

## Yeditepe University Faculty of Medicine Interrelations and Principles of Collective Operation among Boards, Commissions, Coordinatorships, and Other Units within the Educational Management and Organizational Structure

### 1.1. General Framework: Collective Structure Related to Educational Management and Organization

This document defines the quality assurance governance structure of undergraduate medical education at Yeditepe University Faculty of Medicine (YUFoM). It standardizes the authority-responsibility-decision-making and monitoring relationships among boards throughout the processes of design, implementation, evaluation, and improvement of the educational program. In this manner, it aims to ensure the effective operation of the PDCA (Plan-Do-Check-Act) cycle and to provide evidence-based traceability.

In undergraduate medical education at YUFoM, the design, implementation, evaluation, and continuous improvement of the educational program are carried out as a collective process through interconnected boards, coordinatorships, commissions, and other supporting units.

Within this system:

- **The Dean's Office, Faculty Board (FB), and Faculty Executive Board (FEB)** define the institutional framework and formal decisions of all education-related administrative and academic processes and manage relations with the University administration.
- **The Program Development Committee (PDC)** serves as the upper/umbrella committee for undergraduate medical education, postgraduate medical education, and continuing professional development programs, and determines the strategic direction.
- **The Curriculum Committee (CCu), Assessment and Evaluation Committee (AEC), Program Evaluation Committee (PDE), UÇEP Harmonization Commission, Problem-Based Learning (PBL) Commission, Task-Based Learning (TBL) Commission, Scientific Research Education Commission (BAEK), Social Responsibility Projects Commission (SSPC), Academic Program Guide Commission (APG-C), Website Commission, Directive and Regulation Commission (DRC), and Faculty Self-Evaluation Committee (SEC)** operate within their respective areas of responsibility in line with the framework defined by the PDC.
- **The Bologna Process Faculty of Medicine Advisory Board (BPFMAB)** was established pursuant to the education-related provisions of Higher Education Law No. 2547. Its members are notified to the Rectorate by the Dean's Office and appointed by the Rector. It is an independent advisory board, and its position within the educational organizational chart has been determined accordingly. It operates under the authority of the Dean's Office.
- **The Coordinators Committee (CC)** is the primary structure responsible for the day-to-day functioning and implementation of the educational program. It fulfills this role through the activities of **Phase Coordinators and Vice Coordinators, specialized program coordinators and assistants (e.g., ICP, PBL, TBL, Early Clinical Exposure, elective courses), the External Training Institutions Cooperation Coordinatorship, and Departmental Education Coordinators.**

**Açıklamalı [P1]:** Overreaching Committee şeklinde de kullanımı mevcut. Bağlama göre fakülte kurulu bu öneriyi de değerlendirebilir.

- **The Committee Coordination Committee (CCC) and the Rotation Coordination Committee (RCC)**, which are sub-units of phase coordination, are responsible for the harmonized delivery of content within the framework of horizontal and vertical integration, as well as for student assessment processes.
- **Working Groups** are temporary structures established by the PDC when deemed necessary, assigned limited and specific tasks, and required to complete these tasks within a defined timeframe.
- **The Department of Medical Education (DoME)** provides consultancy and support to all these structures from the perspective of medical education as a discipline.
- **The Internationalization Commission** supports the internationalization dimension of teaching and learning processes.
- **The Medical Education Secretariat and other administrative/technical support units** provide support in documentation, communication, web management, and logistics.
- **Students, faculty members, graduates, and external partners** are systematically integrated into this collective structure through their representatives.

**Açıklamalı [P2]:** Bir önce çevirmiş olduğum staj yönergesini "Rotation" olarak çevirmiştim fakat Clerkship şeklinde de kullanımı var. Bu bağlamda hangisinin kullanılacağı takdiri sayın Fakülte Kurulunda'dır.

The quality assurance system for undergraduate medical education at Yeditepe University Faculty of Medicine (YUFM) is implemented through three complementary documents:

- Principles of Collective Work in Educational Governance and Organization (this document), which defines governance structures, inter-committee/commission relationships, and decision-making and monitoring lines;
- Target-Indicator Monitoring and Improvement Plan within the Scope of Quality Assurance, which standardizes objectives, indicators, responsible units, monitoring periods, and improvement actions;
- Indicator Measurement and Monitoring Table and Evidence Index, which ensures evidence-based retention, archiving, accessibility, and the sustainability of audit trails for monitoring findings.

All meeting and decision-making processes of committees, commissions, and coordination units are conducted and documented in a standardized manner. Below, the relationships among these structures and their modes of collective operation are summarized in a structured format.

## 2. Strategic Decision-Making, Approval, and Evaluation Tier

This section defines the main boards involved in the organizational structure and outlines their respective functions.

### 2.1. Dean's Office, Faculty Board (FB), and Faculty Executive Board (FEB)

- **Dean's Office:** The senior executive unit responsible for all academic and administrative activities of the Faculty.
- **Faculty Board (FB):**
  - Decides on the fundamental principles and policies related to education, training, and research activities and determines the core rules governing the academic functioning of the Faculty.
  - Serves as the academic decision-making body with respect to the overall structure of the education program, courses to be offered, and program modifications.

**Açıklamalı [P3]:** Bu bölümde *level* yerine *tier* ifadesi tercih edilmiştir. *Tier*, yönetim yapılarında farklı karar alma ve işlevsel katmanları tanımlamak için yaygın olarak kullanılmaktadır. *Level* ise yükseköğretim metinlerinde çoğu zaman eğitim düzeyi veya öğrenme basamakları ile ilişkilendirildiğinden, olası kavramsal karışıklıkları azaltmak amacıyla bu kullanım uygun görülmüştür. *Level* kullanımı da tarafınızca değerlendirilebilir.

