

POLAND

CHAIRPERSON DOCKERY: Mr. Porcelli.

MR. PORCELLI: Good morning. I'm pleased to provide you with a brief summary of the application submitted by Poland pertaining to the activities of its Accreditation Committee for Polish Universities of Medical Sciences, or ACPUMS, and its evaluation of medical schools. The materials can be found under Tab F. During your fall 1997 and fall 2003 meetings, you determined that the accreditation standards used by ACPUMS to evaluate medical schools in Poland were comparable to those used in the United States. The decisions of ACPUMS are submitted to the Polish Ministry of Health and Social Welfare. Currently, there are five schools of medicine in Poland participating in the Federal education loan program.

Based on the information provided, it appears that Poland has an evaluation system that remains substantially comparable to that used to accredit medical schools in the United States. While Poland has provided significant information regarding the country's quality assurance system for medical education, you may wish to seek more information on the following matters:

Under the responsible entity, the staff report noted that since the interactions between the Ministry of Science and Higher Education and the Ministry of Health and Social Welfare likely entail overlapping responsibilities, you may wish to inquire further as to how the two distinct ministries cooperate in practice. Under the administration sections, evidence that the ACPUMS process consistently evaluates the adequacy and efficacy of each medical school's administration should be requested.

In addition, the medical school faculty, the minister concerned with health matters, and ACPUMS appear to have no input regarding the admission process for medical students. And under the medical students section, 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. Under the program resources sections, it is unclear who has responsibility for examining and ensuring that the physical facilities continue to be adequate throughout the accreditation period. In addition, 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. And under the accreditation procedures section, it appears that ACPUMS does not specifically visit previously unexamined core clinical clerkship sites within 12 months of the accreditation review. As well, ACPUMS does not specifically revisit within the current period of accreditation those sites that were visited under a previous cycle. In addition, ACPUMS does not consider student complaints during the accreditation process. And furthermore, it remains unclear why ACPUMS' written policies cannot clearly indicate their requirements regarding substantive change notifications.

Representatives of Poland are here today to answer questions, and that concludes my remarks. Thank you.

CHAIRPERSON DOCKERY: Thank you, Mr. Porcelli. Are there any preliminary remarks that any of the representatives from Poland would like to make before we go into Executive Session?

DR. DANIELEWICZ: Yes, please, Mr. Chairman. Ladies and gentlemen, is a great honor for us—

CHAIRPERSON DOCKERY: Please state your name, please.

DR. DANIELEWICZ: My name is Roman Danielewicz. I am the Director of the Department of Science and Higher Education in the Ministry of Health. It's a great honor for us to represent our country in front of this esteemed Committee. Myself, I'm a Assistant Professor of Surgery in Warsaw Medical School, and since 2002, I was appointed as the director of the department I mentioned before. The department is on behalf of Ministry of Health supervising all Polish medical universities.

Let me briefly reintroduce the rest of the members of our delegation: the chair of the delegation is Deputy Minister, Dr. Adam Fronczak, who is with us today; Dr. Leszek Paczek, sitting on my righthand, is the chairman of Accreditation Committee of Polish Universities of Medical Sciences. He is Professor of Internal Medicine, the former rector of the Warsaw Medical University. He was one of the first members of ACPUMS at the time when the accreditation standards for this commission or this committee were established according to the standards of Liaison Committee of Medical Education. All three of us are medical doctors with academic background and experience in medical education. The delegation is also strongly supported by the representatives of His Excellency, Ambassador of Poland, and these are Marek Konarzewski, Minister Counselor for Science and Technology Affairs, also with us today. And Mrs. Grazyna Zebrowska, responsible in Embassy for Scientific and Technological Affairs. Let me express our gratitude to the Department of Education representatives who have performed detailed analysis of the report and documentation provided by the President of ACPUMS to the Committee, namely to Mrs. Carol Griffiths and Mr. Steve Porcelli, and if you allow me, Mr. Chairman, I will carry on with further remarks during the Executive Session. Thank you.

