

本科临床医学专业认证指南（2016 版）

Guideline for the Accreditation of Basic Medical Education (2016)

教育部临床医学专业认证工作委员会

Working Committee for the Accreditation of Medical Education
Ministry of Education, China

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为加强医学教育质量保证体系建设，教育部、原卫生部 2008 年发布了《本科医学教育标准—临床医学专业（试行）》（以下简称《标准》）（教高[2008]9 号），并下发《教育部办公厅关于成立教育部医学教育认证专家委员会和教育部临床医学专业认证工作委员会的通知》（教高厅函[2008]7 号），成立了“教育部医学教育认证专家委员会”（以下简称“专家委员会”）和“教育部临床医学专业认证工作委员会”（以下简称“工作委员会”），开展本科临床医学专业认证工作。

一、认证原则

1. 保证认证过程的独立性、客观性和公正性。
2. 尊重教育机构的办学自主权和教育模式的多样性。
3. 依据教育机构呈报的认证材料，重点考察教育机构本科临床医学专业的办学定位、教育目标、办学过程和质量保障体系。
4. 强调认证标准和认证程序的规范性和权威性，在广泛收集客观证据和信息的基础上得出认证结论建议。

二、认证机构

全国医学教育机构的本科临床医学专业认证由教育部临床医学专业认证工作委员会负责组织和实施，工作委员会下设秘书处，处理日常事务。

三、认证小组

（一）认证小组组成

1. 由工作委员会任命，受其委派实施认证现场考察、前期考察或回访考察。
2. 认证现场考察小组一般为 5-9 人，其中设组长 1 人，必要时可设副组长 1 人；另设秘书 1-2 人。前期考察小组和回访考察小组一般 3-5 人，其中设组长 1 人，秘书 1 人。
3. 认证小组应由不同学科背景（医学相关、教育学、管理学等）的专家组成。

4. 根据教育机构的申请，认证现场考察可由工作委员会秘书处审议后邀请境外专家参与。

（二）专家条件

1. 从事医学教育教学、科研或（和）管理工作，具有丰富的经验，了解医学教育规律，熟悉医学教育发展趋势。

2. 熟悉临床医学专业教育标准和认证程序，身体健康，参与认证的全过程。

3. 与申请认证的教育机构没有利益关联。

4. 作风严谨，公正廉洁，在团队中能有效沟通和合作。

（三）认证小组职责

1. 组长职责

（1）全面负责认证相关事宜，如确定认证现场考察的日程安排等，为认证小组成员提供相关指导。

（2）在尊重成员意见、相互协商的基础上进行任务分工。

（3）组织认证现场考察前（至少提前两周）的专家网络预备会议。

（4）主持认证现场考察期间认证小组例会、讨论交流等，督促认证小组成员完成各自的任务，领导认证小组成员讨论认证结论建议意见，实施记名投票。

（5）向申请认证的教育机构通报考察意见和征求反馈意见，并负责认证报告的定稿。

（6）向工作委员会提交认证报告。

（7）审读教育机构在认证有效期内按要求提交的进展报告和综合报告，并向工作委员会提交审读意见。

（8）前期考察或回访考察期间，全面负责考察相关事宜，向工作委员会提交前期考察报告或回访考察报告。

（9）就进一步完善临床医学专业认证程序提出建设性的意见和建议。

2. 成员职责

（1）认证现场考察前仔细研读自评报告，根据《标准》对申请认证的教育机构提交的认证材料提出初步意见，提出在认证现场考察中需要着重关注的内容，必要时可通过秘书向教育机构索要相关补充材料。

（2）参加认证现场考察前（至少提前两周）的专家网络预备会议。

(3) 进校认证现场考察时完成分工负责的各项任务，通过座谈会、访谈、查阅资料和现场走访等形式获取所需信息，提出本人考察意见，积极参与讨论，并对认证结论建议记名投票。