- Faculty Executive Board (FEB):
  - Decides on the implementation of FB decisions, student affairs, staffing, appointments, and administrative processes related to education-training.
  - Serves as the primary decision-making and approval authority for the execution of proposals submitted by education-related boards.

## 2.2. Program Development Committee (PDC)

Role:

- Serves as the umbrella education committee of Yeditepe University Faculty of Medicine for:
  - undergraduate medical education,
  - postgraduate medical education\*,
  - continuing professional development programs\*\*.

\*Postgraduate education is conducted in cooperation with the Medical Specialization and Subspecialty Education Commission and the Hospital Executive Board, with representation ensured through the Dean and the Vice Dean responsible for education.

\*\*Implemented by the Department of Medical Education (DoME) in line with the strategic orientations determined by the PDC.

- Adopts principle-level decisions regarding program development, ensures their implementation, and monitors outcomes.
- Establishes temporary working groups, when necessary, to ensure the effective integration of new practices into the education program.

Chair:

- Dean

Members:

- • Vice Deans
- • Chief Coordinator (Chair of the Coordinators Council – CC)
- • Representative of the Curriculum Committee (CRC)
- • Representative of the Assessment and Evaluation Committee (A&E Committee / ÖDK)
- • Representative of the Program Evaluation Committee (PEC)
- • Representatives of Basic Medical Sciences and Clinical Medical Sciences
- • Representative of the Department of Medical Education (DoME)
- • Student representatives from undergraduate and postgraduate education
- • Other relevant academic/administrative representatives, when required.

Position of the PDC:

- Acts as a strategic bridge between the Dean's Office, FB and FEB, and the education committees.
- Ensures alignment with national and international standards, including the National Medical Education Accreditation Board / Association for Evaluation and Accreditation of Medical Education Programs (UTEAK/TEPDAD), the National Core Education Program (NCEP), the National Qualifications Framework for Higher Education in Türkiye (NQF-HETR), and the National Higher Education Qualifications Framework (NHEQF), thereby defining the strategic direction of program development.

**Açıklamalı [P4]:** UTEAK ve TEPDAD, uluslararası belgelerde **Türk kısaltmalarıyla da kullanılan** akreditasyon yapıları olduğu için  *bilinçli olarak*  mevcut halleriyle bırakılmıştır.

**Açıklamalı [P5]:** "Actors" yerine "bodies" tercih edilmiştir. Metin, bireylerden ziyade resmî kurul ve komisyonların kurumsal yetki ve sorumluluklarını tanımladığı için, yönetim terminolojisine daha uygun olan "bodies" ifadesi kullanılmıştır.

## 3. Design, Planning and Evaluation Tier

### 3.1. Main Bodies, Roles, and Relationships

### **3.1.1. Curriculum Committee (CC)**

#### **Role:**

- The Curriculum Committee plans, updates, and monitors the following components of the Yeditepe University Faculty of Medicine Undergraduate Medical Education Program (YUFM-UMEP):
    - the structure of the program (phases, committees/modules, clerkships),
    - program content,
  - horizontal and vertical integration.
  - The Committee ensures that Program Learning Outcomes (PLOs)—for example, YUFM-UMEP PLO-2021 fully aligned with the National Qualifications Framework for Medical Education (NQF-ME)—are reflected consistently across phases, committees, and clerkships.
- Relationships:
- Is represented on the Program Development Council (PDC) and reflects strategic educational decisions in the assessment system.
  - Works with the Council of Coordinators (CoC) to ensure alignment between program learning outcomes and A&E methods.
  - Evaluates examination results and item analyses in cooperation with the Program Evaluation Committee (PEC) and shares evidence with the PDC, CC, and PEC to support program development.
  - Provides A&E-related data and reports to the Faculty Self-Evaluation Committee (FSEC) for accreditation and self-evaluation processes..

### **3.1.2. Assessment and Evaluation Committee (AEC)**

#### **Role:**

- The Assessment and Evaluation Committee conducts the:
  - design,
  - standardization,
  - development of the Assessment and Evaluation (A&E) system for undergraduate medical education.
- It defines examination types, content and formats, the question bank, OSCE/OSPE practices, grading principles, and phase-based A&E matrices.

#### **Relationships:**

- Is represented on the Program Development Council (PDC) and reflects strategic educational decisions in the assessment system.
- Works with the Council of Coordinators (CoC) to ensure alignment between program learning outcomes and A&E methods.
- Evaluates examination results and item analyses in cooperation with the Program Evaluation Committee (PEC) and shares evidence with the PDC, CC, and PEC to support program development.
- Provides A&E-related data and reports to the Faculty Self-Evaluation Committee (FSEC) for accreditation and self-evaluation processes..

### **3.1.3. Program Evaluation Committee (PEC)**

#### **Role:**

- Is represented on the Program Development Council (PDC).
- Operates the program evaluation system.

- Collects, analyzes, and reports data obtained from student, faculty, graduate, and external stakeholder feedback, including surveys, focus groups, and performance indicators.
- Continuously monitors the effectiveness and quality level of the educational program.

Relationships:

- Reports findings to the PDC, thereby providing evidence for strategic decisions.
- Communicates improvement recommendations related to curriculum and A&E to the CC and AEC.
- Shares feedback with Phase Coordinators and Committee Boards regarding strengths and areas for improvement in implementation.
- Works closely with the Faculty Self-Evaluation Committee (FSEC) to support accreditation and quality assurance processes.