CHAIRPERSON DOCKERY: I would ask that we probably take those in Executive Session and thank you for your introductory remarks. Are there questions from the Committee before we go into Executive Session? Then thank you, and could we ask our guests to--you probably will not need to return because we will adjourn for lunch as soon as we finish with Poland, and just so that you know, we will take up the Slovak Republic immediately after lunch. If the Slovak Republic representatives agree, then we will start your session at one o'clock. Is that suitable for you? And then that will follow then with the United Kingdom after the Slovak Republic. Is that-

DR. SHULTZ: Ireland.

CHAIRPERSON DOCKERY: I'm sorry. Ireland. I promised Ireland after lunch. So let me reverse that, and I apologize. We'll take Ireland immediately after lunch. I see that the other Irish representative has arrived. Thank you.

[Executive Session begins:]

CHAIRPERSON DOCKERY: Okay. We can go ahead and proceed with your remarks, sir.

DR. DANIELEWICZ: Thank you very much, Mr. Chairman. Ladies and gentlemen, due to the repeated comments concerning supervision of Polish medical universities by two ministers and existence of two accreditation bodies or commissions, let me provide you with this explanation. In Poland, in case of most areas of public life, public activities, where the law/regulations are necessary, responsibility for those regulations are resting with certain ministries or ministers. In case of higher education, higher university education, this legislative responsibility rests with Minister of Science and Higher Education to whom I will refer later as Minister of Science. Because of that, most of so-called general regulations concerning higher education are being prepared and coordinated by Ministry of Science.

In the same time, the parliamentary law of higher education in Article 33 is ensuring the share of responsibilities between other ministers. It was decided in the law that all activities of public universities would be supervised, coordinated, and financed by certain ministries. For example, military universities by Minister of Defense, general universities by Minister of Science, and medical universities by the Minister of Health.

The background for such division of responsibilities beside the tradition of ministries and government construction is responsibility of our Ministry for Health Care System. It is the sole responsibility of Minister of Health to provide safe and efficient health care in our country. This could not be provided without properly prepared health professionals. Therefore, Minister of Health is in best position to create policy for medical university, policy which— policy in the area of health care, which among others is being carried out by the quality-oriented educational policy for medical universities. It is also worth to mention that since 2001, teaching hospitals, clinical hospitals, which are part of the health care system, of course, are included into medical universities. Minister of Health is financing medical universities, setting the limits of students' admission, controlling current performance of universities including universities and teaching hospitals' finances, and examples of such a documentation I have with me here. Therefore, it was decided by the law that Minister of Health is responsible for licensure and recognition of medical universities. But besides this, there is a cooperation necessary between the ministries. As an example of cooperation of ministries, it could be indicated the regulation concerning educational standards, including medical, dental and others, which was noted in the Department of Education staff analysis. To describe the share of responsibility is necessary to say that educational standards in case of medical education are prepared by the university representatives in very close cooperation with Ministry of Health. Therefore, such a project is incorporated, is being submitted to Ministry of Science, and it's incorporated in the regulation of Ministry of Science, but it's also necessary to underline that such regulations are finally cosigned by all ministers supervising other universities. The same circumstances are explaining that there are two accreditation bodies cooperating with two ministers, taking into account questions brought up in the Department of Education staff analysis. I would like to ensure the Committee that there are no conflicts between both ministries as well as between accreditation bodies, especially if we take into account that one of them is nongovernmental organization.

So summarizing, Minister of Health is directly supervising, cooperating and financing medical universities, while obeying the law of higher education and regulations concerning higher education.

Due to this supervision, it is possible to ensure high standards of medical education and medical professions, and one of the main ministries of health instrument for this is Accreditation Committee, such as ACPUMS, which accreditation activities are strictly dedicated to medical education. The further detailed questions will be—of the Committee or the Department staff will be explained by Professor Leszek Paczek. Thank you very much.

