in reference to the list of clinical sciences, please, instead of "Physiology", must said "Phatophysiology". Probably the mistake came from the translation that we send to you.

4- In page 14, Part II, 2., in reference to effective controls against conflicts of interest, is necessary to clarify that in Costa Rica the General Law of Public Administration regulates all the activities of the government acts and the public officers in their duties, and of course the CONESUP officers are part of that and they are as well under such law, wich is hierarchy superior to the regulation and decret.

Sincerely,



Leonor Antillón.



Documentation

MINISTERIO DE EDUCACION PUBLICA
Consejo Nacional de Enseñanza Superior Universitaria Privada
Apdo. 10087-1000, San José - Costa Rica
Teléfono 233-9050, Fax 233-6118



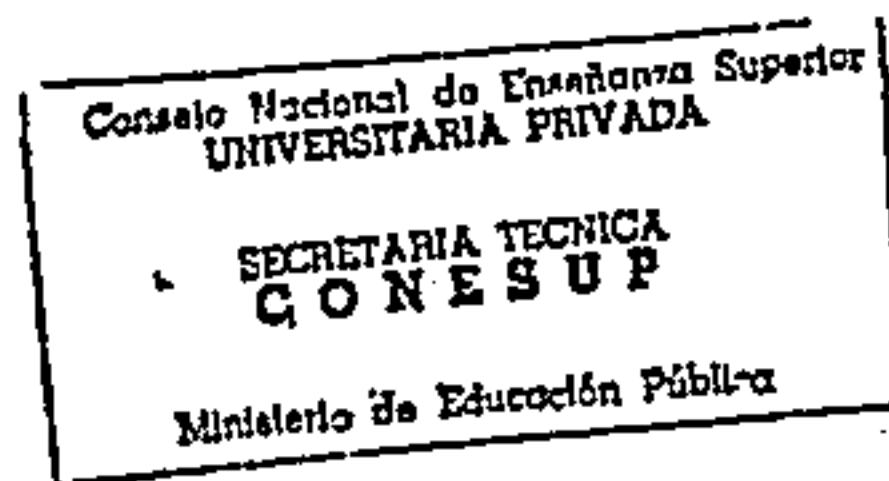
No.621-98-CONESUP
01 de setiembre, 1998


Dr. Karen W. Kershenstein
Acreditación and Eligibility Determination
Division
U.S. Department of Education
Room 3915, ROB-3
600 Independence Avenue, SW
Washington, D.C. 20202-5244

Estimada señora:

Disculpe el atraso en el envío del documento adjunto. Pero hasta el jueves de la semana pasada, el Consejo Nacional de Enseñanza Superior Universitaria Privada sostuvo una reunión en la que se tomaron importantes acuerdos relativos al proceso de inspección de las escuelas de medicina.

Estamos concientes de que no queda mucho tiempo para la reunión de la NCFMEA en octubre de este año, pero realmente le agradecemos toda la ayuda que nos pueda brindar para mantener la oportunidad de participar en ella.




Lic. Donald Jimenez Cascante
Secretario General

Dwl

Questionnaire

Standards and Procedures used by Countries to Evaluate Medical Education

a) Part I

Section I. Accreditation /Approval Standards

a) Yes. According to Law 6693 of November 27, 1981, it is mandatory, for the functioning of private universities and for the careers they offer, among them medicine and surgery, the prior authorization from the *Consejo Nacional de Enseñanza Superior Universitaria Privada* (CONESUP) (National Council for Private University Higher Education Studies). Additionally, the Constitutional Chamber of the Supreme Court of Justice, in vote number 7494-97, given on November 11, 1997 at 3:15 P.M., stated that for a private university to operate, authorization from the Costa Rican Government was required.

Regarding public education, the medical school of the University of Costa Rica is the only public medical school in the country. It was created by the Constitution of the Republic of Costa Rica and was given absolute autonomy to regulate itself (Article 84 of The Constitution). The University of Costa Rica and its medical school are controlled by the National Chancellors Council (CONARE)

b) Yes. Article 9 of Law 6693 states the following:

" Article 9.- Within the terms of this law, private universities, as private higher education institutions, will enjoy complete freedom in education, in scientific research and the dissemination of culture. They will contribute to the study and solution of national problems, for which they will establish obligatory community work programs or social services that are equivalent or similar to the ones in place at public universities."