### 3.1.4. Bologna Process Faculty of Medicine Advisory Board (BP-FMAB)

Role:

- Reviews institutional aims and objectives at regular intervals by providing perspectives and recommendations on educational programs and research in line with medium- and long-term development strategies of the Faculty.
- Within the Bologna Process, determines relevant Field-Specific Qualifications based on the National Qualifications Framework for Higher Education in Turkey (NQF-HETR); defines Program Qualifications accordingly and reviews them every two years.
- Serves as a consultation and consensus platform involving internal and external partners (graduates, representatives of external institutions, employers, etc.).
- On behalf of the BP-FMAB, Bologna Coordinators conduct studies linking Program Learning Outcomes with course learning outcomes and with teaching–learning and assessment methods.
- Duties and responsibilities are defined in detail in the Directive on the Functioning of the Bologna Process Advisory Board.

Relationships:

- Works collaboratively with the PDC and other bodies to provide data and support for the development and revision of program learning outcomes.
- Acts as a bridge between strategy (PDC) – educational program (CC) – learning outcome alignment.

### 3.1.5. Faculty Self-Evaluation Committee (FSEC)

Role:

- Prepares and coordinates accreditation reports, self-evaluation reports, annual development reports, and interim self-evaluation reports of the Faculty. Systematically analyzes the Faculty’s status in accordance with the standards of the Association for Evaluation and Accreditation of Medical Education Programs (TEPDAD) and the National Medical Education Accreditation Board (UTEAK); identifies strengths, areas for improvement, and priority development domains; formulates concrete development objectives and action proposals..

Relationships:

- Functions as the main coordination mechanism for accreditation and quality assurance processes with the PDC, CC, AEC, PEC, CoC, and the Dean’s Office; collects regular data and reports and shares analyses with relevant bodies.

- Shares findings on program outcomes and alignment with national/international standards—TEPDAD/UTEAK, NCEP/NQF-ME, NQF-HETR—with the BP-FMAB and the CC.
- Ensures incorporation of perspectives of students, graduates, and faculty through representation and, when needed, focus groups or workshops.
- Communicates recommendations arising from self-evaluation to other bodies (e.g., Regulations and Directives Committee, Web Committee, Academic Program Guide Committee, Social Responsibility Projects Committee, Scientific Research Education Committee) and monitors implementation.

Position within Educational Governance:

- The FSEC constitutes the principal structure that renders the Faculty's quality assurance cycle visible and traceable. The self-evaluation and development reports prepared by the FSEC serve as fundamental reference documents in:
- the strategic decisions of the Program Development Council (PDC),
- the curriculum and Assessment and Evaluation (A&E) arrangements of the Curriculum Committee (CC) and the Assessment and Evaluation Committee (AEC),
- the processes of interpreting program evaluation findings and translating them into actions by the Program Evaluation Committee (PEC),
- the institutional planning and improvement decisions of the Dean's Office and the Faculty Board (FB) / Faculty Executive Board (FEB),
- thereby contributing to the establishment of an evidence-based, systematic, and cyclical framework for the continuous improvement of both the educational program and the educational organization..

### **3.2. Auxiliary Bodies, Roles, and Relationships**

#### **3.2.1. NCEP Harmonization Commission**

Role:

- Responsible for ensuring the alignment of the Yeditepe University Faculty of Medicine Undergraduate Medical Education Program (YUFM-UGMEP) with the current National Core Education Program (NCEP) and for updating this alignment at regular intervals.
- Contributes to the alignment between program learning outcomes and course learning objectives conducted by the Bologna Process Faculty of Medicine Advisory Board (BoFMA-B) by harmonizing the national competencies and qualifications defined in the NCEP with the program learning outcomes of YUFM-UGMEP.
- Analyzes whether the mandatory core content defined in the NCEP is included in the program, as well as content repetitions, potential gaps, and the distribution across academic years.
- Prepares NCEP alignment tables and reports and ensures that these are used as evidence documents in accreditation and program evaluation processes when required..

Relationships:

- Provides information to the Curriculum Committee (CC) regarding changes in the NCEP and priorities of the national core program and submits proposals for necessary strategic modifications.

- Conducts NCEP content alignment analyses within the scope of current NCEP compliance and proposes necessary curriculum revisions to the CC.
- Works in coordination with the BoFMA-B to ensure consistency between NCEP / UYYB, program learning outcomes (PLOs), and TQF-HE / UYYB.
- Carries out mapping studies with the Coordinators' Council (CoC), Committee Coordination Committees, and Departmental Education Coordinators to clarify in which periods the core content defined in the NCEP is delivered and provides feedback on deficiencies and repetitions observed in practice.
- Shares data and documents related to NCEP compliance with the Faculty Self-Evaluation Committee (FSEC) in accreditation and program evaluation processes..

### 3.2.2. Problem-Based Learning (PBL) Commission

#### Role:

- Responsible for ensuring that problem-based learning sessions at YUFM are conducted in a standardized and holistic manner in accordance with educational objectives.
- In this context, plans, updates, and monitors:
  - the aims and learning objectives of PBL sessions,
  - scenarios,
  - session structure and flow,
  - assessment and evaluation approaches related to the sessions.

#### Relationships:

- Works with the Curriculum Committee (CC) by ensuring the alignment of PBL with program outcomes and period objectives.
- Plans the distribution and implementation of PBL sessions across years and periods in cooperation with the Coordinators' Council (CoC), period coordinators, and the PBL Coordination Office.
- Aligns the principles of PBL-specific assessment and evaluation components (session assessments, formative feedback, PBL examinations, etc.) with the Assessment and Evaluation Committee (AEC).  
Receives educational science support from the Department of Medical Education (DoME) regarding the PBL method and collaborates in the field of faculty development.