CHAIRPERSON DOCKERY: Thank you very much. And would your colleague like to make any comments?

DR. PACZEK: Good morning. I would like to shortly—

CHAIRPERSON DOCKERY: Would you state your name, please, for the recorder?

DR. PACZEK: Leszek Paczek. I am the Chairman of Polish Accreditation Committee for Medical Universities and concurrently I am the head of the Clinic of Transplantology, Immunology and Internal Diseases at Warsaw Medical University. If you allow me, I would like to briefly provide information concerning accreditation in Poland. It started in 1997, and at that time, the Secretary of Liaison Committee on Medical Education was Professor Donald Kassebaum, and because we did not have experience, we looked around who had the best experience, and it occurred that there's one country with experience with accreditation. So you asked Professor Kassebaum for help, and Professor Kassebaum invited one of the members of our committee to visit and participate in some accreditation visit in the United States, and at the same time, Professor Kassebaum provided us with standards produced by Liaison Committee on Medical Education and self-assessment questionnaire, and we're allowed to use these materials to prepare our own. What's more, in 2000, Professor Kassebaum visited and spent a couple days in Poland and helped us to establish the whole system. So our system is—

CHAIRPERSON DOCKERY: Excuse me. For information, for members of the Committee, Dr. Kassebaum was the then Secretary of the Liaison Committee for Medical Education on behalf of the AAMC. Excuse me for interrupting, sir.

DR. PACZEK: Oh, thank you. And so this was the beginning of our accreditation. I'm talking we because I was the member of this Accreditation Committee when we just started this activity. And then briefly, 2001, it was mentioned, it was clearly recognized that to teach and be professional there are three key words. This is knowledge, skills and behavior. So to improve skills capability of our universities, after long discussion, teaching hospitals were included to medical universities. It was a big cooperation, and it's relatively difficult for universities anyway. Now, for example, Warsaw Medical University has 3,000 beds. So this is really something, and we can show as much as possible to our M.D. candidates.

In 2004, we became a member of European Community, but we didn't need to change anything because all rules were prepared in advance, and this accreditation we prepared in 1997 was just

satisfactory for just entering without any even minor regulations in our rule. In 2005, it was a new law of higher education issued by Parliament, and this regulated all fields, some of them were mentioned by President Danielewicz. I would like to turn attention for two points: First, rectors became the partner for the government. It was not in the past. And secondly, students became the partner for rector. And this is obligation and this is the obligatory rule that 20 percent of an academic body is reserved for students. So if there are 40 members, eight of them, they are students. They have full rights to discuss, raise any issue, and to just vote for any problem to be solved. Also, in 2005, after long discussion, State Medical Exam for M.D. professionals was introduced. It is also a little similar to USMLE examination. Of course, I don't like to say that this is as difficult as USMLE, but the construction and location is very similar. After the studies are finished, we have State Medical Exam, and the data from this exam are included to our report which I sent to esteemed Committee.

Starting from this year, that means 2010, because the third cycle of accreditation will start next year, this will be one of the most important issues which will be tasked during accreditation. It was not possible to include results of this exam in the past because in 2005, already half of the schools were given accreditation. So we did not like to change the rules for half of other schools. We decided that the next cycle will be with this exam. Anyway, we analyzed all the data, and I included the data, as you can easily see, because at the end of my report they are included. At the moment, that means 2009, we are discussing how to improve skills of our students without having knowledge, which is provided during the first years, and this is a project prepared in cooperation with Minister of Health where the last year of medical education will be devoted for clinical practice in hospitals, but this is the plan.

I don't like to say when it will be incorporated in line because I don't know simply, but we hope that in two years, this will be there, and the plan which will be put into operation. So this is, let's say, the history, which is showing that we tried to follow the system, which is here in the United States, and with the help of Professor Kassebaum, and not only from him, we just made the effort to have this, let's say, relatively effective. Thank you.

