

U.S. Department of Education

Poland: Redetermination of Comparability (deferred from 2009)

Prepared October 2011

Background

The National Committee on Foreign Medical Education and Accreditation (NCFMEA) reviewed Poland in October 1997. At that meeting, the NCFMEA determined that the standards used by the Polish Ministry of Health and Social Welfare to evaluate the medical schools were comparable to those used to evaluate programs leading to the M.D. degree in the United States.

When the country was first reviewed, the Ministry of Health and Social Welfare (MHSW) was the government entity responsible for the accreditation of medical schools. In addition, this ministry reported that it relied upon the Accreditation Committee for Polish University Medical Schools (ACPUMS) to accredit medical schools. In 1997, the Conference of Presidents of Polish Medical Schools established the ACPUMS to also evaluate Polish medical schools. The recommended decisions of ACPUMS were submitted to the Polish Ministry of Health and Social Welfare. At that time, ACPUMS reports on medical accreditation had the full support of the Ministry, although its activities were completely independent of the Ministry, and apparently optional.

The NCFMEA reviewed the country for continued comparability at the September 2003 Committee meeting. At that meeting, the NCFMEA determined that the accreditation process used by Poland to evaluate its medical schools continued to be comparable to those used to evaluate medical schools in the United States.

As part of their decision, the NCFMEA requested that the Ministry submit a report on its activities with respect to its accreditation of the medical schools in Poland for review at its September 2004 meeting. The NCFMEA reviewed the report at its September 2004 meeting and accepted the report. Additionally, the country revealed that its laws were to change and through the Law of Higher Education of 2005 (Law), the Polish State Accreditation Committee (PSAC), a governmental entity was established to accredit universities including medical schools. When the NCFMEA accepted the report, it requested that the responsible Ministry provide an additional report that described its activities with regard to medical schools and to provide additional information clarifying the roles of the PSAC and ACPUMS in accrediting medical schools in its petition for a redetermination of comparability.

The country provided a report for consideration at the September 2005

NCFMEA meeting. The NCFMEA accepted its report and requested the country to reapply for a redetermination of comparability for presentation at its September 2007 meeting. While planning for a fall 2007 NCFMEA meeting, the Department requested the country to provide updated information covering its activities in 2006 and 2007. The Country's updated report restated much of the information provided in its 2005 response. At the fall 2007 meeting, NCFMEA requested the country to provide additional detailed information on the work of the PSAC, by disclosing how it conducted accreditation activities and what standards it used to evaluate medical schools for review for its fall 2008 meeting and a petition for redetermination of comparability at its September 2009 meeting. NCFMEA accepted the country's report at the fall 2008 meeting. At the September 2009 meeting, the NCFMEA deferred a determination of comparability until its spring 2010 meeting to receive a report on nine issues regarding the country's administration of its quality assurance system and standards for evaluating medical education.

However, the Department rescheduled the spring 2010 and fall 2010 meetings pending the appointment of the current members to the NCFMEA, and this meeting is first opportunity to address the issues of concern expressed at the September 2009. This analysis incorporates only the new information the country provided. Please note that the Department has included the previous analyses covering issues of concern that led the NCFMEA to defer the country's application for a redetermination of comparability at your fall 2009 meeting.

Summary of Findings

Based on a review of the responses to the questionnaire and information that the Country provided to the Department, it appears that Poland has two systems to evaluate and accredit medical education. The accreditation/approval system administered by the Polish State Accreditation Committee (PSAC) for the evaluation and accreditation of institutions of higher education with colleges or schools offering medical education fields of study as well as medical universities appears to be comparable to the system used in the United States. The accreditation system administered by the Accreditation Committee of Polish University of Medical Schools (ACPUMS) has an accreditation system that evaluates Polish Medical Universities and has components consistent with the system used in the United States.

The PSAC accreditation system has substantially the same components of the U.S. accreditation system and uses a statutory and regulatory-based accreditation system. This process entails a self-study, site visits conducted by evaluators who are experts and members of ACPUMS, deliberation by PSAC, and decision-making by the Minister of Health or jointly with the Minister of Science and Higher Education against a set of written standards, regulations, and the Higher Education Law of 2005. The PSAC evaluation system covers the institutions of higher education offering medical education programs of study and medical universities.

The ACPUMS accreditation system, on the other hand, has demonstrated that it has some components of the U.S. system and uses a peer-based accreditation system involving the members of the medical universities in Poland. For example, the ACPUMS accreditation process is voluntary and appears to evaluate only medical universities and not the institutions of higher education that offer medical education programs of study. The evaluation includes the analysis of the medical university's self-study, site visit of the program and facilities, and deliberation and decision-making by ACPUMS. The ACPUMS standards encompass many of the same content areas as those in U.S. accreditation of medical programs and appear similar, but do not contain the comprehensiveness and rigor of those in U.S. accreditation.

That said, this Committee might want to explore further with the Country representatives from ACPUMS and the PSAC the differences in their review processes. In particular, the differences in reviews covering the administration of a medical school, the recruitment and admissions processes of each entity regarding U.S. students, whether visits to previously un-examined clinics occur following within 12 months of the accreditation review, and substantive change notifications and reviews. This Committee may want to ask for clarification in these areas to assist in determining the comparability of Poland's medical evaluation process with that of the United States.

Staff Analysis

Outstanding Issues

Since the interactions between the statutes (issued by the Ministry of Science and Higher Education) and the related health matters (covered by the Ministry of Health and Social Welfare) likely entail overlapping responsibilities, the NCFMEA inquires further as to how the two distinct Ministries cooperate in practice.