Therefore, every school of medicine and surgery in Costa Rica must state, in its mission, its commitment to instruction, research, patient care and to serve the general public interest.

Section 2. Governance of Medical Schools

In Costa Rica, the governance of medical schools is independent from the institution's administration. Every school must have, at least, its own Academic Council composed by professors, student representatives and administrative staff of the school. These members must comply with the academic requirements stated in Law 6693. The student representatives must be among the best students. All of them should aspire to high moral and ethical principles. Among its functions, the Academic Council is in charge of:

- Formulating institutional policy
- Strategic planning, and achievement of the mission and objectives.
- Publishing policies regarding conflicts of interest for the board and institution.
- Appointing the dean and exercising control through him.
- Ensuring that the meetings are maintained and the minutes are registered.
- Recommending the destination of funds from the institutions' administrations for school purposes.
- Developing and monitoring succession of plans.

Medicine schools are regulated, as to their financial administration, by the Law of Foundations No. 5338 and the Law of Associations No. 218, subjecting them to the current accounting and tax systems of the country before the *Ministerio de Hacienda* (Ministry of the Interior) and the *Contraloría General de la República* (The Regulating Authority).

Thus, for example, article 15 of the Law of Foundations states that:

"Article 15.- The Administrative Board will provide, on the first day of January of each year, an accounting report of the activities of the foundation to the *Contraloría General de la República*.

The *Contraloría* will audit the functioning of the foundations, by the means it wishes and when it judges it pertinent. If in the course of a study there should be an irregularity, it will be informed to the *Procuraduría General de la República*, for the corresponding action before a court of justice, if there should be merit for such action."

At the same time, article 21 of the Law of Associations number 218 states the following:

"Article 21.- The administrative and fiscal exercise of associations will be one year in duration. In the first fifteen days of each association exercise, the board will meet ordinarily to hear the reports of the President, the Auditor, and the Treasurer, about the dealings during the last immediate exercise."

Section 3. Administration of the Educational Program.
According to the Regulating Code for Law 6693 (Decree No. 25071-MEP), the chief academic officer or dean must be qualified by training and experience to direct the development of the educational program. He must have at least the degree of Licentiate and have academic experience in national or foreign universities for no

less than eight years. This is mandated in article 14 of the General Regulating Code of the National Council for Higher Education (CONESUP). DE-25071-MEP:

"Article 14.- The Provost, Deans and Diprovost of academic units or their equivalents will possess, as a minimum, the degree of Licentiate and have experience in national or foreign universities for no less than ten, eight and four years respectively. With regards to any other university academic authority, the degree of Licentiate will be required as a minimum and academic experience of four years. Those who substitute Provosts, deans, or academic unit diProvosts, will fulfill the same requirements asked of these."

Schools of Medicine must have an adequate and appropriately credentialed full-timed administrative staff to ensure the success of the school.

Administrative organization must have clear lines of authority, responsibility, and communication and principal officers have to be qualified by training and experience relative to their assigned responsibilities.

An adequate and appropriately credentialed, full-time support staff shall be employed to ensure the success of the school. They must be qualified by training and experience relative to their assigned responsibilities. Policies are published that define the terms of employment.

Section 4. Educational Program

a) Yes. The medical educational program must be based upon a realistic set of general and specific educational objectives for the basic and clinical sciences and must be of appropriate length and content to cover the essential education required in the basic and clinical sciences. Clear educational objectives must be developed for each course, clinical experience, and area of study, and they must be revised on a periodic basis, and disseminated to appropriate parties.

b) According to the Nomenclature Agreement for Degrees and Titles for Higher Education, signed by members of the National Council of Provosts, the minimum requirement for the preparation of a Licentiate in Medicine is ten cycles of fifteen weeks each, or its equivalent.

c) According to article 13 of Law No. 6693, medical schools in private universities will be of the same nature as those offered in state or public universities, which include in their curricula, basic sciences for medicine.