### 3.2.3. Task-Based Learning (TBL) Commission

#### Role:

- Responsible for the design, implementation, and monitoring of task-based learning practices in clinical periods. In this scope:
  - develops task lists and task descriptions specific to clerkships and explores integration opportunities in the context of tasks,
  - ensures the alignment of tasks with program outcomes and period objectives,
  - plans the task-based curriculum,
  - structures assessment and evaluation processes related to task performance.

#### Relationships:

- Ensures alignment of TBL practices with the overall structure and outcomes of the program in cooperation with the Curriculum Committee (CC).

- Works with the Coordinators' Council (CoC), period coordinators, and departmental education coordinators to integrate tasks into clinical/clerkship environments while considering workload balance.
- Ensures the compatibility of principles and tools of task-based assessment (mini-CEX, DOPS, etc.) with the Assessment and Evaluation Committee (AEC).
- Collaborates with the Department of Medical Education (DME) for educational science support and faculty development related to task-based learning and assessment.

#### **3.2.4. Scientific Research Education Commission (SREC)**

##### **Role:**

- Responsible for the planning, implementation, and monitoring of educational components that support students' scientific thinking and research skills at YUFM.
- Contributes to the structuring and updating of scientific education and research-focused courses and activities included in the undergraduate medical education program (e.g., Scientific Research and Project).
- Supports efforts aimed at expanding student participation in scientific research and ensuring that all students graduate with at least one research experience.
- Contributes to the development of principles and processes related to scientific education components in line with faculty research objectives and UTEAK/TEPDAD standards..

##### **Relationships:**

- Contributes to the Program Development Council (PDC) in the improvement of scientific education components within the undergraduate program in line with research objectives and strategic orientations.
- Develops proposals to the Curriculum Committee (CC) regarding the position, scope, and distribution of scientific education and research-based courses across periods.
- Works with the Coordinators' Council (CoC) and period/clerkship coordinators on the integration of scientific education components into periods/phases and workload balance.
- Receives educational science support from the Department of Medical Education (DoME) in determining learning objectives, teaching methods, and assessment and evaluation methods related to scientific education.
- Contributes to the Faculty Self-Evaluation Committee (FSEC) in collecting and reporting data on student participation in scientific research and scientific education components and provides evidence for accreditation and self-evaluation processes..

#### **3.2.5. Social Responsibility Projects Commission (SRPC)**

##### **Role:**

- Responsible for the planning, implementation, and monitoring of social responsibility projects and activities that support students' social awareness, social responsibility, and community engagement skills at YUFM. In this context:
- Structures, updates, and diversifies social responsibility projects related to the undergraduate medical education program (community-based education, activities targeting disadvantaged groups, public health-based projects, etc.).

- Defines principles and processes aimed at increasing student participation in social responsibility projects and ensures a balanced distribution of projects across years/phases.
- Supports social responsibility and community-based education components in alignment with competencies such as “social awareness and participation,” “health advocacy,” and “community-based education” included in the YUFM-UGMEP program outcomes..

Relationships:

- Contributes to the PDC regarding strategic priorities and project proposals related to community-based education and social responsibility initiatives.
- In collaboration with the CC, develops recommendations on the positioning, distribution across phases/program stages, and integration of social responsibility projects within the curriculum.
- Works in cooperation with the CC, phase coordinators, and department educational coordinators to ensure that social responsibility activities are planned in alignment with phase course schedules.
- Contributes to the PDE in the collection and evaluation of data concerning the competencies gained by students through social responsibility projects and the feedback received on these projects.
- Works jointly with the SEB in generating indicators and evidence related to social responsibility and community engagement for accreditation and self-evaluation reports.

### 3.2.6. Academic Program Booklet Commission (APB-C)

Role:

- Responsible for the preparation, updating, and holistic monitoring of the Academic Program Booklets of the Yeditepe University Faculty of Medicine Undergraduate Medical Education Program (YUFM-UGMEP).
- Compiles and organizes course/learning activity descriptions, learning objectives, assessment and evaluation methods, and related program outcome mappings at the phase, committee, and clerkship levels in a standardized format.
- Ensures that curriculum changes (addition/removal of courses/activities, content updates, workload revisions, etc.) are reflected in the Academic Program Booklets in a timely and consistent manner.
- Structures the Academic Program Booklets as an up-to-date and accessible source of information for students, faculty members, accreditation evaluators, and external partners.

Relationships:

- Works closely with the CC to incorporate the reflections of curriculum decisions at the phase/committee/clerkship levels into the Academic Program Booklets.
- Collects data from the CC, phase coordinators, committee boards, and department educational coordinators to standardize updates regarding content, workload, exam types, and learning objectives.
- Cooperates with the A&EC to ensure that the types and weightings of course and examination assessments are accurately and currently represented in the booklets.

- With the contributions of the BFMAB and DoME, supports the expression of learning objectives at the course/activity level in alignment with program outcomes, NQF-HET, and NCEP.

### 3.2.7. Web Page Commission

#### Role:

- Responsible for structuring the educational web page and online documentation of YUFM in an up-to-date, accessible manner and in compliance with accreditation requirements.
  - Ensures the sustainability of the following requirements:
  - visibility of mission-vision, education, research, and service-related strategic goals on the web page,
  - online access to the educational program, aims and objectives, program outcomes, and Academic Program Booklets,
  - transparent sharing of documents related to accreditation and self-evaluation processes.

Within this scope:

- Ensures that core documents such as the faculty's aims and objectives, program outcomes, structure of the educational program, boards/commissions, regulations and directives, and accreditation documents are current and accessible on the web page.
- Coordinates the timely and consistent reflection of Academic Program Booklets, phase schedules, examination calendars, and student information texts on the web page.
- Contributes to organizing the web page content so that it can be used as evidence documentation during TEPDAD/UTEAK visits and interim self-evaluation processes.

