

Независимый институт аккредитации, рейтинга и сертификации Аккредитация, рейтинг жана тастыктоочу коз карандысыз институту

Independent Institute of Accreditation, Rating and Certification

APPROVED:

At the meeting

Accreditation Council IARC

S.T.Sarbanov

Protocol No. 9 dated 07/04/2024



Order No. 2/008 dated 07/04/2024

REGULATIONS ON REFERENTS OF THE INDEPENDENT INSTITUTE OF ACCREDITATION, RATING AND CERTIFICATION (IARC)

The referent is the main person responsible for organizing and conducting accreditation. His/her activities are regulated by the regulatory documents of the Independent Institute of Accreditation, Rating and Certification. The referent may be a full-time or part-time employee of IARC. The referent monitors the progress of the entire accreditation in accordance with the regulatory documents.

RIGHTS AND RESPONSIBILITIES OF THE REFERENT

Responsibilities of the referent:

- organizing the accreditation process with strict adherence to the stages of its passage;
- timely provision of experts with the necessary information materials and a report on the self-assessment of educational institutions (EI);
- monitoring compliance with the standards established by the 2-3-day program and other regulatory documents;
- monitoring compliance with regulatory acts when preparing the final report of the expert commission;
- assessing the work of the members of the expert commission;
- participation in preparing the meeting of the Accreditation Council for making decisions on accreditation;
- timely provision of the members of the Accreditation Council with the necessary materials for making decisions on accreditation;
- organizing and documenting the results of the annual check of the implementation of the recommendations of the expert commission;
- improving the accreditation process.

Rights of the referent:

- Suspend the work of the expert or recall him from any stage of accreditation if there are grounds for this;
- Participate in priority order in international projects of IARC;



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- Participate free of charge in seminars and trainings of IARC;
- Receive a fee for conducting an external assessment in the amount of the fee of the chairman of the expert commission.

The process of conducting and improving accreditation

- 1. Preparatory stage
- 2. Visit to the health care institution
- 3. Preparation of materials for the meeting of the Accreditation Council under the IARC and monitoring the implementation of the AC decisions.
- 4. Analysis of the practice of accreditation of health care institutions in order to improve the accreditation process.

1. Preparatory stage

- -Sending a letter to the healthcare institution with the necessary information materials;
- Consulting healthcare institution representatives;
- Receiving an application, documents, and materials of the healthcare institution's self-assessment;
- -Checking documents and the self-assessment report;
- -Concluding an agreement with the healthcare institution to conduct accreditation;
- -Coordinating the work schedule;
- -Analyzing the self-assessment report and sending it with comments for revision to the healthcare institution;
- -Selecting and forming an expert committee;
- -Briefing the experts;
- -Signing by the experts of statements of readiness for work;
- -Analyzing the revised self-assessment report and sending it to the experts;
- -Providing other necessary accreditation documents to the experts;
- -Resolving issues related to organizing the working conditions, travel, food, and accommodation of the expert committee with the healthcare institution.

2. Visit to the healthcare institution

- Introducing members of the expert commission to the healthcare institution administration;
- Accompanying experts during the visit to the healthcare institution;
- Monitoring strict adherence to the 2-3-day program for visiting the healthcare institution during the external assessment;
- Monitoring the deadline and rules for writing the final report (it is desirable to complete and sign it by the end of the visit);
- Monitoring experts in terms of their compliance with the conditions of the expert's statement of readiness for work, and assessing their activities during the visit to the healthcare institution.
- 3. Preparation of materials for the meeting of the Accreditation Council and further monitoring



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- Adjustment of the final report if necessary;
- Sending the final report to all members of the Accreditation Council at IARC;
- Monitoring the preparation of the report of the chairman of the expert commission at the meeting of the Accreditation Council at IARC;
- Organizing an inspection in the event of a complaint from an institution on the accreditation decision made;
- Preparing materials for making the final decision;
- Organizing and documenting the results of the annual inspection of the implementation of the recommendations of the expert commission;
- Formation of the institution's dossier on accreditation.

4. Participation in improving the accreditation process

- Identifying best practices and recommendations for their application in other institutions;
- Analysis of regulatory documents and their revision;
- Comparative analysis of the implementation of recommendations of expert commissions in institutions;
- Identifying trends in changes in the quality of education and the main factors influencing it over the years;
- Other proposals for improving the accreditation process.