(4) 认证现场考察结束后，在指定期限内完成分工部分的报告，并对最终认证报告提出意见和建议。

(5) 审读教育机构在认证有效期内按要求提交的进展报告和综合报告，并向工作委员会提交审读意见。

(6) 参与前期考察或回访考察时，需完成指定分工，并对前期考察报告或回访考察报告提出意见和建议。

(7) 对临床医学专业认证程序的改进和完善提出建设性意见。

3. 秘书职责

(1) 协助组长收集认证小组成员阅读自评报告的反馈意见，与申请认证的教育机构联系，要求其提供专家所需补充材料。

(2) 协助组长组织认证现场考察前（至少提前两周）的专家网络预备会议。

(3) 协助组长与申请认证的教育机构协商制订认证现场考察日程，并做好与该机构的沟通。

(4) 负责认证现场考察期间相关资料的发放和收集，及时与认证小组成员沟通。

(5) 负责会议记录、资料汇总等工作，协助组长完成并提交认证报告。

(6) 在有境外专家参与的认证过程中，提前协助境外专家了解国内专家信息以促使其更好地在团队工作中完成职责要求；同时，承担一定的口头和书面翻译工作。

(7) 负责协调安排认证小组成员的交通、食宿等事宜。

(8) 按照工作委员会秘书处的要求提交相关的材料。

四、认证标准

《中国本科医学教育标准—临床医学专业》。

五、申请认证的教育机构

教育部批准的开设本科临床医学专业的教育机构均可向工作委员会秘书处提出认证申请。具体工作包括：

1. 提前 1 年在认证工作系统中向工作委员会秘书处提出认证申请，提交《中国临床医学专业认证申请表》和临床医学专业教育教学计划等申请材料，同时指定联络人员，负责与工作委员会秘书处的联络和沟通。

2. 经审议同意进行认证后，与工作委员会秘书处协商确定进校认证现场考察时间。经审议后需进行前期考察时，与工作委员会秘书处商定前期考察安排。

3. 依据《标准》进行自评，撰写自评报告，在认证现场考察前 2 个月向工作委员会秘书处及认证小组成员提交自评报告。

4. 及时提供相关材料并解答相关问题，为认证小组提供必要的工作条件，保障认证工作的顺利进行。

5. 在不影响正常的教学、科研和医疗秩序的情况下，按照考察日程组织管理人员、教师、学生、卫生行政部门等利益相关人员参加座谈会，协调认证小组进行教学场所、实验室和图书馆等相关设施的考察。

6. 对于认证报告中有异义的部分，可提出自己的意见和实证材料；与认证小组协商不能达成共识时，可向工作委员会秘书处提出申诉请求。

7. 按照认证报告的建议与要求积极改进，按期提交进展报告和综合报告。必要时接受工作委员会组织认证小组对教育机构进行的回访考察，与工作委员会秘书处商定回访考察安排。

8. 认证有效期限或延长期限结束前半年内，向工作委员会秘书处提交新一轮认证申请。

六、认证程序

1. 申请认证的教育机构应在每年 4 月或 10 月向工作委员会秘书处提交认证申请；工作委员会秘书处组织完成对认证申请的审议，并将审议结果告知申请认证的教育机构。

2. 工作委员会可根据需要组织认证小组对教育机构进行前期考察，以确定是否接受该机构的认证申请。前期考察工作时间一般为1天。教育机构需按照前期考察小组的要求准备材料并回答问题。

3. 认证申请通过审议被批准后，工作委员会提前6个月将认证小组进校认证现场考察的时间通知申请认证的教育机构；提前3个月组建认证小组并征求申请认证的教育机构对认证小组组成的意见。

4. 教育机构依据《标准》撰写自评报告；在认证小组进校认证现场考察前2个月向工作委员会秘书处提交自评报告；如邀请境外专家参与认证工作，应同时提交英文版自评报告。

5. 认证小组依据《标准》对申请认证的教育机构进行认证现场考察。认证现场考察工作时间一般为4天，可根据校区和医院的分布情况适当延长。

6. 认证小组集体讨论认证现场考察的初步意见，形成初步认证报告并向接受认证的教育机构通报。认证小组全体成员以记名投票的方式提交对认证结论的建议及认证有效期内提交进展报告的时限。该结论建议在工作委员会审议前是保密的。

7. 认证小组离校后依据《标准》和考察期间获得的材料和信息，按分工撰写认证报告初稿，由秘书汇总并提交组长。

8. 组长于认证现场考察后2个月内完成最终认证报告，并在接受认证的教育机构确认没有异议后，呈报工作委员会审议批准。

9. 通过认证的教育机构按照要求按时向工作委员会提交进展报告（如有境外专家参与，应同时提交英文版进展报告）。进展报告以最近一到两年内针对认证报告建议的改进情况和相关领域其它进展以及重大变化为主要内容，原则上每两年提交一次，视情况可增加频次。工作委员会组织认证小组审读进展报告并视情况组织回访考察。

10. 通过认证的教育机构在认证有效期限结束前半年提交综合报告（如有境外专家参与，应同时提交英文版综合报告），申请延长期限或重新认证。综合报告以总结本轮认证历次提交的进展报告的改进情况和认证有效期内临床医学专业教育教学的重大变化为主要内容。工作委员会组织审读综合报告，审议确定是