"Article 13.- The study plans in private universities will be of a similar category to those of state universities of the Republic or of other universities of recognized prestige, and equivalent for purposes of recognition of studies."

About this particular issue, the Constitutional Chamber of the Supreme Court judged in its vote number 7494-97 that:

"What is set forth (...) is an equivalence with regards to minimum requirements in curriculum, without hindrance to the ability of other universities that wish to establish more courses, longer study plans, greater complexity, greater academic excellence, being that there is the possibility of establishing mechanisms for the examination of the fulfillment of those minimum requirements, once the student has completed the educational study programs of the higher education center that took care of his/her academic preparation."

Because of the above, all the authorized medical schools must include basic sciences in their academic programs.

d) Basic science instruction should include didactic and laboratory courses and established educational objectives serve to guide basic science instruction. It should provide a knowledge based in the anatomical, biological, and physiological sciences necessary for the achievement of the educational objectives for the basic sciences, and prepare the student for the clinical component of their training and the research component of the institution's mission.

Basic sciences included in the medical education program are: Chemistry, Biology, Biochemistry, Physics, Mathematics, Statistics, Anatomy, Histology, Embryology, Genetics, Physiology, Microbiology, Parasitology, Pathology, and Pharmacology.

e) Yes. The curriculum of medical schools include the study of clinical sciences. Clinical science instruction must have didactic and proficiency based courses and supervised patient care to enable the orderly progression of clinical competency. Established educational objectives serve to guide clinical science instruction and prepares graduates for entry-level residency training.

Institutional policies and the level of supervision afforded should be sufficient to ensure that faculty and students are responsible for maintaining patient safety, privacy, and dignity.

A sufficient volume and diversity of experiences in the supervised care of patients should be available to develop the knowledge, skills, and attitudes necessary for student achievement of the objectives for clinical education.

Clinical instruction ensures student understanding of the ethical and moral basis in the care and treatment of patients and utilizes a wide variety of clinical training settings. External clinical programs provide experiences consistent with educational objectives and are evaluated periodically to assess their relationship to

f) Clinical sciences that are included in the medical education program are the following, with the indication of the approximate length by credits. These courses correspond to the study plan for the Medical School of the University of Costa Rica, which is the State university, and serves, according to article 13 of Law 6693 mentioned above, as parameter for the comparison of study plans of private schools of medicine.

Physiology and semiology: 10 credits

Internal Medicine: 22 credits

Pediatrics: 12 credits

Psychiatry: 6 credits

Gynecology: 6 credits

Obstetrics: 6 credits

Radiology: 2 credits

Surgery: 12 credits

Public Health: 8 credits

Clinical Pharmacology: 3 credits

Internship in Surgery, pediatrics, gynecology and obstetrics, and medicine: 1 year.

The Regulating Code for Law number 6693 defines a credit as a unit of value for the student's work, equivalent to three hours per week, for fifteen weeks, applied to an activity which is supervised, evaluated and approved by the professor. (Article 19 of the Regulating Code for Law 6693 - Decree No. 25071)

g) Yes. The medical education program include courses in the field of the humanities.

h) The courses, in the field of humanities, that medical schools include are the following:

- History of Medicine: 2 credits.
- Medical Ethics: 2 credits.
- Legal Medicine. 2 credits.

i) The educational program of medical schools must fulfill the type, length and objectives of the clinical rotations established in the CONESUP's approved study plan for the particular university. Said rotations have to be done at adequate installations according to each rotation, and under the supervision of a dully-qualified professional of the specific area.

j) Clinical rotations start on the fifth quarterly cycle or fourth semester cycle until the end of the study plan, according to the case, according to what was authorized by CONESUP for each particular medical school. All students must also complete a year of rotating internship, with a length of three months in each of the four great areas: Internal Medicine, Pediatrics, Surgery, and Gynecology -Obstetrics.

k) To authorize the functioning of a School, the CONESUP demands the assuring of the necessary installations for the clinical practice of students. In Costa Rica, medical schools have their clinical rotations in hospitals of the *Caja Costarricense de Seguro Social* (Social Security Department), which is the institution that administrates public hospitals in the country and that is dully regulated by the Health Ministry. The *Reglamento de la Actividad Clínica Docente en la Caja Costarricense del Seguro Social* (Regulating Code for Educational Clinical Activity in the Social Security Department) is the norm that regulates the inspection of medical students in their clinical experience.