#### Relationships:

- With the Dean's Office and Faculty Secretariat: works in alignment with the faculty's institutional web policies and the university web unit.
- With the PDC, CC, A&EC, PDE, SEB, and APB-C: ensures that reports, decisions, and official documents produced by these bodies are presented on the web page accurately, up-to-date, and in an integrated manner.
- With the Medical Education Secretariat: cooperates in updating web content, timely publication of announcements, and centralized monitoring of documentation processes.

### 3.2.8. Directive and Regulation Commission (DRC)

#### Role:

- Responsible for updating, integrating, and ensuring compliance with Yeditepe University regulations of directives, directive annexes, guidelines, and internal regulations related to undergraduate medical education at YUFM (e.g., examination directives, assessment and evaluation principles, committee/clerkship operating procedures, advising and elective course directives). In this context:
- compiles and updates faculty-level directives related to education and, when necessary, prepares proposals for amendments concerning overlapping or outdated provisions;

- ensures the compliance of directives with university-level regulations, particularly the Yeditepe University Associate and Undergraduate Education and Examination Regulation, and submits proposals to the Senate/University administration through the Dean's Office when required;
- ensures that the current versions of all directives and regulations are easily accessible to students and educators (in coordination with the Web Page Commission).

Relationships:

- With the Dean's Office, the Faculty Board (FB), and the Faculty Executive Board (FEB): Works within the academic and administrative approval processes for newly drafted directives and proposed amendments.
- With the Faculty Self-Evaluation Board (SEB): Collaborates to ensure the currency of education-related regulatory texts and their alignment with standards within accreditation and self-evaluation processes; strengthens the normative basis for efforts addressing the need for a "centrally managed documentation system."
- With the Website Commission: Coordinates the transparent and accessible publication of all current directives and regulatory documents via the web..

### 3.2.9. Working Groups

Role:

- Established as temporary structures, when deemed necessary by the Program Development Council (PDC), to work in depth on a specific topic, develop recommendations, or design and pilot a new practice (e.g., a Task-Based Learning Working Group).
- Their terms of reference, duration, and expected outputs are defined by the PDC; the working group is dissolved upon completion of its mandate.

Relationships:

- Operates under the PDC; submits its reports, recommendations, and draft documents to the PDC.
- Collaborates, as needed, with the Curriculum Board (CB), the Assessment & Evaluation Board (A&E Board), the Coordinators Council (CC), the Bologna Process Faculty of Medicine Advisory Board (BP-FMAB), and/or relevant academic departments.
- Ensures, through the PDC, that developed recommendations are placed on the agenda of the relevant permanent board/commission.

## 4. Implementation Level

### 4.1. Main Bodies, Roles, and Relationships

#### 4.2. Coordinators Council (CC)

Role:

- The Coordinators Council (CC) is the primary body responsible for the day-to-day operation of the Yeditepe University Faculty of Medicine (YUFM) Undergraduate Medical Education Program, cross-phase coherence, and the main coordination of implementation. It brings together Phase I-VI coordinators and deputy coordinators, specialized program coordinators and deputy coordinators, student representatives, and—when needed—other relevant partners.

Within this scope, the CC:

- Plans and monitors the overall functioning and annual calendar of the academic year (the annual distribution of phases, committee/clerkship blocks, exams, make-up and resit processes).
- Ensures cross-phase horizontal and vertical integration, considers student workload balance and assessment intensity, and makes arrangements to prevent conflicts and overload.
- Provides operational coordination among Phase Coordinators, specialized program coordinators (ICP, PBL, TBL, ECE, electives, etc.), and the External Training Institutions Collaboration Coordination Office.
- Addresses implementation problems, logistical constraints, and urgent feedback from students and faculty at first instance; produces solutions or resolves issues in collaboration with relevant bodies (CB, A&E Board, Program Evaluation Board (PDE), PDC, Dean's Office).
- Contributes to informing, guiding, and supporting students throughout the educational process; supports regular communication with student representatives through phase coordinators..

#### Relationships:

- With the PDC: Serves as an implementation bridge by reflecting the PDC's strategic directions (e.g., strengthening integration, increasing community-based education components, balancing assessment load) in the daily planning of the academic year. Provides the PDC with concise status and needs information from the field.
- With the CB: Coordinates the translation of curriculum-level decisions (new block/clerkship, content changes, new PBL/TBL implementations, etc.) into phase- and week-based timetables; reports implementation challenges back to the CB.
- With the A&E Board: Jointly plans the annual schedule, exam types, and workload during exam weeks for phase, committee, and clerkship assessments; collaborates in resolving logistical and operational issues arising in assessment implementation.
- With the PDE: Coordinates the collection of student and faculty feedback and the sharing of results with relevant coordination units.
- With Phase Coordinators, Specialized Program Coordinators, and the External Training Institutions Collaboration Coordination Office: Functions as the common working platform of all these executive bodies; takes decisions while safeguarding cross-phase and inter-institutional alignment.
- With the Department of Medical Education (DoME): Communicates needs related to teaching methods, assessment practices, and faculty development from a cross-phase holistic perspective; facilitates the dissemination of DoME's medical education expertise into practice.
- With Student Representatives: Periodically listens to students' feedback on the education program; ensures that student representation is reflected in council decisions in a regular and structured manner..

### **4.3. Auxiliary Bodies, Roles and Relationships**

#### **4.3.1. Phase Coordinators and Deputy Coordinators**

- Develops and updates the phase-specific education plan, timetable, assessment calendar, and key academic dates (committee/clerkship start-end dates, exams, make-ups, etc.).