CHAIRPERSON DOCKERY: Thank you very much for your remarks. Are there questions from members of the Committee? Dr. Caron?

DR. CARON: This is Dr. Raymond Caron. Good morning, gentlemen. So this is a redetermination for comparability, and some questions have been raised by staff analysis that I wanted to touch on. Initially, you had talked about the relationship with the ACPUMS and the Minister of Health. Who actually has the power to override the other? Let's say that the ACPUMS goes out and does a site visit. Am I correct, they are the people that do the site visit?

DR. DANIELEWICZ: Yes.

DR. CARON: Okay. The Ministry of Health does not do site visits, accreditation site visits, inspections of the actual schools themselves; am I right in saying that?

DR. DANIELEWICZ: Yes. Yes, sir, you are right.

DR. CARON: Okay.

DR. DANIELEWICZ: Beside the other controlling instruments, which Minister of Health is having over the institutions which are working within the health system. From the perspective of education, Ministry of Health is not performing the regular visits to the teaching hospitals, but this is being done by the accreditation bodies.

DR. CARON: Okay. So A-C-P--ACPUMS, I'll call it, their site visits, they're doing the actual accreditation on site. Are they being guided by the Ministry of Health as to what to do or do they make their own rules?

DR. DANIELEWICZ: This is being done according to the standards accepted and prepared by the Commission.

DR. CARON: By the Commission?

DR. DANIELEWICZ: Which by the ACPUMS, which—

DR. CARON: So they make their own rules.

DR. DANIELEWICZ: Yes, that's—

DR. CARON: The ACPUMS makes their own rules. They go out and do their site visits. Now, once they've done their site visit, then that is reported to the Ministry of Health.

DR. DANIELEWICZ: Yes.

DR. CARON: And then the Ministry of Health can accept it or not?

DR. DANIELEWICZ: Yes, that's correct.

DR. CARON: Who can overrule the other?

DR. DANIELEWICZ: Yeah.

DR. CARON: In other words, who has the power to say yes or no to an accreditation of a school?

DR. DANIELEWICZ: Accreditation which is being provided by the Committee can be overruled by the Committee of Rectors who establish this Commission. This is the body which is establishing—

DR. CARON: And that's under the umbrella of the Ministry of Health?

DR. DANIELEWICZ: This is in cooperation with Ministry of Health.

DR. CARON: So the rectors have control over ACPUMS, and do the rectors themselves answer to the Ministry of Health?

DR. DANIELEWICZ: No, we are being informed about the accreditation processes by the President of ACPUMS. If the accreditation process is passed, we know that there is this or this result of this accreditation process.

DR. CARON: Okay. So the Ministry of Health has the final say-so. Who do they have the final say-so to? Do they--I guess it goes to the rectors then; right? Because the rectors seem to have control over the ACPUMS; no?

DR. PACZEK: We are quite independent bodies. That means after we are elected to become members of the Accreditation Committee for Polish Medical Universities, we are independent, and we can act whatever you would like to. Of course, not like that because we have regulations. We have everything standards, and so on and so on and so on. And when accreditation is finished at a certain university, we send our report with all remarks and decision, which we propose to be done, to the Conference of Rectors because according to our law, this is the body which was established, as I told you, in 2005, and rectors, they have real power nowadays. So they cooperate with the government that they have real power. And, as well, we send the copy of this to the Minister of Health. I said copy because we would like know about all our findings the Minister of Health as an office from the government. So this is like that, that we write all remarks. We inform about these rectors, and we propose accreditation should be given or not. And—

DR. CARON: Who appoints the rectors?

DR. PACZEK: What does that mean "appoints the rectors"?

DR. CARON: Who appoints them? Who says who is a rector? Does the Ministry of Health actually—

DR. PACZEK: No, no.