Country Narrative

Relevant issues are explained on the page 7 of the Report submitted by the State Accreditation Committee. The Minister of Science and Higher Education is responsible for national strategy and policy in the area of higher education and supervises higher education institutions (hereinafter referred to as the "HEIs") specified in table on page 8 of the Report. Supervision of HEIs' didactic and research activity in the area of medical sciences is performed by the Minister of Science and Higher Education in consultation with the Minister of Health; supervision performed by the Minister of Health relates to medical HEIs only, similarly as supervision of the Minister of Culture and National Heritage to artistic HEIs.

Analyst Remarks to Narrative

The narrative explains that the Minister of Science and Higher Education is responsible for national strategy and policy governing all of higher education institutions in Poland and in conjunction with the Minister of Health, supervision of the didactic education and research in the area of medical sciences. The Minister of Health supervises the medical higher education institutions only, and does so in concert with the Minister of Science and Higher Education. For example, the Minister of Science and Higher Education determines what individual fields of study are included in the educational program based on the authorization granted to the institution. On the other hand, the Minister of Health has the authority to inspect public health care centers established by medical universities. After the inspection, the Minister of Health notifies the university and the Minister of Science and Higher Education about the results of the inspection. In addition, the Minister of Health may also order a university to accept an inspection at the public health care centers and to report those results twice a year.

Education provided by all institutions of higher education and the methods of establishing new field of study must be assessed by the PSAC or upon a request by the Minister of Higher Education. The Minister of Higher Education oversees whether the university's activities conform to established regulations and statutes involving its scope of education or academic teacher training as well as providing adequate funds to implement the activities.

Country Response

The relations between the Ministry of Health and the Ministry of Science and Higher Education exceed the scope of activity of the Accreditation Committee for Polish Universities of Medical Science. Both the role of ACPUMS and the relations between the Ministry of Health and the Ministry of Science and Higher Education were explained in detail in the letter under the reference MZ-NSK-073-22670-1/MF/10, of February 8, 2010 (attachment 1)

Analyst Remarks to Response

The Minister of Health provided a response to address the overlapping responsibilities of the Minister of Health and the Minister of Science and Higher Education (Minister of Higher Education) in relation to medical education accreditation/approval in Poland.

The Minister of Higher Education is responsible for the following activities: the establishment of higher education institutions, authorization for a higher education institution to provide degree programs in a given field and at a given level, the assessment of the quality of education in a given field of study, including the training of teachers, the quality of individual fields of education study at medical universities and institutions of higher education offering the study of medicine, and the compliance with the requirements for the provision of degree programs. According to the 2005 Law on Higher Education, the Minister

of Higher Education regulates the procedures for the establishment, operations and liquidation of higher education institutions.

The Minister of Higher Education authorizes a higher education institution to provide degree programs in medicine in conjunction with the Minister of Health. The Minister of Higher Education in cooperation with Minister of Health supervise teaching and research activity in the scope of medical sciences conducted at institutions of higher education with a medical school or college. The chart in the original submission lists the higher education institutions that offer medical education and the supervisory responsibilities for each Minister. Both the Minister of Health and the Minister of Higher Education supervise the two higher education institutions that have medical schools or colleges within the university. The Minister of Health supervises the seven medical universities. The institutions of higher education that provide medical education also participate in the health care and service to the public by combining their teaching activity with scientific research and active participation in the development of a health care system by setting up regular in-service training of medical staff, providing highly specialized diagnostics and treatment, being committed to the promotion of health and providing expert opinions for state and local government authorities.

The Minister of Health maintains a register of health care institutions and provides funds for teaching tasks performed by institutions, including the provision of health care services offered in relation to medical student education and postgraduate education of physicians, as well as medical research activity. Universities providing education in the medical field of study are authorized to award academic degrees and enjoy the status of public higher education institutions. The Minister of Health is responsible for the liquidation or reorganization of health care institutions.

Staff Conclusion: Comprehensive response provided

Evidence that the ACPUMS' process consistently evaluates the adequacy and efficiency of each medical school's administration.

Country Narrative

Attached Report of the State Accreditation Committee (answers for questions 1 – 8 were provided by the State Accreditation Committee - PKA - and regard its' activities as the only legally established Polish accreditation committee performing obligatory assessments on all fields of study) presents a management model of HEIs as well as rules and criteria for assessing activity of HEIs' bodies and administration and internal quality assurance system which constitute significant instrument of quality management. Analysis and assessment of individual elements of the system allows for formulation of conclusions concerning accuracy of applied solutions as well as effectiveness of activities undertaken in relevant areas and their assessment in site-visit report (see Appendix No. 15 and Appendix No. 24).

Analyst Remarks to Narrative

The Polish State Accreditation Committee (PSAC) is the only entity established under Polish law to assess the quality of education and the conditions under which institutions provide education. The PSAC has 11 sections or groups of fields of study; of which medical sciences is one. The PSAC works in plenary sessions and through its section bodies. The bodies include the President, the Secretary, and the Presidium. The Presidium includes the President of the PSAC, the Secretary, the Chairmen of each section (representing the specific fields of study), and the President of the Student Parliament of the Republic of Poland. Each section is composed of at least five members of the Committee representing a group of fields of study including at least three members holding the academic title of professor in the areas or disciplines of science related to a given area of study. The law authorizes the PSAC to have the powers over its organizational structures and procedures for operation, conducting assessments, and methods for appointing reviewers. The PSAC appears to ensure the adequate and consistent review of medical schools administration. They have standards that they use to assess medical schools. The process includes a review of the management model for all HEIs as well as the administrative capacity. The Rector manages the operations of the HEI and represents it in external relations. The Rector's responsibilities include the following:

1. making decisions concerning the assets and business matters of the institution;
2. establishing, transforming and abolishing organizational units;
3. supervising the activities of the institution in the area of teaching and research;
4. supervising the administration of the institution and the management of its business matters;
5. ensuring compliance with the law and security on the premises of the institution; and
6. defining the scope of duties of the vice-rectors.