Section 5 Medical students

a) Law No. 6693 establishes the requirements for the admission at medical schools. One of them is the need of a secondary school (high school) diploma. For each particular School of Medicine, CONESUP studies and authorizes admissions criteria, which include an admission exam. Also, as requirement to enroll in clinical courses, approved study plans demand the passing of basic sciences for medicine as requirement.

Medical schools must publish admission policies that are designed to secure the best possible students for medicine. Policies describe requirements for accepting transfer students and granting advanced standing. Policies describe the technical or physical standards for the profession and for the education of physicians.

Admissions requirements focus en satisfactory prior scholastic achievement; and personality, motivation, industry, and emotional characteristics. Interviews are conducted of all qualified applicants who are under final consideration.

b) Medical schools must have an adequate system for maintaining and securing student records. They must include, for each student, the admission application and transcripts and a complete record of medical education, including attendance, achievements in subjects and courses, all grades, failures, and disciplinary actions. Records are properly secured and protected.

Medical schools must establish reliable and valid methods to evaluate the performance of students in relation to the achievement of the educational objectives.

To evaluate the student's mastery of knowledge, skills, and attitudes in basic science education and in clinical science education. The student's clinical knowledge, skills, and attitudes to ensure sufficient competencies necessary graduation and to enable graduates to function as residents in postgraduate training programs. The student's development of problem solving ability and attitudes, values, and behavioral attributes related to the ethical responsibilities of medical practice.

In addition, the following articles state requirements to ensure that schools of medicine monitors the progress of students through the educational program and graduate only those students who successfully complete it.

The Regulating Code for Law 6693 in its article 51 states:

*** Article 51.-** During the exercise of its powers of inspection, CONESUP, either directly or through its Technical Secretariat, will be capable of requesting from universities the information it deems necessary, or to prove on-site the facts and circumstances that are of its interest, with the object of verifying the fulfillment of the norms on behalf of the institution, or due to a procedure that is pending a resolution. It is the obligation of the institutional authorities to facilitate the exercise of those powers. The object of inspection on behalf of CONESUP is the proper follow-up of the student's progress. *

Article 7 of the Regulating Code for Educational Clinical Activity in the Social Security Department establishes the process for the follow-up of the students' progress through permanent reports from each learning institution.

"Article 7.- It is the responsibility of the Academic Council to offer a monthly report to the DiProvost of the Professorship Unit regarding the quantity of clinical spaces used. This report will contain the utilization by the students as well as by the Learning Entity. The information contained in that report will be sent to the *Dirección Ejecutiva del CENDEISSS* (Executive Direction of the CENDEISSS) by the DiProvost of the Learning Unit.

Article 32 of the same Regulating Code, establishes that CENDEISSS and learning entities will perform evaluations at least once a year in order to ensure the professional formation and to verify the institutional policies in area of Health. Said article states the following:

"Article 32.- The CENDEISSS and the Learning Entities will perform evaluations, at least once a year, of the results of the practices in the clinical rotations, with the purpose of introducing the changes and adjustments in the theoretical and practical programs that are necessary to improve the formation of the professional and the technician, and adequate them to the necessities and realities of the country, according to institutional policies in the area of Health, provided the university autonomy is not affected. The result of the evaluation will be informed in writing to the Management of the Medical Division."

In order to ensure the graduation of only those students who have satisfactorily completed the study programme, articles 37, 38, and 39 of the Regulating Code of CONESUP, establish that the titles conferred by private universities will have to be confirmed and inscribed by CONESUP, which can verify that all academic and legal requirements have been met.