DR. CARON: --pick the rectors?

DR. PACZEK: University. It was 20 years ago, but now we have democracy and the rectors are elected among, not only, but around faculty members in a voting so they represent the whole faculty and the whole academic society for the period of four years, and they are elected by members of university. Minister has nothing to choose rector, dean, or anybody in the university. This is autonomic body.

DR. CARON: So this autonomic body is then elected by faculty members of the universities that could—

DR. PACZEK: Not only. 20 percentage, they are students, and they are 20 percentage for other workers. So professors, this is 50 percentage of the electors because electors elect.

We first elect electors, and then electors elect the director, but they represent all society, all academic society. DR. CARON: Okay. So, in retrospect, then the rectors themselves really have the power? The power lies in the rectors as to what schools get accredited or the acceptance of ACPUMS—

DR. PACZEK: It's not so simple because I used to be a rector for three years. We have power, yes. We can do everything during that time, but we are public schools so we have to follow all regulations which are included in the law on higher education, and budget is also provided by the government. So, and the limits of admittance, they are also provided by the government. So we are autonomic on one side, but on the other side, we have strict rules we have to follow, but within these lines, we can do as best as we can believe that we are doing.

DR. CARON: Okay. Who has the final say so on accreditation processes, standards of accreditation, results of accreditation? Who is the final person that puts the stamp on it and says "poof," this school is approved?

DR. PACZEK: This is the sign of the chairman of Accreditation Committee. So this time it would be my sign, and the co-sign is coming from the President of Conference of Rectors.

DR. CARON: Okay. So it's signed by two people actually?

DR. PACZEK: Two people.

DR. CARON: The rectors as well as—

DR. PACZEK: Yes. Up to now, it never was the situation that rectors were opposing any things which are included in the final report or coming from Accreditation Committee.

DR. CARON: So mostly it is, the power lies within the ACPUMS and the rectors and not really the Ministry of Health?

DR. PACZEK: In broadest accreditation, no; in recognition, if we look for, as I said, this financing and governing—

DR. CARON: Uh-huh. Uh-huh.

DR. PACZEK: --the schools, the Minister is much—

DR. CARON: Where the money comes from.

DR. PACZEK: --more responsible than rectors and our Commission, in recognition, this process of recognition.

DR. CARON: Okay. Thank you. That was one point that I wasn't sure on. Now, there were eight more issues raised by staff analysis, and do you want me to go through each one of the eight?

CHAIRPERSON DOCKERY: Ask your questions.

DR. CARON: Okay, sir. I'll try to briefly summarize them. You go down through here. They're asking--excuse me--my question is if ACPUMS is evaluating, and I think you've already answered some of these, the adequacy and efficiency of each of the medical schools' administration, who's actually doing that part? Is that ACPUMS or is that the rectors?

DR. PACZEK: Partially this is our job, but I must admit that only partially because, as I said, this recognition is not 100 percent in our hands. We look much more for accreditation, for curricula, for all this stuff. Anyway, in accreditation and visit on site, we always meet with the dean, with vice dean, with the Bursar--that means accountant--and we talk with all people in the university and faculty. So maybe we don't review the accounts. We don't look for them precisely. We know them, but we don't ask because even we can't do this from legal point of view, but we visited all points in the university and talk with these people, and we have special questionnaire with very specific questions we put, and all answers are included to the final report.

DR. CARON: Now, who controls the admission processes for the medical students?

DR. PACZEK: This is regulated by our law of higher education that means admittance is something like resident symmetric syndrome system [?]. That means we have, after high school, this is arbiter, matura, arbiter, which is the state exam, finishing high schools, and this arbiter provides notes. So it's possible to make the ranking list of all people in Poland passing this exam. And the best of them, they can enter medical university, and from this point of view, it's really not possible, according to the law, at least at the moment, to put additional exams. We are not 100 percent happy with that, but this is the law. We can't cross this law and can't break this law because if we look, for example, for excuse or if we look for even some health problems, they can't have any influence of admittance.