Rectors are elected from among the academic staff. Additionally, the Rector is the president of the senate. The organizational chart of the institutional structure is provided on page 14 of the PSAC report.

All decisions made by deans (heads of basic organizational units) and resolutions adopted by faculty senates or other collective bodies are subject to the jurisdiction and approval of the Rector, including those pertaining to study plans and curricula developed by faculty boards (board of basic organizational units) after consultation with relevant student government bodies, including decisions on the establishment and removal of individual fields of study.

The Law on Higher Education stipulates only basic rules for the operations of HEIs, but detailed questions about the institutions are answered in the HEI's statutes and internal regulations. Representatives of medical university research staff are members of the senate and faculty boards are collective bodies of HEIs

pertaining to the operation of the HEI and faculty, and make decisions regarding its development. The senate establishes the rules for admissions, as well as admissions conditions and procedures. The limits of students admitted to medical studies at individual higher education institutions are set by the minister for health acting in cooperation with minister for higher education, as discussed in the next section.

State budget subsidies are granted for teaching tasks related to providing education to full-time students (free study programs), to research staff and maintenance of the institution, providing health care services related to education of full time students at institutions, providing postgraduate education to physicians, and laboratory diagnosticians leading to specialization, among other things, in addition to the subsidies for clinical activities from the part of the state budget managed by the minister for health. Public HEIs, including medical universities, manage their finances on their own in accordance with the rules stipulated in the regulation by the Council of Ministers in 2006, based upon detailed rules for financial management of public higher education institutions. They manage their finances based on activity-and-finance plans and in accordance with the legislation on public finance and accounting. Activity-and-finance plans adopted by institutions' senates are submitted to the minister supervising them and minister for public finance. The Minister for Health supervises the appropriate spending of public funds. The Minister for Higher Education grants funds allocated to HEIs providing education in medical sciences. The Rectors of public HEIs present reports on the implementation of activity-and-finance plans (revenue, cost and financial result statements) to ministers supervising their schools. Chartered auditors audit annual financial statements published by HEIs. Additionally, Appendix 15 provides the on site visit procedure members of the evaluation panel should use to analyze the self-evaluation report and decide the agenda of the site visit. Annex I provides the guidelines the panel of experts use when performing the site visit regarding the quality of education provided by the institution, including medical universities.

The sample site visit report of Poznań Medical University demonstrates that the evaluation includes the assessment of the institution, its organizational unit regarding mission and strategy, teacher competencies, the fields of study regarding its scientific and didactic tasks, support to students (by academic staff, including tutors and administrative staff) and student questionnaires concerning administrative services.

Country Response

Evaluation of adequacy and efficiency of medical school administration is subject to the control of the State Accreditation Committee, exceeding thereby the scope of competences of the Accreditation Committee for Polish Universities of Medical Science (act of July 27, 2005 on Higher Education -- Journal of Laws No. 164, it. 1365, as amended)

Analyst Remarks to Response

The Minister of Health reports that in 1997, the Conference of Rectors of Universities of Medical Sciences appointed the Accreditation Committee for Polish University of Medical Sciences (ACPUMS) to formally conduct the evaluation and accreditation procedures for medical universities. In 2005, the Law of Higher Education, however, established the Polish State Accreditation Committee (PSAC) to approve education in institutions of higher education that have medical schools or colleges and included medical universities.

According to the response, the PSAC controls the evaluation of the adequacy and efficiency of medical school administration. The PSAC has developed site evaluation guidelines that include the review of the administration of a medical school (see Appendix 15). The ACPUMS site evaluators, when acting as experts for the PSAC, review the institution's organizational structure of the medical program and determine whether the institution complied with the institution's internal regulations (see Appendix 24). In addition, the PSAC report in Appendix 2 describes its expectations for site evaluators to interview and meet with the administrative staff responsible for maintaining documentation concerning studies and human resources and with the authorities of the basic organizational unit responsible for the provision of the assessed field of study (medicine) and to make an assessment in the site visit report.

According to the Minister of Health, the PSAC has the responsibility to evaluate a medical school's administration.

Staff Conclusion: Comprehensive response provided

The medical school faculty, the minister concerned with health matters, and ACPUMS appear to have no input regarding the admission process for medical students.

Country Narrative

Issues concerning students enrollment are presented in Section 5.1 (p. 27) of the Report submitted by the State Accreditation Committee. Limits of enrollment are set by the Minister of Health in consultation with the Minister of Science and Higher Education, course and rules of recruitment are set by HEIs' Senates and assessed by the State Accreditation Committee on the basis of adopted criteria (see: Appendix No. 24).

Analyst Remarks to Narrative

The medical school faculty, the minister concerned with health matters, and the PSAC have input regarding the admission process for medical students within the authority of their functional responsibilities.

The Polish State Accreditation Committee inspects enrollment and admissions rules and places special emphasis on the enrollment in the medical education program (uniform magister study program). The Law establishes the institution's senate (faculty) as the body responsible for setting the rules and conditions for enrollment and the procedures for student selection in the individual field offered by a university, including the medical university. Admission requirements for the medical education program are set individually by the medical university, but are similar in all institutions. Each medical university places the description of its admission criteria on its website and detailed information on the curricula, standards and languages in which study programs are offered, as well as tuition and fees. Accordingly, the medical program is limited only to the best candidates and receipt of state budget subsidies, which is the main source of funding for development and other needs, such as subsidies for financial assistance to students in medical university, is set each year in the budget law and rules for dividing state budget subsidies among the higher education institutions, including the medical universities. However, the guidelines for these rules are published by the Minister of Education in cooperation with other ministers supervising higher education institutions and in particular to medical universities, by the Minister of Health.