否延长期限或重新认证。认证期限只可延长 1 次，最多延长 4 年，最长延长至 10 年，延长期间按要求提交进展报告。

11. 重新认证的教育机构需在有效期限结束前半年向工作委员会秘书处提交新一轮认证申请。

12. 不予认证的教育机构需要根据认证小组的要求进行改进，2 年后方可再次提出认证申请。

七、认证结论

认证小组根据教育机构的自评报告和认证现场考察情况，对教育机构的本科临床医学专业教育教学是否达到《标准》的要求做出认证结论建议，经工作委员会审议确定。

认证结论分为通过认证和不予认证。

（一）通过认证

通过认证的有效期为 3~8 年，自认证小组认证现场考察结束之日算起。

（二）不予认证

教育机构的本科临床医学专业教育教学达不到《标准》的基本要求。认证小组根据该教育机构在某些方面存在的缺陷或重大问题提出整改意见和整改期限。整改期限 2 年。通过整改和自评，教育机构认为已经达到《标准》的基本要求，可重新申请认证。

八、认证管理

本科临床医学专业认证工作具体由工作委员会管理实施。

1. 认证小组由工作委员会委派，实行利益冲突回避制度。

2. 认证工作必须遵循实事求是、公平公正的原则。认证考察应不影响接受认证的教育机构的正常教学、科研和医疗工作秩序。

3. 认证小组成员需遵守相关规定，并接受认证教育机构、工作委员会秘书处和社会监督。

4. 接受认证的教育机构对认证报告存有疑义，可向认证小组提出，如双方协商不能达成共识，教育机构需在获得报告后 30 天内向工作委员会秘书处提出

书面申诉；秘书处将申诉材料递交工作委员会审议；工作委员会的审议结果即为最终结论。

5. 认证结论建议以认证现场考察小组投票结果达到三分之二以上多数为有效。未达到三分之二以上多数的，由工作委员会授权专家审议讨论，并将结果提交工作委员会审议。

6. 认证结论经工作委员会审议后在工作委员会网站上公示，公示期为 10 个工作日，公示期结束后向社会公布。如有异议，需在公示期内向工作委员会秘书处提出书面申诉，秘书处将申诉材料递交专家委员会，申请仲裁；专家委员会的仲裁结果即为最终结论。

7. 教育机构在认证有效期内如发生重大变化，应及时告知工作委员会。重大变化包括校名、校址、管理体制、招生、资源、教育计划等领域的变化。

8. 认证考察过程中，认证小组成员必须遵守保密原则，离校前归还或销毁相关的敏感资料、数据和信息（包括相关的电子邮件）。

9. 工作委员会秘书处应妥善保存、处理及利用与接受认证的教育机构有关的信息和资料。

九、附则

1. 本指南由教育部临床医学专业认证工作委员会负责解释。

2. 本指南自发布之日起实施，原《临床医学专业认证指南（试行）》同时废止。

Guideline for the Accreditation of Basic Medical Education (2016)

To facilitate the development of quality assurance system for medical education, the Ministry of Education and the former Ministry of Health jointly issued the Standards for Basic Medical Education (for Trial Implementation) (hereinafter called Standards) (MOE Document No. [2008]9), and set up the Expert Committee for the Accreditation of Medical Education (hereinafter called Expert Committee) and the Working Committee for the Accreditation of Medical Education (hereinafter called Working Committee) under the authority of the MOE (MOE Document No. [2008]7) for the accreditation of medical education programs.

I. Accreditation principles

1. Ensuring the independence, objectivity and impartiality of the accreditation process;
2. Respecting the autonomy of educational institutions and diversity in educational models;
3. Focusing on the orientation, educational objectives, educational process and quality assurance system of the educational institution on the basis of its submissions;
4. Ensuring the authority and reliability of accreditation standards and accreditation procedures in producing evidence-based accreditation decisions.

II. Accreditation organizations

The Working Committee is responsible for the accreditation of basic medical educational programs nationwide. A secretariat is established for the daily operation of the Working Committee.

III. Assessment teams

Composition of an assessment team

1. An assessment team is appointed by the Working Committee for the site visit or preliminary visit or review visit of an educational institution.
2. The site visit team is composed of five to nine members including one chair and one vice chair when necessary; one or two secretaries are also appointed. The preliminary visit or review visit team is composed of three to five members, including one chair and one secretary.

3. Team members should be experts in diverse fields like medical education, pedagogy, and management science, etc.

4. International assessors may be invited for the assessment by the Working Committee, when the request of the medical school has been approved.