" Article 37.- All titles conferred by private universities that have the object of accrediting a university degree, will be confirmed by the Technical Secretariat and registered in CONESUP."

Article 38.- The interested university will request the respective confirmation to the corresponding title or titles to the Technical Secretariat. In the same act it will accompany an affidavit from the Dean where he/she manifests that such titles have been conferred in conformity to the law, as well as that its beneficiaries have fulfilled the whole of their academic obligations."

Article 39.- The Technical Secretariat will extend the corresponding confirmation within fifteen days after receipt, unless it determines the existence of irregularities, in which case it will inform CONESUP for what it deems pertinent."

Section 6

Resources for the Educational Program

a) The physical plant of schools of medicine must be appropriate, sufficient, well-maintained and properly equipped to provide an environment that is conducive to teaching, learning and research in keeping with the mission and objectives of the college.

Article 18 of the Regulating Code to Law 6693 (Decree 25071) establishes the parameters within which the physical installations for the Schools of Medicine must develop, under the Security and Occupational Hygiene and Construction Regulations.

"Article 18.- In what is pertinent, the norms relative to the physical plant in the Security and Occupational Hygiene and Construction Regulations will be applied, with the end of assuring the minimal conditions in which academic activities will take place. Likewise, for the ends anticipated, the respective functioning permit issued by the Health Ministry will be submitted. The fulfillment of the established requirements is indispensable for the university or its entities to be authorized. In any case, the physical plant in which the university develops its activities will have the respective permits that are demanded by the corresponding organisms, which will make sure that the technical and health conditions needed to exercise professorship are met."

Classroom, laboratory, patient care related, study, and office space must be quantitatively and qualitatively adequate and reasonably accessible for use; and maintained in a good state of function and cleanliness. When necessary, a suitable environment and procedures exist for the care and protection of live animals. Patient care facilities are maintained in compliance with governmental standards.

Concerning equipment, laboratory, patient care, instructional, and office equipment shall exist in sufficient quantity and quality for the educational program and research. Appropriate scientific instruments, apparatus, and audio-visual aids must be available. Short and long range plans exist and are implemented for the repair, replacement, or upgrading of equipment.

Sufficient equipment must be available and accessible to serve the needs of classroom and clinical teaching learning.

b.) A library with appropriate technological resources, equipment, and services to support the instructional, patient care, and scholarly activities of students and faculty shall be provided by the institution. An appropriate percentage of the educational budget should be allocated for library expenses. Students and faculty have access to up-to-date books, periodicals, and either publications. Learning aids are sufficient for the needs of the faculty and students are provided orientation to the library and its services. Faculty members recommend and assist in the development of library policies and in the selection of library materials.

Library staff is qualified by experience and education

Articles 11, subsection i) and 19 of the Regulating Code to Law 6693 establish the requirements for the library.

"Article 11.- Subsection i). Detailed description of the installations and infrastructure available for the operation of the university, with special reference to classrooms, libraries, physical plant, and if applicable, workshops or installations for field work, laboratories and other facilities necessary for the fulfillment of the activities provided in the study plan. (...)"

"Article 13.- Subsection g): Description of the library services, bibliographical resources, availability of laboratories and general infrastructure at the time the application is submitted, as well as the investment and acquisition plan provided for the adequate operation of the major.

Information technologies and services shall be available to faculty and students and shall be of the quality, depth, and currency to support the institution's mission and objectives and enable achievement of the educational objectives for the academic program. Computer hardware, software, and related resources are available and utilized by faculty and students to improve the academic program and to further learning. Electronic information resources are reviewed and updated on an ongoing basis to meet current and emerging needs,

Support and training are available to assist faculty and students to learn to use and effectively apply information technologies.

c.) Article 13 of the Regulating Code to Law 6693 establishes the following requirements for the professors:

"Article 13.- For the authorization of the creation of a private university, it must be demonstrated that the project university has the necessary and sufficiently-prepared academic personnel for the performance of the functions pertaining to their posts, according to what is demanded in subsection c) of article 6 of the law. To this end the educational staff will be made up of the following: Members that have a university degree that is valid or legally recognized by the corresponding official authorities.