Country Response

The process of student recruitment is clearly defined in Poland and is based on the results of the new MATURA (final secondary school examination). A material role in this process is played by the University Recruitment Committee/Departmental Recruitment Committee. Every time, ACPUMS carries out an evaluation of operations of this Committee during visitation.

A separate issue is the recruitment of English-speaking students admitted to studies conducted in English for foreigners. There is no systemic (statutory) regulations concerning this issue. Senates of individual Universities have full autonomy in this respect. For example, the Pomorska Akademia Medyczna in Szczecin Slaski Uniwersytet Medyczny in Katowice and Gdanski Uniwersytet Medyczny have approved a bylaw of admissions for English language studies. On May 7, 2010 in Lodz, during a conference of Rectors of Universities of Medical Science, ACPUMS Chairman Prof. Leszek Paczek, MD, PhD, proposed adoption of joint similar criteria of recruitment for this group of students.

Analyst Remarks to Response

The Act of July 27, 2005 Law on Higher Education covers rules of enrollment.

Each institution of higher education has an Admission Committee appointed by the faculty senate to make recommendations to the dean/rector concerning the admission of students, based on the institution's internal regulations and those of the PSAC. The admission process involves the faculty and bases the admission determination on several factors related to the institution's capacity to fulfill the educational program. For example, the recommendations and decisions regarding admission consider the impact on size of staff, the space in facilities used for educational purposes, and the availability of required equipment, among other things. The PSAC site visit report on Poznan University of Medical Sciences [an institution supervised by the Ministry of Health], demonstrates on page 20 the description of the medical university's admission and selection process.

The response indicates that ACPUMS also conducts an evaluation of the operations of the medical university recruitment committee/department recruitment committee during site visits. However, there are no statutory regulations to recruit English-speaking students admitted to studies conducted in English for foreigners. Therefore such decisions are left to the senates of the individual medical universities.

It appears that discussions are underway to establish universal criteria for this group of students. ACPUMS chair, a representative who will appear before this Committee is involved in this process. Perhaps this Committee may want to make inquiry about the recruitment process for U.S. students.

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Staff Conclusion: Additional Information requested

It is unclear whether complaint procedures relating to the areas covered by the accreditation standards must be published, and whether contact information is provided for processing complaints that cannot be resolved at the school level.

Country Narrative

HEIs may address comments concerning remarks and objections laid down in site-visit reports as well as present relevant documents and clarifications which are taken into consideration in the course of assessment awarding procedure. Moreover, regulations adopted by the State Accreditation Committee provide for filing petition for reconsideration of the matter if given HEI regards assessment adopted by the State Accreditation Committee as unsatisfactory (as stipulated in article 52 /2/ of the Act of Law on Higher Education). Petitions for reconsideration are analyzed pursuant to the procedure described in the Appendix No. 33.

HEIs use abovementioned possibilities to inform about remedial actions aiming at removing deficiencies identified by the State Accreditation Committee. Each procedure, standard and criterion adopted by PKA is posted on Committee's website as well as published in its' publications distributed among HEIs free of charge.

Analyst Remarks to Narrative

According to the narrative, the PSAC addressed the Law of Higher Education provisions that allow each higher education institution to remark upon and object to the site-visit reports to clarify any assessment made during the site visit. This does not address the concern of this committee regarding whether the accreditation process includes provisions for processing student complaints that cannot be resolved the school level. However, subsection 5.4 on page 29 of the PSAC report addresses student complaints provisions through the Law on Higher Education covering rights and obligations of students. Students may present admissions decisions, operations of student organizations, and government through an administrative code procedure, including appeals at the university level. In addition, students may address the Student Ombudsman, appointed by the Student Council, upon a request of the President of the Parliament. The student Ombudsman has the authority to make complaints pertaining to any decision of a higher education institution which affects students and may also represent students before university authorities.

During site visits, members of the panel of experts, mainly the student expert member, investigate the relationships between administration, teaching, staff, students and representatives of student organizations. In addition during the meeting with students their opinions and critical comments are recorded in the site visit reports to which the rector must respond in the replies to the reports.

Department staff reviewed the Law of Higher Education and found several provisions affecting student rights through student organization, but found no provision for the resolution of individual student complaints outside of the institution.

Country Response

The matter of complaints and appeals of students is regulated under the amended Higher Education Law of July 27, 2005, and internal documents of the Accreditation Committee for Polish Universities of Medical Science, which are the Articles and Bylaw of visit of an accreditation team, seconded by ACPUMS for evaluation of realization of accreditation standards, and Study Regulations of each University. This complies with generally accepted law and academic custom observed in Universities in Poland.

Additionally, with respect to Universities of Medical Science, a regulation has been implemented as contained in the aforementioned Bylaw of visits of an accreditation team, adopted by all Rectors of Universities of Medical Science,

and made public, pursuant to which:

"(...) Comments and complaints concerning execution of accreditation standards, reported to ACPUMS by University Employees and Students are processed by the Mediation Committee comprised of members of the ACPUMS." -- Bylaw of visit of accreditation team, seconded by the Accreditation Committee for Polish Universities of Medical Science for evaluation of realization of accreditation of accreditation standards for the medical major, clause 11 (attachment no. 2).