- Ensures that committees and/or clerkships within the phase are balanced and coherent in terms of learning objectives, content, teaching methods, and workload.
- Follows students' phase-specific academic processes (attendance, assessment implementation, excused absences, make-up processes, etc.); when required, liaises with relevant boards and commissions (CB, A&E Board, CC, etc.).
- Contributes to the program development cycle by conveying phase-level implementation issues, feedback, and improvement proposals to relevant bodies (CB, A&E Board, PDE, PDC)..

#### **4.3.2. Specialized Program Coordinators and Deputy Coordinators**

- Are responsible for the implementation, coordination, and evaluation of specialized programs such as Introduction to Clinical Practice (ICP), Problem-Based Learning (PBL), Scientific Research and Project (SRCP), Early Clinical Exposure (ECE), and Elective Courses.

#### **4.3.3. Committee Coordination Committee (CCC) and Clerkship Coordination Committee (CICC):**

- For each committee—under the leadership of one of the deputy coordinators and with the participation of faculty members teaching within that committee—responsible for planning the committee structure, content, distribution of teaching/learning activities, and integration (horizontal/vertical).
- Plans and runs the committee timetable, assessment calendar, and committee-specific assessment components.

#### **4.3.4. Academic Department Education Coordinators**

- Plans and updates the educational objectives, content, and assessment methods of courses and clerkships delivered by their academic department.
- In collaboration with committee and clerkship boards, ensures the positioning and integration of departmental content within the phase/overall curriculum.

#### **4.3.5. External Training Institutions Collaboration Coordination Office**

- Responsible for planning, implementing, and monitoring collaborations with external training institutions (training and research hospitals, public/private healthcare institutions, family health centers, community health centers, etc.) where YUFM students complete a portion of their training.
- Monitors capacity elements under protocols and agreements with external institutions, such as student numbers, physical space, clinical case diversity, and faculty numbers; develops proposals for quota and planning changes when needed.

### **5. Scientific Advisory and Technical Support Structure**

#### **5.1. Department of Medical Education (DoME)**

Role:

- Provides expert support to all components of the faculty in educational sciences and medical education.
- Contributes to the work of specific units listed in the Faculty of Medicine Medical Education Organizational Chart with at least one active member per unit.

- Provides consultancy and training in learner-centered teaching methods, assessment methods and tools, and program evaluation.
- Delivers faculty development programs.
- Manages the collection of student and faculty feedback; in this context, organizes and analyzes surveys and, in collaboration with the PDE, ensures that results are shared with all relevant units and components as needed.

Relationships:

- Is represented within the PDC and participates in strategic education decisions.
- Collaborates laterally with the CB, A&E Board, PDE, and the CC.
- Provides guidance to the CC, phase coordinators, deputy coordinators, specialized program coordinators, committee boards, and academic department education coordinators in the processes of drafting/updating learning objectives, integration, and the selection and design of teaching and assessment methods.

## 5.2. Medical Education Secretariat

Role:

- The unit supporting the administrative and logistical functioning of boards, commissions, and coordination units related to undergraduate medical education.

Within this scope:

- Manages meeting organization, correspondence, and decision records of the PDC, CB, A&E Board, PDE, CC, and other bodies.
- Supports the proper storage and dissemination (to stakeholders) of Academic Program Booklets, assessment calendars, board decisions, and other education-related documents in an up-to-date and orderly manner.
- Contributes to the effective use of the Education Management System (EMS) (student/faculty announcements, exam notices, etc.).

Relationships:

- Works in coordination with the Dean's Office, DoME, and the Faculty Secretariat.
- Provides administrative support to the PDC, CB, A&E Board, PDE, CC, DoME, and other educational bodies.

## 6. Student, Faculty Member, Alumni, and External Partner Representatives

Role:

- Students (pre-clinical, clinical, and intern), faculty members, alumni, and external stakeholders are represented in the PDC, CB, A&E Board, PDE, SEB, CC, and relevant working groups.
- BP-FMAB: The candidacy of a current student of the relevant program and an alumnus/alumna—if they so request—for board membership is proposed by the Dean's Office to the Rectorate.
- They contribute directly through their views and feedback in program evaluation, curriculum revision, strategy development, and accreditation processes.

## 7. Other Components

### 7.1. Internationalization Commission

Role:

- The commission supporting internationalization strategies in YUFM undergraduate medical education and coordinating student and faculty mobility and international collaborations. Within this scope:

- Plans and monitors incoming/outgoing student and faculty mobility in alignment with the education program within international exchange frameworks (e.g., Erasmus, bilateral agreements).
- o Contributes to the development of opportunities for international joint education, clerkships, and elective programs.

Relationships:

- Works with the Dean's Office in line with the faculty's internationalization goals.
- Engages in consultancy exchange with DoME regarding how internationalization is reflected in educational processes.

## 8. Inter-Body Relationships and Workflow

This section explains the collective way of working as a cycle extending from strategy to implementation and from evaluation to improvement.