It would be corrected within the first year. This is obvious, but it has no influence over admittance. Because of that, we are not happy with the system, but now this is like that.

DR. CARON: Okay. Now, as far as student, who controls student complaints, procedures, and do they exist? Is there an avenue for students to complain, and which, where does that fall under, ACPUMS or the rectors' control?

DR. PACZEK: This is like that, as I said. Now in the past, it was very similar, but starting from 2005, according to our law, students take a very strong representative in universities, so anybody, in a faculty meeting, even in any commission, which is choosing the head of the department, there is representative of students. In our commission, that means in this Accreditation Commission for Higher Medical Schools, for Medical Universities in Poland, we also have a student who is a permanent member, and he has the right to vote. So this is not an observer, but just a member who can vote.

MR. LA PORTE: Can I interject? The question isn't about student representation. The question is about student complaints. It could be confidential matter, harassment, academic issues. So it's not

a question of representation, but how are complaints handled? Is there an official codified process for handling complaints?

DR. PACZEK: According to all our regulations, they can complain to the dean. They can complain to rector. They can complain to special commission which always exists in universities. For example, in our university, we have anti-harassment commission. We have such a commission, and this the body that anybody can come. The lawyers sitting even. Not the member of faculty so we have such regulations. So this is for employees, not only academic employees, but all, and for students, because as you said for harassment, it could be for students and for others. So such a body, but this is regulated on the level of university, majority, I think majority they have, because in the past, we didn't check this exactly. Our university, Warsaw, we have this. To my knowledge, majority also have this. This we will check during the third term. Yeah?

MR. LA PORTE: So I understand that. So you're saying the universities have instruments, which I can understand, but I think sort of point number four, which is what Mr. Porcelli was getting to, does ACPUMS formally consider complaints that it receives from students?

DR. PACZEK: We always have a meeting with students where members of faculty or normally from the universities allowed to be. So we have a meeting which is normally attended by 20 students or so. We sit in with this meeting for at least one hour. Normally, we prefer to have students with us. We choose the lunch time, and we provide lunch. So this is really 20 people are coming, and then we have one hour. Nobody can come. That means nobody from the faculty can come with us. So always we have this meeting and report coming from this is always included with the final report. So if you look for this, yes, we always we ask for these things.

CHAIRPERSON DOCKERY: Could you go ahead and conclude your remarks then?

DR. CARON: Yes. So I guess the confusion becomes with us the relationship between ACPUMS and the rectors as far as who controls different entities. I'll summarize them real fast here. Who's studying or evaluating the effectiveness of the faculty themselves? Clerkship sites not being evaluated in the first 12 months of the review? Who's doing that? Student complaints, we talked about. And changes? You know, who's controlling the changes in ACPUMS as far as any kind of modification of the standards and so forth? I guess that's my biggest concern is that there was, I wasn't sure who is the boss, you know? And who is making the decisions as far as the final decisions? And I appreciate you telling me about the rectors and the association between ACPUMS and the rectors.

CHAIRPERSON DOCKERY: Dr. Crane?

DR. CRANE: Yes, good afternoon. I think Dr. Caron did an excellent job of looking at the most salient points, the points that we need to see maybe more comparability demonstrated, but I'm still--need still a little help. It was a little confusing with an entity responsible. We're looking for a single entity that has the absolute authority to accredit or to remove accredit. And Dr. Paczek, what I've heard you say is that ACPUMS proposes this; they propose accreditation. But they don't actually give accreditation. There's an additional entity that gives the accreditation.

So am I of the understanding that this is a cooperative venture among several entities and that there's no one single entity that is accountable and responsible in the end?