"(...) All Employees and Students of the University/Department may report their comments and complaints concerning realization of the present Standards to the members of the Accreditation Committee for Polish Universities of Medical Science (the current list is available on the site..." Accreditation Standards - Final provisions, clause 1

This allows for resolution of disputable matters in the sphere outside the university, providing an additional path of mediation and problem-solving.

It should also be mentioned that the Parliament of Students of the Republic of Poland has within its structure a Student Ombudsman. The institution of Student Ombudsman was appointed in 2004 for the defense of student rights (including to quality of education) and monitoring nation-wide observance thereof. This function has been performed since the date the institution was created by a graduate of the Warsaw University - Robert Powlowski. The competences of the Student's Ombudsman are set forth by the Articles of the Parliament of Students of the Republic of Poland, and include: launching of information campaigns, organization of training, conferences and debates. The Ombudsman is entitled to file a complaint against any decision of the University, however affecting the students. The Ombudsman is also entitled to represent an interested party, on such party's consent and in his/her name, before University authorities.

Obligations of the Ombudsman include presentation to the Student Council of the Self-government of Students of the Republic of Poland of reports on his activity. Each year, the office of the Ombudsman processes several thousand complaints against decisions of the universities and other institutions connected with the academic environment. Assistance and intervention may be sought from the Ombudsman by as student of a public or private university, regardless of the mode and type of studies. The simplest way is to write to rsp@psrp.org.pl. It is possible to write in any matter affecting students, connected with non-payment of grants, quality of teaching in the country, collection of lawless fees, shutting down a major or related compulsory change, sexual molesting mobbing or discrimination. Students can also always complain to the Ministry of Science and Higher Education, writing to the email address:

Barbara.Wierzbiicka@nauka.gov.pl and Monika.KWiecien-Miland@nauka.gov.pl. Informed students of possibility of filing of a complaint and obtaining assistance from the students' Ombudsman is served by advertising posters placed at all universities and information on the Students' Parliament website.

The Accreditation Committee for Polish Universities of Medical Science includes also a student delegated by the Parliament of Students of the Republic of

Poland.

The institutions presented above constitute two ways, in the which ACPUMS and the Parliament of Students of the Republic of Poland resolve problems and process complaints at extra-university level.

Analyst Remarks to Response

The ACPUMS bylaws, adopted by the Rectors of Universities of Medical Sciences, have implemented and made public its provisions regarding complaints in medical universities, as the external entity, involving the accreditation standards. Paragraph 11 of the ACPUMS bylaws provides for comments and the establishment of a mediation committee comprised of ACPUMS members to hear the complaints of university employees and students. According to this response, ACPUMS also addresses complaint matters involving standards at institutions of higher education offering medical programs. In addition, students may submit complaints to the Ministry of Higher Education.

Staff Conclusion: Comprehensive response provided

It is unclear who has responsibility for examining and ensuring that the physical facilities continue to be adequate throughout the accreditation period.

Country Narrative

Responsibility for ongoing auditing of facilities lies with authorities of the HEIs. Detailed information are presented in Part 2 Section 2, Subsection 3.1, points 1 – 2 and Subsection 3.2 as well as Subsection 6.2 and 6.5. Moreover, rectors are obliged to present annual reports on HEI's activity, together with information on the staff resources available for fields of study in which degree programs are offered, as well as to submit detailed information on the adoption of or amendment to the statutes, establishment or abolition of a degree program in a field of study, establishment of an organizational unit in another location, senate's consent for the purchase, sale or mortgage of the university's property, membership in an economic organizations, and the introduction of changes in study regulations. Rectors are also obliged to inform minister responsible for health about results of inspections staged at public health care centers twice a year (as stipulated in art. 67 of the act on health care institutions).

Minister responsible for higher education may request information and clarification from HEIs' authorities, conduct inspections of the HEIs (including didactic matters), as well as assign specific task in the area of education or training of the research staff (upon consulting the Senate of HEI and provision of adequate funding for such purpose). Minister responsible for health matters may also conduct inspection (or assign HEI to perform one-off inspection) of the public health care institutions established by medical HEIs to the extent specified

in the Act of 30 August 1991 on the health care institutions. Results of such inspections are submitted to the HEI that founded the public health care institution.

The State Accreditation Committee conducts reassessment after period of 12 months if deficiencies were observed in the course of the site-visit. There were no reasons to apply such procedure to HEIs offering degree programs in medicine, yet.

Analyst Remarks to Narrative

The narrative report indicates that the higher education institutions have the responsibility to annually audit their facilities. The Rectors of the institutions must report the information in the audit along with information on the staff resources, the degree programs offered in the fields of study etc. to the Minister of Higher Education. Rectors must also inform the Minister of Health about the results of their twice a year inspections conducted at public health care centers. The PSAC reports that it conducts reassessment after any 12 month period if deficiencies were observed during the site visit, but has yet to apply this review to higher education institutions offering degree programs in medicine at this time. It appears that if an institution receives a conditional assessment of less than 8 years, the PSAC will reassess an institution to determine if the institution had taken remedial actions to remove the violation identified during the first assessment through an additional site visit or review of additional supporting documentation. An additional vote on the assessment is taken by the PSAC.

Regarding clinical sites, the Minister of Health also appoints a panel board for accreditation of the clinical sites that operates a similar process to institutional accreditation as show in Appendix 15. In addition to the annual inspection of clinical sites, the accreditation grant is for 3 years (Appendix 13).