### 8.1. Top-Down: From Strategy to Implementation

1. Sources of Strategic Input
  - University and faculty strategic plans
  - TEPDAD/UTEAK standards; UÇEP/UYYB; TYYÇ
  - Accreditation evaluation and recommendation reports (ÖDR, Interim ÖDR, Development Reports)
  - Program evaluation data (PDE)
  - Student, faculty, alumni, and external stakeholder feedback
  - And other relevant sources
2. Dean's Office, FB and FEB Level – Institutional Framework
  - Determines the fundamental principles and policies related to education.
  - Approves changes and improvements proposed by the PDC and other education bodies.
3. PDC Level – Strategic Interpretation and Decision
  - Analyzes educational needs and evaluation results.
  - Defines the vision, priorities, and principles for program development.
  - Establishes temporary working groups, when needed, to work in depth on specific topics and develop recommendations.
  - Defines work themes and areas of responsibility for the main bodies:
    - To the CB → program structure, content, integration
    - To the A&E Board → development of the assessment system
    - To the PDE → program evaluation in priority areas
    - To the CC → implementation-level arrangements and coordination
4. BP-FMAB – Providing Input to the Faculty's Institutional Identity and Educational Program Goals
  - Reviews the institution's aims and objectives at regular intervals to support planning aligned with mid- and long-term development strategies and to provide perspective and advice on the curriculum and research.
  - Reviews the alignment of Program Outcomes (PÇ) with national/international qualifications and, when necessary, proposes new

outcomes/updates. On behalf of the BP-FMAB, Bologna Coordinators conduct the work of aligning Program Learning Outcomes with course learning outcomes and with teaching-learning and assessment methods within the Bologna Process, in collaboration with phase coordinators.

5. Main Bodies / Focused Boards Level – Design, Planning, and Evaluation
  - CB: Revises the education program, curriculum, phase/clerkship-based structure, integration, and workload.
  - A&E Board: Plans or updates exam types, assessment calendar, OSCE/OSPE structure, evaluation criteria, and exam analysis processes.
  - PDE: Designs in-depth program evaluation studies (surveys, focus groups, etc.) in the designated areas.
  - SEB: Conducts accreditation and quality assurance processes. The self-evaluation reports it prepares serve as core reference documents in strategic decision-making.
  
6. Auxiliary Bodies / Focused Commissions Level – Deepening Design and Planning
  - UÇEP Alignment Commission: Conducts UÇEP content alignment analysis of the YUFM undergraduate program within the scope of current UÇEP alignment and proposes necessary curriculum revisions to the CB. Contributes to the alignment of program learning outcomes and course learning objectives conducted by the BP-FMAB by mapping national competencies/qualifications defined in UÇEP to YUFM program learning outcomes.
  - PBL Commission: Plans and coordinates the standardized delivery of PBL sessions in alignment with program outcomes, together with objectives, learning targets, scenarios, and assessment dimensions.
  - TBL Commission: Plans the structuring of Task-Based Learning activities and their integration into the clerkship/program continuum; supports students' competency development through clinical and community-based tasks.
  - SRCP Commission: Plans and coordinates research-education-focused courses and activities and supports initiatives that increase students' participation in research processes.
  - SSP Commission: Plans, coordinates, and supports student participation in social responsibility and community-based education projects and activities.
  - Academic Program Booklet Commission (APB-C): Prepares and updates Academic Program Booklets by compiling phase/committee/clerkship-level information in line with decisions and data from the CB, A&E Board, and CC, and ensures sharing with relevant stakeholders.
  - Website Commission: Plans and coordinates the up-to-date, accessible, and transparent presentation—online—of the education program, aims and objectives, program outcomes, boards/commissions, regulations and directives, and accreditation-related information.
  - Directive and Regulation Commission (DRC): Coordinates the drafting and updating of directives, guides, and other regulatory texts related to

undergraduate medical education; ensures that students' and faculty members' rights, duties, and responsibilities are defined in a manner aligned with legislation, clear, and accessible..

7. Implementation Level – CC
  - The CC ensures cross-phase coherence and integrity in implementation.
  - The CCC, CICC, and academic department education coordinators plan and execute timetables, methods, and assessments in line with CB, A&E Board, and CC decisions.
  - Faculty members deliver all components within the education program (PBL, small-group teaching, case discussions, simulation, community-based education, etc.).
8. Lateral Consultancy and Support – Design, Planning, and Implementation
  - DoME: Provides medical education expertise and consultancy across all processes.

## **8.2. Bottom-Up: Monitoring, Evaluation and Feedback**

1. Field Data Collection
  - Student surveys and focus group interviews
  - Feedback from educators (academic staff)
  - Opinions of graduates and external stakeholders (training and research hospitals, employers, etc.)
  - Examination analyses and item statistics
  - Accreditation visits and evaluation reports (TEPDAD/UTEAK)
2. Analysis and Evaluation Processes of the Bodies
  - Program Evaluation Board (PEB): conducts a comprehensive evaluation of the program and reports strengths and areas open to improvement.
  - Assessment and Evaluation Board (AEB): evaluates examination results and item analyses; develops improvement proposals for the assessment and evaluation system.
  - Curriculum Board (CB): reviews feedback received at the level of terms and clerkships; works on curriculum structure, integration, workload and teaching methods.
  - Faculty Self-Evaluation Board (FSEB): interprets all these data within the framework of accreditation and quality assurance; prepares self-evaluation and development reports.
3. Feedback to the Program Development Board and/or Faculty Boards
  - The PEB, CB, AEB, Bologna Process Faculty of Medicine Advisory Board (BFMAB) and FSEB share their findings with the Program Development Board (PDB) and the Dean's Office / Faculty Board (FB) / Faculty Executive Board (FEB).
  - The PDB makes new strategic decisions based on this evidence.
  - The BFMAB shares its findings with the Dean's Office / FB / FEB.
  - The FB and FEB approve the proposed changes and improvements at the institutional level..

Through this structure, program development operates as a continuous and multi-partner cycle consisting of the stages of planning → implementation → evaluation → improvement.