Eligibility of the team members

1. Engaged in teaching, research and/or management in medical education, experienced and well acquainted with best practice and developing trends in medical education;

2. Being familiar with the *Standards* and accreditation procedures, of sound physical and mental health and committed to quality improvement through accreditation;

3. Having no conflicts of interest with the educational institution to be accredited;

4. Following the principle of being fair and honest, and acting with team spirit and leadership.

Responsibilities of the assessment teams

1. Responsibilities of the team chair

- Fully responsible for the site visit including finalizing the visit schedule, introducing and providing guidance to the team members;
- Assigning tasks to team members, taking into account individual preferences;
- Chairing the online preparatory meeting held at least two weeks before the site visit;
- Chairing team meetings and discussions during the site visit, and ensuring team members fulfill their tasks in time, and vote by open ballot for the recommendations on accreditation decisions;
- Informing the educational institution of the accreditation findings, seeking its feedback on factual accuracy and finalizing the accreditation report;
- Submitting the accreditation report to the Working Committee;
- Reviewing the progress reports and comprehensive report submitted by the educational institution during the period of accreditation, and providing written comments to the Working Committee;

- Fully responsible for the preliminary visit or review visit, and submitting the report on preliminary visit or review visit to the Working Committee;
- Providing constructive suggestions to the Working Committee to improve the accreditation procedures.

2. Responsibilities of team members

- Submitting written comments on the self-evaluation report of the educational institution and issues needing to be followed up during the site visit after thorough reading of the report. Seeking support documentations from the institution through the team secretary when necessary;
- Actively contributing to the online preparatory meeting held at least two weeks before the site visit;
- Acquiring necessary information and validating it through various ways during the site visit like meetings, interviews, documents and observations to fulfill assigned tasks. To vote on the recommendations on accreditation decisions;
- Submitting their contributions to the accreditation report by the due date after the visit;
- Reviewing the progress reports and comprehensive report submitted by the educational institution during the period of accreditation, and providing written comments to the Working Committee;
- Fulfilling assigned tasks in the preliminary visit and review visit, and contributing to the written visit findings;
- Providing constructive suggestions to the Working Committee to improve the accreditation procedures.

3. Responsibilities of the team secretary

- Assisting the team chair in collecting the comments on the self-evaluation report from team members and the support documents from the institution;
- Assisting the team chair in organizing the online preparatory meeting at least two weeks before the site visit;
- Assisting the team chair in planning the visit schedule and liaising with the institution to be accredited;
- Assisting team members in collecting and distributing support documentations;

- Keeping minutes of the meetings, summarizing the documents and assisting the team chair in finalizing and submitting the accreditation report;
- If international assessors are included, ensuring accurate interpretation and translation for all meetings and documents and providing them the information of the domestic assessors to promote better team work;
- Arranging travel and accommodation for the team members;
- Submitting materials required by the Secretariat to the Working Committee.

IV. Accreditation Standards

Accreditation Standards for Basic Medical Education in China

V. Eligibility and responsibilities of educational institutions applying for accreditation

All educational institutions offering basic medical educational programs under the approval of the Ministry of Education may submit their request for accreditation to the Secretariat of the Working Committee. Their responsibilities include:

1. Proposing the request for accreditation to the Secretariat one year in advance by submitting the application online including the *Application Form for the Accreditation of Medical Educational Programs in China* and curriculum and other support documents and designating a contact person for accreditation;
2. Assisting the Secretariat in deciding the date of site visit after approval of accreditation application or assisting the Secretariat in deciding the schedule of preliminary visit when preliminary visit is suggested;
3. Conducting self-evaluation and submitting the self-evaluation report to the Secretariat and assessment team members two months before the site visit;
4. Providing support documents as requested and responding to relevant questions in a timely manner, as well as providing necessary work facilities and support of travel and accommodation to the team;
5. Organizing representatives of the administrative staff, academic staff, students and the health sectors and other stakeholders for interviews and organizing visits to facilities as classrooms, laboratories and libraries, without interfering with teaching, research and health care services;

6. Giving feedback on the factual accuracy of the accreditation report and lodging an appeal to the Secretariat when an agreement cannot be reached with the accreditation team through negotiations;

7. Improving its medical education programs in accordance with the recommendations of the accreditation report. Submitting progress reports and a comprehensive report in time and assisting the Secretariat in planning the review visit when needed;

8. Submitting an application for reaccreditation 6 months prior to the end of the accreditation period or the extended accreditation period.

VI. Accreditation procedures

1. The educational institution may submit its application for accreditation to the Secretariat of the Working Committee in April or October. The Secretariat organizes the review of the application and notifies the educational institution of the decision.

2. A one-day preliminary visit may be organized to decide whether to accept the application or not. The educational institution should provide documentation as requested and respond to relevant questions in a timely manner.