Country Response

The Accreditation Committee for Polish Universities of Medical Science examines very carefully the didactic base of the Universities of Medical Science, with particular account and emphasis on visitation and evaluation of this base -- both the Basic Facilities and Clinics and Dispensaries. For example, during the last accreditation visit at the Pomorska Akademia Medyczna in Szczecin, the Committee visited 32 Clinics on site (attachment no. 3). At the same time, it should be added that the case of material changes occurred at a University, the dean is obliged, by virtue of valid Accreditation Standards, to promptly notify the Committee of the same:

"(...) The university must report to ACPUMS all changes in the sphere covered by the present standards, which occur at ta Department in the period of granted accreditation, including plans to increase the limit of admissions or opening of new majors." -- Accreditation Standards -- Standards concerning University and Department, clause 17.

This provision concerns not so much minor changes at the University, but rather material changes principally affected the course of studies or changing the same.

During the last 5 years, the base of Clinical Hospitals of universities of Medical Science has not changed; none of the Clinical Hospitals were closed and a new one has not been opened. Hence, the lack of specification of changes concerning the activities of Clinical Hospitals, which simply follows from the stability of the clinical didactic base. What is subject to change is clear improvement of study conditions over the last 10 years and significant expansion of the didactic base, of practically all Universities of Medical Science in Poland. The conclusion is therefore that if we observe a change, it is only for the better. An example could be the new Didactic Center of the Warsaw Medical University, which was created in 2005, as well as similar in Bialystok and Lublin, and constructed in Gdansk, Poznan, Wroclaw and other cities, where Universities of Medical Science exist. It should also be emphasized that new clinical hospitals are being built in Gdansk, Lodz, Crocow and construction of Pediatric Hospital has commenced in Warsaw. A complete list of investment projects conducted in Medical Universities in Poland is available from the Ministry of Health.

In 2010 a system of half-term visitations was implemented, mandatory for all Universities of Medical Science, during which all issues/problems identified in the course of the previous accreditation visit are reviewed, and a random inspection is carried out of selected clinical hospital (attachment no. 4).

Analyst Remarks to Response

The response indicates that the ACPUMS site evaluation teams examine the didactic base of medical science universities as well as the basic facilities, all of their clinical facilities for ACPUMS accreditation consideration. However, if the review is conducted at an institution of higher education that has a medical program, both the Minister of Health and the Minister of Science and Higher Education considers the adequacy of the physical facilities when making an accreditation/approval status determination. If deficiencies exist, the Ministers will require additional monitoring until the institution complies.

ACPUMS reports that it monitors material changes, based on the obligation of the dean to report changes covered by the ACPUMS accreditation standards if any changes occur during the period of accreditation. However, in 2010, ACPUMS initiated a system to visit university of medical sciences with issues or problems identified in a previous accreditation visit and demonstrated implementation with a copy of an interim report of a site visit conducted on December 6, 2010. The site visit included visits to 13 didactic facilities, addressed whether the medical university fully implemented the recommendations from the 2008 ACPUMS report, identified the recommendation the institution continues to address, and the university's plan to address the remaining recommendations. It appears that both the ACPUMS, as an independent accrediting body and the PSAC, the state accrediting authority, examine and monitor the physical facilities throughout the accreditation period.

Staff Conclusion: Comprehensive response provided

It appears that ACPUMS makes no judgment regarding the adequacy and effectiveness of medical school faculty. With regard to faculty conflicts of interest, ACPUMS does not require medical schools to address these matters.

Country Narrative

Assessments of the State Accreditation Committee relate to the whole didactic process with consideration of all factors influencing its' course and quality, starting with the concept of education and identification of its' relation to HEI's mission, rules for students enrollment, study programs and curricula, practical placements, learning outcomes (term / midterm and final), academic staff providing courses, its' scientific and international activity as well as facilities in which courses are provided, ending with students matters. Composition of panels of experts (academic teachers, experts for formal and legal issues and students) allows for conducting external assessment with consideration of different points of view but based on procedures, criteria and standards set by the State Accreditation Committee.

In accord with the law in force the State Accreditation Committee performs program – based accreditation. Amendments to the relevant provisions of the Act on Law on Higher Education allowing to introduce combined program and institutional accreditation are expected in 2011.

Analyst Remarks to Narrative

Analyst Review Status:

Analyst Remarks to Narrative:

The narrative indicates the assessment by the PSAC relate to the entire didactic process in which panels of experts use the procedures, criteria and standards established by the PSAC to assess the institution.

However, the PSAC accreditation standards include the following selected attributes regarding faculty:

- Staff resources: core staff resources (scientist responsible for the education) - number and qualifications and the staff/students ratio
- Teaching resources: teaching facilities, labs, equipment; library and electronic resources
- Internal quality assurance system: staff evaluation system, students' course evaluation system
- Curriculum: analysis of lecturers qualification/course program compliance, quality of class teaching (random class observations), and workload per semester (per day, per course)

Note: The above attributes were selected by staff from excerpts from tasks of

the PSAC presented to the Minister of Higher Education relating the new objective of the PSAC under the 2005 Law on Higher Education concerning the assessment of the quality of education in a given field of study including teacher training.

The Poznań University of Medical Sciences report of the panel of experts of the State Accreditation Committee (see appendix no. 16) includes an assessment of the number of staff (academic teachers, scientific and technical staff, and in-house medical practitioners), a section of information on the academic staff, a chart listing the academic teachers by name, degree, field of study of and student/teacher ratios, experience, and specializations); and a section assessing whether the staff resources met the minimum staff resource requirements in the field of medicine. However, there is no indication that the PSAC assessment of medical education programs includes a conflict of interest policy regarding teachers, lecturers, or other teaching staff.

Although the PSAC narrative suggests changes to the Law on Higher Education will occur in 2011 that will combine program and institutional accreditation, no other information was offered to indicate that a conflict of interest policy among the teaching staff would be included. This is an area for which the NCFMEA may wish to seek additional information from the country.