Seventy-five percent (75%), as a minimum, will have the academic degree of Licentiate or its equivalent.

Ten percent (10%) as a minimum will have a university degree higher than Licentiate.

Fifty percent (50%) will have published at least three articles in specialized prestigious magazines, about subjects related to the courses they plan to impart. When dealing with artists, the publications may be substituted by three works presented or executed in public. Likewise, books of merit will be capable of substituting partially or totally the articles.

When dealing with specialists in technical fields, works of other nature, such as blueprints, execution of significant projects or contribution to scientific or technological development, may be presented for the fulfillment of the requirement set forth in the preceding subsection, all in accordance with the particularities of the corresponding field.

Ten percent (10%) of professors will have had academic university experience, in research or teaching, of at least ten years and another twenty five percent (25%) of at least five years.

In doctorate programs all professors will be doctors. A similar provision will govern programs directed to the acquisition of other degrees.

None of the members will have a workload that is greater than 24 lecture hours per week in the universities, which each professor will have to demonstrate by affidavit."

With regards to the student-professor relationship in clinical rotations, the Regulation for the functioning of Academic Councils for Educational Clinical Activity of CENDEISS establishes the following:

"Article 3.- The Academic Council of each educational unit will have a book of records (acts), registered with the official notary, where it keeps record of each meeting with the signatures of those present. In that book of records the names of students with their respective tutors will be kept. The opening and closing of the book of records will be done by the Legal Direction of the CCSS. The control of the educational clinical activity will be the responsibility of the Academic Council of each Health educational unit. The elaboration of the programs and their execution in each course, will be the responsibility of the respective university."

"Article 4.- The Academic Council will be responsible for the control of the educational clinical activity and of the quality of the education offered in the

different services that allow for the formation of professionals and specialists capable of promoting health in country, in service of the real necessities of the population."

According to article 13, subsection h) of the Regulation of CONESUP, none of the members of the faculty will have a load greater than 24 lecture hours per week.

Part II: Approval Process

1. a) Yes.

1.b) The Inspection Committee for the medical schools of National Council for Higher Private University Education (CONESUP) is the entity in charge of exercising the inspection of the medical education according to an agreement taken by CONESUP in a meeting held on August 27, 1998. CONESUP is the legal authority to approve the functioning of medical schools according to the Law No. 6693, article 3, subsection e) mentioned above.

2.a) In order to prevent conflicts of interest in the heart of CONESUP, the procedure established in the following articles of General Law of Public Administration states:

"Article 230.- Motives for abstention will be the same as for the impediment and the recusation set forth in the Organic Law of the Judicial Power, and also those that are set forth in article 102 of the Law of the Financial Administration of the Republic. The motives for abstention will apply to the directing organism, the appealing organism, and to the other entities or officials that intervene helping or advising them in the proceedings. Nevertheless, when the motives apply to one of the members of a collegiate body, the abstention will not extend to the other members, except in qualified cases in which these members consider it correct."

"Article 234.- 1. When it deals with a collegiate body the member with motive for abstention will separate him/herself from the proceedings, making this known to the body to which he/she belongs. In this case, the abstention will be resolved by remaining members of the collegiate body, if there are enough to make quorum; otherwise, the superior of that body will resolve, if there should be one, or otherwise by the President of the Republic. If the abstention is sustained, the same collegiate body will judge the matter, made up of the substitutes, if there should be any, or with designated substitutes "ad hoc" by the body of the appointment."

"Article 236.- When there be a motive for abstention, the prejudiced pat will also be able to recall the officer with the respective motive. The recusation (objection) will be presented in writing, expressing the cause (motive) on which it is founded or accompanying the conducive evidence. The public servant who is objected, when he/she receives the writing, will decide on that same day or on

the following whether he abstains or whether he/she considers the recusation to lack foundation, and will proceed, in any case, in the manner ordained by the preceding articles. The public servant or the organism called to resolve, will be able to collect reports and to order other tests that he/she considers appropriate within the non-deferrable period of five days and will resolve in the manner and terms set forth in the preceding articles. The recusation of the President of the Republic will not be sustained."