3. The Secretariat notifies the educational institution of the dates for site visit six months in advance and seeks the comments of the educational institution on the proposed assessment team three months ahead of the site visit.

4. The educational institution writes a self-evaluation report against the *Standards* and submits it to the Secretariat two months ahead of the site visit. When international assessors are included in the team, an English version of the self-evaluation report should also be submitted.

5. The assessment team conducts a site visit to the educational institution against the *Standards*. The visit often lasts for four days and the time may be extended when necessary.

6. Before leaving the institution, the team prepares and presents a preliminary report on the site visit to the educational institution. All team members independently vote by open ballot whether the school should be accredited and for the period of accreditation. Each assessor's recommendations are confidential before being reviewed by the Working Committee.

7. After the site visit, the team members prepare their part of the accreditation report against the *Standards* based on the evidence and information obtained during the site visit. The secretary collects and submits the first draft to the team chair.

8. The team chair finalizes the accreditation report within two months after the site visit, and submits it to the Working Committee after seeking the comments of the educational institution on the factual accuracy of the report.

9. If granted accreditation, the educational institution submits timely progress reports to the Working Committee as required. An English version should also be submitted if international assessors are included. The progress report should respond to the recommendations in the accreditation report and include any improvement in the educational program in the past two years. Major changes should also be included. The Secretariat organizes the review of the progress report and a review visit may be organized when necessary.

10. The educational institution submits a comprehensive report six months before the accreditation period expires, with an English version for international assessors. An application for an extension or reaccreditation should also be submitted. The comprehensive report should respond to the recommendations in the accreditation report by presenting improvements in the educational institution since the last site visit. Any major changes should also be included. The Secretariat organizes the review of the comprehensive report to decide the extension of accreditation period or reaccreditation. The accreditation period can be extended only once, up to four years, no more than ten years in total. Progress reports should be submitted within the extended period.

11. Educational institutions submit applications for reaccreditation 6 months prior to the end of the extended accreditation period.

12. Educational institutions receiving “no accreditation” should dedicate efforts towards self-improvement against recommendations in the accreditation report for two years before reapplying for accreditation.

VII. Final decision on accreditation

The accreditation team members make recommendations on the accreditation decision based on their judgments about the extent to which the educational institution’s educational quality conform to the *Standards*. Their judgement is based on the information they collected from the self-evaluation report and site visit to the

educational institution. The Working Committee makes the final decision on accreditation.

The final decision on accreditation includes “pass the accreditation” or “no accreditation”.

Pass the accreditation

The period of accreditation, generally lasting 3-8 years, begins from the end of the site visit.

No accreditation

The educational institution’s educational quality does not meet the requirements of the Standards. Considering the areas for improvement and significant problems identified in the accreditation report, the assessment team should set a timeline for improvements to be achieved. A period of two years is required before the educational institution applies for accreditation again.

VIII. Management of the accreditation

The Working Committee is fully responsible for the management of accreditation in China.

1. The team members are appointed by the Working Committee while avoiding conflict of interests.
2. Accreditation activities should follow the principle of seeking truth from facts, being fair and just. The site visit should not interfere with the normal teaching, research and healthcare services in the educational institution.
3. The assessment team members should comply with relevant regulations and laws and accept the scrutiny of the educational institution, the Secretariat and the society.
4. The educational institution may put forward their disagreements to the assessment team regarding the facts in the accreditation report. When agreements cannot be reached after discussion, the educational institution should lodge an appeal to the Secretariat within 30 days after receiving the report. The Secretariat submits the appeal to the Working Committee, whose arbitration should be the final decision.
5. The recommendation on accreditation decision is valid when supported by at least two-thirds of the total number of votes. Otherwise, the accreditation decision should be discussed and approved by the Working Committee.

6. The decision of the accreditation, after review by the Working Committee, is posted on the website for 10 working days. Any disagreement should be lodged to the Secretariat within the 10 days by written appeal, which will be submitted to the Expert Committee for arbitration.

7. The educational institution should inform the Working Committee of any significant changes which have occurred during the valid period of accreditation. Such significant changes include changes in school name, school sites, administration and management systems, enrollment, resources, education programs and other areas.

8. During the site visit, the team members should abide by the principle of confidentiality and return or destroy sensitive documents, data and information (including relevant e-mail messages) before leaving the educational institution.

9. The Secretariat should properly keep, use or destroy the data and information of each educational institution.

IX. Annex

1. This guideline should be interpreted by the Working Committee for the Accreditation of Medical Education of the Ministry of Education.

2. The guideline is effective once published and the former *Guideline for the Accreditation of Medical Education (for Trial Implementation)* is abolished at the same time.