Country Response

The scope of activities covered by this item lies within the authority of the State Accreditation Committee and they are contained in the broader notion of review of teaching staff quality in all universities in Poland.

As for the issue of conflict of interest, this is regulated by appropriate provisions in the Higher Education Law, indicating a requirement for an academic teacher to specify his primary employment, as well as permitting work at a maximum of two universities.

ACPUMS Standards also regulate this matter:

"(...) The University/Department must possess a faculty warranting appropriate level of knowledge and services (in the scope of education at least one independent scientific worker responsible for teaching of each of the major subjects), featuring no conflict of interest. It is necessary to maintain the valid ratio of academic teachers, constituting a faculty minimum for a major, to the number of students." -- Accreditation Standards -- Standards concerning University and Department, clause 3.

"(...) The University/Department must define and publish principles of prevention of employee conflicts of interest and procedure in the scope of the teacher-student relation, as well as procedures in case of a breach of these standards -- Accreditation Standards -- Standards concerning University and Department, clause 13.

The amended Act of July 27, 2005 -- Higher Education Law (Journal of Laws No. 164, it. 136, as amended) introduced:

- 1) mandatory evaluation of teaching quality effected by the SAC (ART.8 sec.4)
- 2) Operation of an internal teaching quality assurance system in the scope of analysis of teaching results (Art.9 sec.3 item 4 c).
- 3) mandatory periodic evaluation of all academic teachers: "All academic teachers are subject to periodic evaluations (...)" -- Art. 132. sec 1.

Analyst Remarks to Response

The response indicates that the 2005 Law of Higher Education requires the mandatory evaluation of teaching quality, internal teaching quality assurance systems, and mandatory periodic evaluation of all academic teachers governs the adequacy and effectiveness of medical faculty. The conflict of interest provision, by statute, requires an academic teacher to specify his/her primary employment, and limits their work at a maximum of two universities to avoid a conflict of interest.

ACPUMS, as an independent accrediting body, applies standard 13 to regulate conflicts of interest. The standard states "the University/Department must define and publish principles of prevention of employee conflicts of interests and procedure in the scope of the teacher-student relation, a well as procedures in case of a breach of these standards." In addition, standard 3 requires the medical university/department to have faculty with the appropriate level of knowledge and services with no conflicts of interest. Poland has two accreditation entities that describe the requirements for faculty and conflict of interest.

Staff Conclusion: Comprehensive response provided

It appears that ACPUMS does not specifically visit previously un-examined core clinical clerkship sites within 12 months of the accreditation review. As well, ACPUMS does not specifically re-visit (within the current period of accreditation) those sites that were visited under a previous accreditation cycle.

Country Narrative

Clarification is presented in point 5.

Analyst Remarks to Narrative

As stated above, the PSAC report indicates that regulations of the Minister of Higher Education and the resolutions of the Presidium of the PSAC require the assessment of teaching and research facilities of higher education institutions providing education in medicine. In addition, pursuant to the act on health care, the rector of those medical universities and institutions with teaching hospitals that perform didactic and research tasks together with providing health care must provide a report to the Minister of Health annually. The report must comply with the premises and equipment requirements in the regulation of the Minister of Health of November 10, 2006 (see appendix no.11).

Although the Minister of Health conducts inspections of the health care facilities that provide a resource for clinical clerkships, it is not apparent from the material provided by the PSAC, whether each clinical clerkship facility is reviewed and evaluated by the Ministry of Health during the accreditation evaluation process or whether the rector's annual report to the Accreditation Center includes an assessment of each clinical facility offering service to the medical education clinical program. This committee may want additional information from the country regarding whether each clinical site used by the medical university is visited at least once during the accreditation period, and whether any new clinic site is visited within 12 months of contracting with the medical education program.

Country Response

Since 2010 the Committee has been very particular about inspecting clinical clerkship sites. As has already been mentioned, the appropriate provision of the ACPUMS Accreditation Standards reads:

"(...) The university must report to ACPUMS all changes in the sphere covered by the present standards, which occur at a Department in the period of granted accreditation, including plans to increase the limit of admissions or opening of new majors." Accreditation Standards -- Standards concerning University and Department, clause 17.

"(...) Halfway through the term for which accreditation was granted, ACPUMS is obliged to verify how University Authorities implement in daily activities the recommendations contained in the final reports" -- Articles of ACPUMS -- Chapter V Accreditation, item 8.

Let me reiterate that during an accreditation visit the Committee visits a minimum of 30 Clinics.

Analyst Remarks to Response

In the response item 5, ACPUMS refers to standard 17 and Chapter V, item 8 regarding changes the dean must report and the initiation of mid term reviews to determine whether the medical university implemented the recommendations from the last accreditation review. However, these standards address interim reports conducted to review the implementation of recommendations or changes

reported to ACPUMS. The standards and documentation provided does not indicate whether ACPUMS visits previously un-examined core clinical clerkship sites within 12 months of the accreditation review or whether ACPUMS revisits within current accreditation period those sites that were visited under a previous accreditation cycle.

It is unclear whether the 2010 visit that included visits to nearly 30 clinics occurred within 12 months of the last accreditation grant and included clinical sites not previously examined or whether ACPUMS conducted the site visit at the midterm of an accreditation period to determine whether the medical university had implemented recommendations. The NCFMEA may want the country representatives to provide additional information regarding the frequency in which ACPUMS or the PSAC makes clinical site visits during the accreditation term and whether it makes visits to previously un-examined clinics within 12 months of the accreditation review.

Staff Conclusion: Additional Information requested

As previously noted, ACPUMS does not specifically consider student complaints.