Article 48 of the Regulation to Law 6693 establishes the remedies of repeal and appeal in case of inadequate application of any authorization.

"Article 48.- Against the decisions of the Technical Secretariat the remedies of repeal and appeal before the CONESUP will be given, which will have to be presented in writing and stating the reasoning behind the remedy, presented to the same secretariat within the ten work days after the notification, starting with the day after said notification. With the same requirements and terms the remedy of repeal will be admitted against decisions of CONESUP, who will end the administrative process."

2.b) CONESUP will be empowered to do all inspections that are required to the proper verification of the fulfillment of the standards. In case the university fails to fulfill these, articles 17, 18, 19 and 32 will be followed, which sanctions range from reprimands to the closing down of the educational entity. In this last case, an Intervening Board is created that guarantees the rights of the students."

"Article 17.- CONESUP will approve the structure and functioning of the proposed university by the agent entity, except there be objective and precise reasons, which will have to be pointed out, that justify its disapproval."

"Article 18.- In what is pertinent, the norms relative to the physical plant in the Security and Occupational Hygiene and Construction Regulations will be applied, with the end of assuring the minimal conditions in which academic activities will take place. Likewise, for the ends anticipated, the respective functioning permit issued by the Health Ministry will be submitted. The fulfillment of the established requirements is indispensable for the university or its entities to be authorized. In any case, the physical plant in which the university develops its activities will have the respective permits that are demanded by the corresponding organisms, which will make sure that the technical and health conditions needed to exercise professorship are met."

"Article 19.- The application for the opening of a major by a duly authorized university will have at least the following information: Name of the major and academic degrees Professional profile; study plan, duration and requirements for admittance and graduation. Courses syllabi, and their corresponding value in credits, lecture and individual work hours, as well as a description of the courses, their general and specific objectives, contents, bibliography, materials

and equipment. Description of the library services, bibliographical resources, availability of laboratories and general infrastructure at the time the application is submitted, as well as the investment and acquisition plan provided for the adequate operation of the major. Titles and degrees that are to be conferred. Enrollment and tuition costs. Academic personnel for the first two years and their documentation.

" **Article 21.-** To all application of opening of a major there will be attached a comparative analysis of the study plans and community work programs or obligatory social service for the new major, with the state universities or of other universities of well-known prestige, for purposes of articles 9 and 13 of the law.

3. In conformity with an Agreement taken by CONESUP in a meeting held on August 27, 1998, medical schools are reevaluated at least once every five years in order to verify if they continue to comply with the approval standards, according to an agreement taken by

4.-

a) Yes.

b) Yes.

c) The inspection visits are conducted by the Inspection Committee, as per CONESUP's Agreement of August 27, 1998. Said visits include the revision of the whole of the physical plant of the medical schools. In the exercise of its power of inspection, CONESUP, through the Inspection Committee makes as many visits as it deems necessary and with the priority it deems pertinent, but at least it should conduct one visit every two years

d) Yes. In the inspection process, CONESUP can ask for all the information needed, including interviews with the professors, students and administrative personnel.

" **Article 51.-** During the exercise of its powers of inspection, CONESUP, either directly or through its Technical Secretariat, will be capable of requesting from universities the information it deems necessary, or to prove on-site the facts and circumstances that are of its interest, with the object of verifying the fulfillment of the norms on behalf of the institution, or due to a procedure that is pending a resolution. It is the obligation of the institutional authorities to facilitate the exercise of those powers. "

e) Yes. The evaluation process includes an examination of the medical school's facilities.

f) Yes. The process of self-evaluation, that must be done at least once every five years, includes the elaboration of a formal report. Said report is prepared by a self-evaluation committee and the Dean of the medical school is responsible for presenting it, as established in CONESUP's Agreement taken in the meeting held on August 27, 1998.