DR. PACZEK: I would like to say like that, that maybe I was not clear enough. I would like to say that we do not propose accreditation. We grant or do not grant accreditation, and the question is what will be the following step that means to close or not to close, to change admission of students or not change admission of students, and this step, I'm not allowed to--I have no legal power to do that. This has to be done by the Minister of Health, but accreditation is granted in fact, and this is the real life, by Accreditation Committee. This is the document. Accreditation is granted for a period of five years. So this is accredited for three years with my sign. That means it will be for the next three-and-a-half years, and this is accreditation. This is sent to the Minister of Health, and Minister of Health can immediately react, if you like. That means closing admission of students exactly the same date. So I was talking not about accreditation, but about next steps.

DR. CRANE: Okay. Lastly, and Dr. Caron brought up this point of site visits also, have you done recent site visits in between the accreditation process? Is that in the making for you? Is that something that you're considering because some of the problems that Mr. Porcelli presented was lack of site visits within 12 months of accreditation. That was one part of it. And the fact that there's no revisit once a site has been accredited during that process, there was no re-site visit during the next accreditation cycle. Is that being changed or modified now?

DR. PACZEK: Yes, according to our regulations, we have interim visit, which is in between. This year we visited five medical schools. This is the visit on site so this is not just the correspondence, but this is visit on site. And having negative remarks, which are always included because we check only this negative for this, which should be improved, we go step by step with all these remarks, and the meeting is with students always. We invite students, which is completely separate with any faculty member, and with the dean, and then there are some visits. So this year, 2009, we visited half of our medical university. Just, this was interim analysis, what is going on with the schools. So this is included for our regulation of activities. We have this in between visits.

DR. CRANE: Is it possible for you to present us with some of the reports from those site visits? Not now. I mean in the future.

DR. PACZEK: Of course, of course. Yes. We have this. I have the list how it was done with the date and the place, but if you would like to have this report, yes, of course.

DR. CRANE: Right. And this is important, not only compliance with the letter as I've said before to another delegation, but in guaranteeing and standardizing, you know, the quality of education that you give, that you revisit and you review, and if somebody is not up to standards, you improve. Thank you very much. I appreciate your answers.

DR. PACZEK: Thank you.

CHAIRPERSON DOCKERY: Are there other comments or questions from members of the

Committee? Is there a motion?

DR. CARON: Yes. I move that, based upon the most recent information and materials received from Poland, the NCFMEA needs additional information in order to make the decision regarding the continued comparability of standards used by the ACPUMS to accredit medical schools in Poland. Therefore, the NCFMEA will defer comparability redetermination until the next meeting, spring 2010, pending the receipt of the following specific information, to include Parts 1, 2, and--clarification of Parts 1, 2 and 3 of the staff analysis.

MR. LA PORTE: You mean all nine points?

DR. CARON: Nine points.

CHAIRPERSON DOCKERY: Dr. Crane?

DR. CRANE: Second.

[Motion made and seconded.]

CHAIRPERSON DOCKERY: Does everybody understand the motion? The motion is defer determination of redetermination of comparability until the spring of 2010.

DR. CARON: If that is enough time for them. I was pushing it a little bit, but I didn't know if it was enough time.

CHAIRPERSON DOCKERY: I think I heard them say that they would be able to provide the reports to Dr. Crane.

DR. CARON: Okay. Okay.

CHAIRPERSON DOCKERY: Any question on the motion? All in favor, please say aye.

[Chorus of ayes.]

CHAIRPERSON DOCKERY: Those opposed?

[No response.]

CHAIRPERSON DOCKERY: Any abstentions?

[No response.]

CHAIRPERSON DOCKERY: All right. Thank you very much for coming and spending your time to meet with us, and remember that this action is confidential until you're notified by the Secretary of Education, but the genesis of the motion is that we will defer action on the

determination of comparability pending receipt of additional information by the spring of 2010 meeting.

DR. PACZEK: Thank you.

CHAIRPERSON DOCKERY: Thank you very much.

[Executive Session concludes.]