Country Narrative

It should be emphasized that students play important role in the activities of the State Accreditation Committee. They analyze student matters (i.e. if students privileges are respected; if HEI authorities fulfill duties in a proper manner). Students – experts also take part in meetings with students organized during site-visits and through personal contacts (in conditions ensuring freedom of speech) collect opinions concerning specific aspects of HEI’s activity, didactic and administrative staff, as well as general studying conditions.

Panels of experts check if procedures enabling students to lodge complaints and comments concerning organization of work in units where clinical courses are provided, teaching matters as well as work of clinical staff (with special regards to issues referring to mobbing, discrimination and molesting) were implemented (see also Subsection 5.4).

Analyst Remarks to Narrative

It remains unclear that the evaluation process includes consideration of assessment of individual student complaints. However, the PSAC narrative indicates that its evaluation activities include the analysis of student matters. For example, the site evaluation report provided evidence that the evaluators found that students complained that they lacked receiving practical training within the scope of the course, among other things. The report summary identifies the evaluation team’s activities and states its conclusions and opinions regarding the medical university's conditions for providing education and education quality. One of the recommendations included the students’ complaint regarding the

scope of the practical training course.

Country Response

Item 4 describes the complaint system valid in Poland. I point out that the valid Higher Education Law does not provide for the accreditation environmental community to resolve disputes and issue decisions. The undertaken actions and interventions must be based on and limited by the canons of valid laws. Therefore, student complaints are processed by institutions legally empowered in this respect. As follows from the already described complaint filing system, let me reiterate the fact that in spite of lack of statutory right to resolve disputes, every member of the Accreditation Committee for Poland Universities of Medical Science is an agent of confidence for students and in cases of occurrence of specific problems assists in mediation, clarification and resolution of problematic situations or events at hand. Following a decision in ACPUMS, a way of resolution of a conflict may be proposed, and in view of the fact that ACPUMS is an institution independent of the individual Universities of Medical Science -- it is an extra-university way - not school level.

The Committee considers complaints and proposed resolutions, but does not issue decisions.

The top rank document, which is universally available and binding on all Universities of Medical Science, is the Accreditation Standards. The already mentioned and cited twice clause 17 of the standard contains the statement that:

"(...) The university must report to ACPUMS all changes in the sphere covered by the present standards, which occur at a Department in the period of granted accreditation, including plans to increase the limit of admissions or opening of new majors." -- Accreditation Standards -- Standards concerning University and Department, clause 17

Analyst Remarks to Response

In this response, ACPUMS defers to the Higher Education Law and the internal regulations of the institution or medical university regarding student complaints. In addition, ACPUMS does not have authority to issue decisions regarding student complaints. However, as an outside agency of confidence, it provides a mediation committee for this purpose.

Staff Conclusion: Comprehensive response provided

It remains unclear why ACPUMS' written policies cannot clearly indicate ACPUMS' requirements regarding substantive change notifications.

Country Narrative

Rectors of HEIs are obliged to inform the Minister responsible for higher education (within the time limit of three months) about every change which ceases HEI's ability to fulfill requirements stipulated in the Act Law on Higher Education and / or implementing regulations. The Minister suspends authorization of the given organizational unit to provide degree programs in a given field of study if that unit fails to remove any delinquencies within the time limit of 12 months. Such procedure has not been applied yet to any HEI providing education in the medicine.

Analyst Remarks to Narrative

Appendix 6 cites the PSAC regulation that lists the approved and elective courses an institution of higher education can offer. Procedurally, the PSAC report indicates that the higher education institution (including medical universities) requires the faculty board and senates to pass resolutions on the establishment of a new field of study within these institutions. The law requires that the resolutions include teaching standards and levels of study that outline degree program requirements, including duration of the degree program, total number of classes, educational profiles of graduates, framework curriculum contents, duration and organization of student placements. Additional requirements include active forms of training in its total time or number of hours for professional training, including practical clinical training. Any changes must fall within the total number of hours required in a medical education program to obtain a degree.

The Law of Higher Education requires the Rectors of each higher education institution that offers a medical education program to inform the Minister of Higher Education within three months about every change that affects the establishment of a new program of study. The PSAC report indicates that if the changes fall within the remaining 690 hours available to the faculty board, it would not be considered a major change. However, any changes introduced between particular accreditation processes must be assessed by the PSAC during subsequent assessments. Usually the changes are reported by the Rector in the annual reports and include information such as staff changes, changes of the statute, the establishment or deletion of a field of study, the establishment of an organization unit in another location, senate's consent for the purchase, sale or mortgaging the university's property, and the introduction of changes in the study regulations.

Country Response

The Accreditation Standards precisely state the obligation to report all changes in a University, which has already been mentioned several times.

Analyst Remarks to Response

The ACPUMS standard states "the university must report to ACPUMS all changes in the sphere covered by the present standards, which occur at a Department in the period of granted accreditation, including plans to increase the limit of admissions or opening of new majors." This standard requires the medical university to report these substantive changes to ACPUMS. Although the standards require the medical university to notify ACPUMS of the two specific changes, no implementing policies accompanied the standards. Unlike US accreditation, for example, there are no statements as to when the ACPUMS expects the medical university to notify ACPUMS of the change, whether ACPUMS has established a time frame for medical universities to submit notification of plans to initiate a change, whether ACPUMS requires the medical university to submit the notification before or after the change occurs, or what information it requires to review the notification or what circumstances must exist to grant or deny the change. The NCFMEA may want to ask the representatives about procedures it follows to clarify how it applies the substantive notification standard.

Staff Conclusion: Additional Information requested