## 9. Collective Working Approach

### 9.1. Fundamental Principles

- **Multi-partner participation:** The Dean's Office, basic and clinical sciences, Department of Medical Education (DoME), students, graduates and external stakeholders take part together in many boards.
- **Sharing of authority and responsibility:** Strategy (PDB) – design (CB, AEB, BFMAB) – implementation (Coordinators Board – CoB) – evaluation (PEB, FSEB) complement each other.
- **Evidence-based decision-making:** Decisions are built upon program evaluation data, examination analyses, accreditation feedback and stakeholder opinions.
- **Continuous renewal:** Program outcomes, curriculum content, teaching-learning methods and the assessment system are updated at regular intervals through systematic processes (for example, PO-2015 and PO-2021 revisions, alignment with National Core Education Program – UÇEP 2020, BFMAB Bologna Course Forms).
- **Transparency and accessibility:** Mission, vision, aims and objectives, program outcomes, educational and research goals are presented to all stakeholders openly through the faculty website and Academic Program Booklets.

### 9.2. Meeting and Decision-Making Processes

At Yeditepe University Faculty of Medicine, all boards, commissions and coordinators related to education conduct and document their meetings and decision-making processes in a standardized manner. This standard workflow has been adapted to all structures based on the decision format used by the Program Development Board (PDB).

- Conduct of Meetings:
  - Boards and commissions meet at the frequency specified in their terms of reference and whenever necessary.
  - For each meeting, the meeting date, meeting number, time interval and venue are recorded.
  - Agenda items are determined prior to the meeting and, whenever possible, communicated to participants in advance.
  - Participants attending the meeting are listed in the minutes; observers/guest participants, if any, are indicated separately.
- Decision-Making and Documentation:
  - Decisions taken for each agenda item are recorded in a clear and comprehensible manner.
  - Whenever possible, each decision is linked to the relevant UTEAK/TEPDAD standard and/or institutional strategic objective (e.g., Structure of the Program – 2.2; Integration – 2.4).
  - For each decision, at least the following elements are specified in the minutes:
    - Brief text of the decision (what will be done?)

- Rationale of the decision (why?; program evaluation findings, student/educator feedback, external stakeholder opinions, etc.)
- Board/commission/coordinator and/or person responsible for implementation
- Proposed timeline for implementation
- If necessary, monitoring and feedback method (which body/person will review and when?).
- Communication and Monitoring of Decisions:
  - Decisions taken in the boards are communicated to the relevant units and stakeholders (Dean's Office, other boards, commissions, coordinators, DoME, Web Page Commission, etc.) via official correspondence, e-mail and the Electronic Document Management System (EDMS).
  - The outcomes and impacts of implemented decisions are periodically reviewed in the relevant board/commission; new arrangements are made when necessary.
  - Significant decisions taken in the PDB, CB, AEB, PEB, FSEB, CoB and other bodies are stored as evidence documents for accreditation, self-evaluation and development reports and are documented for use when required.

## Annex: Standard Meeting and Decision Record Format

### BOARD / COMMISSION / COORDINATORSHIP MEETING MINUTES

Name of the Board / Commission / Coordinatorship:

Date:

Meeting No:

Time:

Venue:

Members Attending the Meeting:

Members Absent with Excuse (if any):

#### AGENDA ITEMS:

- 1.
- 2.
- 3.
- ...

UTEAK – 2025 Standards Related to Decisions

(to be specified separately for each decision; examples):

- Structure of the Program – 2.2
- Integration – 2.4
- Evaluation of the Educational Program – 2.9
- Assessment of Student Achievements – 2.8
- Access to Information Resources – 5.3
- Quality Assurance and Continuous Quality Improvement – 1.2
- Organization of Education – 6.1
- etc.

#### DECISION 1

Agenda Item No:

Relevant UTEAK 2025 Standard(s):

- (e.g., Structure of the Program – 2.2; Integration – 2.4; ...)

Subject / Title of the Decision:

(Short title summarizing what has been decided)

Decision Text:

(What will be done? How will it be done? Within which scope?)

Rationale / Basis:

- Which Action Plan (or Development Area) (if any: AP 1, AP 8, AP 9, AP 10, etc.)
- Which report(s): (SER 2013, SER 2019, Interim SER 2022, PEB reports, student/educator feedback, etc.)
- Which need / problem/opportunity led to this decision?

**Açıklamalı [P6]:** Resmî kurul ve komisyon tutanakları için İngilizcede yaygın ve standart kullanım **meeting minutes** ifadesidir.

Responsible Board / Commission / Coordinatorship / Person:  
(e.g., CB, AEB, PEB, CoB, YYC, Web Page Commission; person-based if necessary)

Units to Cooperate With (if any):  
(e.g., DoME, Dean's Office, Medical Education Secretariat, external stakeholders, student representatives)

Implementation Timeline:  
(Start date, end date or review time; clear statements such as "to enter into force in the 2025-2026 academic year")

**Monitoring and Evaluation:**

- Who will monitor? (e.g., PEB, FSEB, relevant board)
- When / at what frequency? (e.g., at the end of each academic year, with interim evaluation)
- Through which tools? (survey, focus group, performance indicators, web access data, etc.)

**Communication and Announcement:**

- Units to be informed: (Dean's Office, relevant boards, departments, students, etc.)
- Announcement channels: (official correspondence, e-mail, web page, update of directives/APK, etc.)

**Relation with Development Area (if any):**

- Development Area No and Title: (e.g., DA 8 – Student Duties and Responsibilities)
- Expected outputs within the scope of this decision:
- (e.g., "preparation of the directive on preclinical student duties and responsibilities and making it accessible via the web")

**DECISION 2**

(to be repeated in the same structure as Decision 1)

**SIGNATURES**

Chair:

Members:

Date: