

# Committee for the Evaluation of Medical Schools In Israel

Tel-Aviv University
Sackler School of Medicine

**Evaluation Report** 

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### Chapter 1 - Background

At its meeting on March 8<sup>th</sup>, 2005 the Council for Higher Education (CHE) decided to evaluate study programs in the field of Medicine during the academic year 2005-2006. Following the decision of the CHE, the Minister of Education, who serves ex officio as a Chairperson of the CHE, appointed a committee consisting of:

- *Prof. Irun R. Cohen* Department of Immunology, Weizmann Institute of Science. Committee Chairperson.
- *Prof. Haim Bitterman* Chairman of Medicine, Carmel Medicine Center, Faculty of Medicine, Technion Israel Institute of Technology.
- Prof. Dina Ben-Yehuda Director of the Hematology Department, Hadassah University Hospital, Faculty of Medicine, The Hebrew University of Jerusalem.
- Prof. Chaim-Howard Cedar The Institute of Microbiology, Faculty of Medicine, The Hebrew University of Jerusalem.
- Prof. Menahem Fainaru Sackler Faculty of Medicine, Tel-Aviv University.
- *Prof. Shimon Glick* The Joyce and Irving Goldman Medical School, Ben-Gurion University of the Negev.
- Prof. Howard L. Weiner Department of Neurology, Harvard Medical School, Harvard University, Massachusetts, USA.

Ms. Chen Hadad - Coordinator of the Committee on behalf of the Council for Higher Education.

Within the framework of its activity, the Committee was requested to 1:

- 1. Examine the self-evaluation reports, submitted by institutions that provide study programs in Medicine and to conduct on-site visits at those institutions.
- Present the CHE with reports for the evaluated academic units and study programs - a separate report for each institution, including the Committee's findings and recommendations.
- 3. Submit to the CHE a separate report regarding the examined field of study within the Israeli system of higher education.

The entire process was conducted in accordance with the CHE's Guidelines for Self-Evaluation (of October 2005) and on the basis of the Specific Questions for the Fields of Medicine which were compiled by the Committee.

<sup>&</sup>lt;sup>1</sup>The Document with Terms of Reference of the committee is attached as Appendix 1

### **Chapter 2 - Committee Procedures**

The Committee held its first meeting on December 27, 2006, during which it discussed fundamental issues concerning the medical schools in Israel and the quality assessment activity.

During the months of June-July 2006, the Committee members received the self-evaluation reports, and in September 2006, they began to hold discussions regarding these reports.

In November-December 2006 the Committee members conducted on-site visits of 2 days at each institution. During the visits, the Committee met with officials of each institution as well as faculty and students. The timetable set for visits to the various institutions is attached as **Appendix 2**.

In accordance with the Committee's request, each institution publicized in advance the Committee's visit and invited academic staff members, administrative staff and students to meet with the Committee to express their opinions concerning the study program of the Medical School.

# This report deals with the Sackler Medical School, Tel-Aviv University.

The committee's visit to Tel-Aviv University took place on November 13-14, 2006. In order to avoid the appearance of conflict of interests, Prof. Fainaru who has had professional relationship with the assessed institution, did not participate in the evaluation.

The schedule of the visit, including the list of participants representing the institution, is attached as **Appendix 2**.

The committee members thank the management of Tel-Aviv University and the Sackler School of Medicine for their self-evaluation report and for their hospitality towards the committee during its visit to the institution.

# Chapter 3 - Evaluation of Tel-Aviv University - the Sackler School of Medicine

The evaluation is based on the information and the data provided in the self-evaluation report, the committee's visit to the institution and the general impressions of the committee.

### 3.1. Background

Tel-Aviv University includes nine faculties with 70 departments and over 29,000 students in undergraduate programs and secondary and tertiary degree programs. The School of Medicine was established in 1964 and operates within the organizational framework of the Sackler Faculty of Medicine of Tel-Aviv University. In addition to the Sackler School of Medicine, The Faculty of Medicine includes additional schools as School of Continuing Medical Education (CME), School of Dental Medicine, The Stanly Steyer School of Health Proffesions, The Dr. Miriam and Sheldon G. Adelson Graduate School of Medicine and the School of Public Health.

The Sackler Faculty of Medicine also offers the New York State/American Program - The program is chartered by the State of New York and accredited by the State of Israel, offers an opportunity for qualified U.S. citizens or permanent residents to pursue a four-year medical education program with a curriculum and course of studies patterned after U.S. medical schools.

Altogether, the Faculty of Medicine includes approximately 1000 teachers in preclinical departments and in affiliated clinical departments and institutes, located in 7 major medical centers, six psychiatric hospitals, and a large rehabilitation center. The 7-year course of studies leading to the M.D degree (including a year of rotating internship) is spent in the Sackler School of Medicine and in its affiliated hospitals.

### 3.2. General Observations

- The Committee was positively impressed by the self-evaluation report presented by the Institution. It was evident that considerable effort had been made to deal with the proposals for change that were put forward in the previous evaluation round. The committee was favorably impressed by the positive and energetic spirit of the new office of the Dean, and by the intention to update and revive the organizational infrastructure and the syllabus in accordance with the developing needs and changing challenges that face the graduates of the School.
- The committee welcomes new trends in the principles of medical education, as
  presented by the Dean, which will serve as a basis for the work of the Faculty
  in the next few years. These changes, which began during the office of the

previous Dean, conform to the shifting needs of the medical school graduate: They aim at instilling skills, integration of teaching outside the hospital wards, emphasizing topics originating from the areas of social sciences and ethics in research and in medicine, and encouraging exposure and education towards basic and clinical research.

- The committee agrees with the basic concept that a large number of hospital departments should be involved in teaching. The committee was impressed by the attempt to create uniformity between the different hospitals in content and teaching strategies.
- The Medical School plans to increase the number of graduates by opening a new four-year medical studies program in parallel to the 6-year program currently running. This raises questions about the advantages and disadvantages of running two programs simultaneously. The lessons that can be learned from this experiment will have wide implications, and should be studied by all the medical schools. There is a danger that running two full-scale programs, in addition to the program for American students, might cause an unreasonable burden on the existing teaching staff. The committee understands that if this happens, the American program will be considerably reduced.

### 3.3. Admission

The committee heard with much interest about changes in the system of admission of medical students. The committee welcomes the use of evaluation of non-cognitive character traits and the significant weighting of the personality-behavioral aspect in the admission decision. The committee was told that the new practice has changed the admission profile for medical students by 20% (students who were accepted according to the old practice and are now rejected or vice versa), and that the first impressions are positive. Tools for evaluation of the new admission system should be developed in order to establish its influence on the character of the Medical School graduate over time.

### 3.4. Basic Science

The teaching of basic sciences is still problematic with reference to quality,
 relevance, and integration. The program would benefit from additional

feedback from students, not only at the end of the course, but also during the course – similar to the feedback received by the Faculty in the middle of each clinical clerkship.

- Self-study must receive greater emphasis; critical reading and scientific
  writing should be introduced at an early stage of the curriculum, and the
  students should be provided with the proper tools for continuing self-study.
- The teaching of behavioral sciences is important, and the subject needs ongoing evaluation; new ideas have been introduced by a large number of teachers, who have been involved for many years. Indeed, it is not quite clear how this program is able to function reasonably well with only one and a half positions available for the behavioral sciences.

### 3.5. Pre-Clinical Education

- The committee was favorably impressed by the process of re-examining the syllabus and of updating the contents of pre-clinical teaching. In addition, the committee was informed that emphasis is being placed on self-study; there is an effort to teach small groups and to introduce the students to critical reading and the use of data resources. In spite of this, the students still sense a lack of training in critical reading and scientific writing, and the committee hopes that the planned changes will improve this aspect. The students also feel that there is a lack of training in communication skills.
- Some of the courses, and in particular the course dealing with systems, are taught by several teachers. The students feel that the coordination of content between the different teachers is not sufficiently supervised, and that there are many superfluous repetitions.
- The committee welcomes the expanded framework of behavioral studies in the
  first three years. Nevertheless, it seems that the scope of activity is still less
  than could be desired, and that the allocation of positions does not meet the
  magnitude of the task; this impairs the ability to increase the extent and the
  depth of this important subject.
- The committee was told about a serious crisis concerning the teaching of anatomy caused by a shortage of teachers. The committee recommends that the teaching of anatomy should be combined with the teaching of imaging.
- A serious shortage of teachers of Pathology was reported to the committee.

- The testimonies of the students point to an important problem concerning the quality of some of the examination papers in the pre-clinical subjects, particularly because of the large number of questions emphasizing rotelearning and much less understanding and application. The committee recommends considering the organizing of workshops for the pre-clinical teachers in the preparation of examinations.
- Several staff members disapproved of the almost total absence of practical laboratory work during the pre-clinical studies. However, it is not clear whether students really benefit from such laboratory exercises; they would learn much more from working in research laboratories.
- The committee welcomes the readiness to encourage pre-clinical students to join research laboratories during the summer vacation and recommends expanding the number of students using this option.
- The students informed the committee that the counseling services for the preclinical curriculum is insufficient.

### 3.6. Clinical Education

- The committee applauds the efforts made by the Faculty institute uniform standards in the clinical studies taught in the many and scattered hospital departments; this is accomplished through ongoing evaluation by medical colleagues while courses are in progress at the various clinical departments. Nevertheless, the students feel that a problem still exists regarding standardization of the content and the uniformity of the clinical courses. This problem is particularly prominent in the sixth year. The committee recommends considering additional ways of working with the clinical tutors before and during the clinical courses aimed at improving the uniformity of teaching and student evaluation.
- The Faculty relies to a significant degree on the work of many clinical teachers, who receive no academic recognition and/or other compensation. This state of affairs demands attention. The Medical School must develop ways of granting academic recognition to excellent teachers, who do not necessarily fulfill the regular research criteria for promotion.
- Mentoring new staff members is important in the realm of clinical teaching, and the Committee is pleased that efforts are being made to support new staff members in their first steps.

- The students sense a lack of teaching in preventive medicine, and they stated that there is no personal counseling available during the clinical years.
- The positions of assistant doctors during the clinical years should be increased, as discussed in the General Recommendations.

### 3.7. Ambulatory Care

- The committee was also favorably impressed by the intention to expand teaching in ambulatory frameworks, since a significant proportion of present-day medical work is ambulatory. However, in spite of the awareness that the share of teaching in the ambulatory sector must be raised, the situation still calls for improvement; the clinical heads of the medical school concur.
- Due to the lack of clinical beds for some of the subjects, bed-side teaching is sometimes carried out with groups of students that are too large. The committee understands this to be the case particularly in Pediatrics and Psychiatry. The situation should be eased by transferring more teaching to the ambulatory sector. This, however, will require academic compensation to those who teach outside the hospital.
- The committee is generally concerned by the limited amount of teaching in ambulatory settings. The scope of ambulatory teaching is acceptable in Gynecology and Obstetrics, but almost non-existent in all the other subjects.
   The expanding development of ambulatory medicine requires the development of methods for teaching in ambulatory settings.

### 3.8. Research

- The Committee welcomes the initiative of the Dean to encourage research in the hospitals affiliated with the School. The committee heard with interest about the tools that are being developed to supervise and support the research projects of young faculty, and about the idea to grant academic recognition to successful clinical teachers who may not be doing research.
- The Committee supports the view of the Dean that allocation of scholarships
  to students should be encouraged to enable them to perform research projects
  during the summer break in Faculty research laboratories in order to promote
  exposure and interest in research.
- The scholarships available to students towards advanced degrees in the Faculty of Medicine are limited in scope compared to other institutions in

Israel and to the Faculty of Life Sciences on the same campus. An attempt should be made to provide the support needed to attract excellent students to the Medical School.

- The Committee applauds the establishment of an Ethics Committee that focuses on ethical offenses by staff members, and about the requirement for each staff member to attend a course on research ethics. The Faculty plans to inculcate these topics into the teaching of students through all their years of study. The committee was informed that all candidates for staff promotion take part in a one-day ethics workshop on three topics: The relationship between doctor and patient, medical colleagues and research management.
- The Committee was impressed by the quality of the MD/PhD students and by the investment by the faculty in this program. The very demanding program requires completion of the thesis within three years, in addition to completing courses totaling 24 credit points and achieving a minimum average grade of 90 in the first year. In our view, this threshold is exaggerated and it causes some students to choose courses that do not satisfy their real research needs, but do keep their grade average high. Solutions to this problem must be found.

### 4.9. Infrastructure

- From the testimonies of the students it appears that some of the lecture halls, and in particular that of the third year, are not suitable for the widespread use of computers and their connection to wireless networks. Reports from students indicate crowding in some of the lecture halls; this points to a real difficulty in the expected expansion of the number of students and the opening of the four-year program.
- It seems that cuts in the library budget along with the increase in prices of books and journals and the expected increase in the number of students will reduce the library's ability to provide services at a proper standard. The committee was told of a lack of computer work-stations in the library.
- It was reported to the committee that no preparations have been made to provide animals in the Animal House raised under SPF (Specific Pathogen Free) conditions; this is not compatible with quality research.

### **Chapter 4: Summary and Recommendations**

### 1. Faculty

- 1) A serious effort is required to secure mentoring of new staff members, not only in time and resources, but also in counseling and guidance.
- 2) It is imperative to find ways of compensating teachers, through appointments and promotion, who supply a considerable part of the teaching. This is especially true and in the ambulatory sector where the possibility to engage in research and publish is limited. The heads of the Institution are aware of this need, but this awareness has not yet found concrete expression for various reasons, among them the policy of the University, which stands above the Medical Faculty.
- 3) The Faculty is praised for obliging its members to partake in a workshop on research ethics

### 2. Research

- 1) The possibilities for students to take part in a summer laboratory project should be increased, so as to encourage their research experience.
- 2) The MD\PhD program needs higher stipends and more flexibility.
- 3) Designated time should be made evadible for the MD thesis.
- 4) For historical reasons, the available financial conditions for third degree students in the Health Science Faculty are inferior to those of third degree students in the Life Sciences Faculty. These differences impair the ability of the Faculty to compete with the Life Sciences Faculty in attracting students. This observation is made in spite of our being impressed by the very high quality of the Health Science Faculty doctoral students.

### 3. Students

- 1) The committee supports the changes in admission procedures.
- 2) More initiated contact should be activated between staff counselors and students. Although counselors are available, the students feel a need for counseling and guidance during their studies, and in particular at transition stages, for example before the clinical years.

### 4. Physical Infrastructure

Infrastructure improvements are required in the Animal House (SPF) and in some of the lecture halls.

Signed By:

Prof. Irun Cohen Chairperson

D. Ben Jehuda

Prof. Dina Ben-Yehuda

Prof. Haim Bitterman

Prof. Howard Chaim Cedar

Mul ( Wenn

Prof. Howard L. Weiner

Prof. Shimon Glick

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- Prof. Dina Ben-Yehuda Director of the Hematology Department, Hadassah University Hospital, Faculty of Medicine, The Hebrew University of Jerusalem.
- *Prof. Chaim-Howard Cedar* The Institute of Microbiology, Faculty of Medicine, The Hebrew University of Jerusalem.
- Prof. Menahem Fainaru Sakler Faculty of Medicine, Tel-Aviv University.
- *Prof. Shimon Glick* The Joyce and Irving Goldman Medical School, Ben-Gurion University of the Negev.
- Prof. Howard L. Weiner Department of Neurology, Harvard Medical School, Harvard University, Massachusetts, USA.

Ms. Chen Hadad - Coordinator of the Committee on behalf of the Council for Higher Education.

Within the framework of its activity, the Committee was requested to<sup>1</sup>:

- 1. Examine the self-evaluation reports, submitted by institutions that provide study programs in Medicine and to conduct on-site visits at those institutions.
- 2. Present the CHE with reports for the evaluated academic units and study programs a separate report for each institution, including the Committee's findings and recommendations.
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### Chapter 2 - Committee Procedures

The Committee held its first meeting on December 27, 2006, during which it discussed fundamental issues concerning the medical schools in Israel and the quality assessment activity.

During the months of June-July 2006, the Committee members received the self-evaluation reports, and in September 2006, they began to hold discussions regarding these reports.

In November-December 2006 the Committee members conducted on-site visits of 2 days at each institution. During the visits, the Committee met with officials of each institution as well as faculty and students. The timetable set for visits to the various institutions is attached as **Appendix 2**.

In accordance with the Committee's request, each institution publicized in advance the Committee's visit and invited academic staff members, administrative staff and students to meet with the Committee to express their opinions concerning the study program of the Medical School.

This report deals with the Ruth and Bruce Rappaport Faculty of Medicine - Technion, Israel Institute of Technology.

The committee's visit to the Technion took place on November 15-16, 2006. In order to avoid the appearance of conflict of interests, Prof. Bitterman who has had professional relationship with the assessed institution, did not participate in the evaluation.

The schedule of the visit, including the list of participants representing the institution, is attached as **Appendix 2**.

The committee members thank the management of the Technion and the Ruth and Bruce Rappaport Faculty of Medicine for their self-evaluation report and for their hospitality towards the committee during its visit to the institution.

# Appendix 1

Terms of Reference of the Committee



#### STATE OF ISRAEL

# Minister of Education Culture and Sports

November 7, 2005

To:

Professor Irun R. Cohen - Department of Immunology, Weizmann Institute of

Science

Professor Dina Ben-Yehuda - Chairperson of the Hematology Department,

Haddasah University Hospital, Faculty of Medicine,

The Hebrew University of Jerusalem

Professor Chaim Bitterman - Chairman of Medicine, Carmel Medicine Center,

Faculty of Medicine, Technion - Israeli Institute of

Technology, Haifa

Professor Chaim Cedar - Faculty of Medicine, The Hebrew University of

Jerusalem

Professor Menahem Fainaru –

Professor Shimon Glick -

Sakler Faculty of Medicine, Tel-Aviv University
The Joyce and Irving Goldman Medical School,

Ben-Gurion University of the Negev

Professor Howard L. Weiner -

Harvard Medical School, Harvard University,

Boston Massachusetts, U.S.A

### Esteemed Professors,

I hereby appoint you as members of the Council for Higher Education's (CHE) Committee for the Evaluation of Medicine Study-programs (that have already received authorization) within institutions of higher education in Israel.

You are kindly requested to operate in accordance with the Appendix to the Terms of Reference of Evaluation Committees (study-programs), which is attached to this Terms of Reference document.

The Committee is requested within the framework of its activity to:

- 1. Examine the self-evaluation reports which shall be submitted by the institutions that provide study-programs in Medicine and hold on-site visits to those institutions.
- 2. Present the CHE- by January 2007 with final reports regarding the evaluated academic units and study-programs- a separate report for each institution including the Committee's findings and recommendations, together with the institutions' responses to the reports.

Within the framework of the final reports, the Committee is requested to refer to the following topics, among others, in relation to each of the study-programs:

1. The goals and aims of the evaluated academic unit and study-programs.

- 2. The study-program and its standard.
- 3. The academic staff.
- 4. The students.
- 5. The organizational structure both academic and administrative of the academic unit and study-program.
- 6. The broad organizational structure (school/faculty) in which the academic unit and the study-program operate.
- 7. Physical and administrative infrastructure available to the study-program.
- 8. Internal mechanisms for quality assessment
- 9. Conclusions of the academic unit and the study-program.
- 10. Other topics to be decided upon by the Evaluation Committee.

In addition to its final report concerning each study program under examination, the committee shall submit to the CHE the following documents:

- 1. A report regarding its opinion as to the examined field of study within the Israeli system of higher education.
- 2. A proposal of standards for studies in Medicine.

Professor Iron R. Cohen shall preside over the Committee as Chairman. Ms. Alisa Elon shall coordinate the Committee's activities.

Yours sincerely,

Limor Livnat

Minister of Education, Culture and Sport Chairperson of The Council for Higher Education

cc: Mr. Naftali Weitman, Secretary of The Council for Higher Education Ms. Alisa Elon, Committee Coordinator

### Enclosure

Appendix to the Terms of Reference of Evaluation Committees (study-programs).

# Appendix to the Terms of Reference of Evaluation Committees (Study-Programs)

### 1. General

On June 3, 2003 the Council for Higher Education (CHE) decided to establish a system for quality assessment and assurance in Israeli higher education. Within this framework, study-programs are to be evaluated once in six years and institutions once in eight years. The quality assessment system came into effect in the academic year of 2004-2005.

The objectives of the quality assessment activity are:

- To enhance the quality of higher education in Israel;
- To create an awareness within institutions of higher education in Israel of the importance of this subject and to develop internal mechanisms for the evaluation of academic quality on a regular basis;
- To provide the public with information regarding the quality of study programs in institutions of higher education throughout Israel;
- To ensure the continued integration of the Israeli system of higher education in the international academic arena.

It is not the CHE's intention to rank the institutions of higher education according to the results of the quality assessment activity. The evaluation committee is requested not to make comparisons between the institutions.

### 2. The Evaluation Committee

- 2.1 The CHE shall appoint a Committee to carry out quality assessment of the study-programs.
- 2.2 A senior academic figure in the examined field shall be appointed as Chairman.
- 2.3 The Committee shall include 3 to 5 senior academic figures in the field from leading institutions in Israel and abroad. In exceptional cases, and in cooperation with the committee chairman, an authoritative figure who is not on the academic staff of an institution of higher education may be appointed as a committee member.
- 2.4 In the event that a member of the committee is also a faculty member in an institution being evaluated, he will not take part in discussions regarding that institution.

### 3. The work of the Evaluation Committee

- 3.1 The Committee shall hold meetings, as needed, before visiting the institution, in order to evaluate the material received.
- 3.2 The committee shall visit the institution and the academic unit being evaluated within 3-4 months of receiving the self-evaluation report. The purpose of the visit is to verify and update the information submitted in the self-study report, clarify matters where necessary, inspect the educational environment and facilities first hand, etc. During the visit the committee will meet with the heads of the

institution, faculty members, students, the administrative staff, and any other

persons it considers necessary.

3.3 In a meeting at the beginning of the visit, the committee will meet with the heads of the institution (president/rector, dean), the head of the academic unit and the study-programs, in order to explain the purpose of the visit. At the end of the visit, the committee will summarize its findings, and formulate its recommendations.

3.4 The duration of the visits will be coordinated with the Chairman of the Committee

according to the issue, and in any event will not be less than one day.

3.5 Following the visit, the committee will write its final report, including its recommendations, which will be delivered to the institution and the academic unit for their response. The institution's and the academic unit's response will not result in changes to the content of the Committee's report, unless they point out errors in the data or typographical errors in the Committee's report. In such cases, the committee will be able to make the required corrections in its final report.

### 4. The Evaluation Committee's Report

4.1 The final report of the evaluation committee shall address every institution separately.

- 4.2 The final report shall include recommendations on the subjects listed in the guidelines for self-evaluation, and in accordance with the Committee's Terms of Reference.
- 4.3 The recommendations can be classed as one of the five following alternatives:
  - 4.3.1 Congratulatory remarks and minimal changes recommended, if any.
  - 4.3.2 Desirable changes recommended at the institution's convenience and follow-up in the next cycle of evaluation.
  - 4.3.3 Important/needed changes requested for ensuring appropriate academic quality within a reasonable time, in coordination with the institution (1-3 years).
  - 4.3.4 Essential and urgent changes required, on which continued authorization will be contingent (immediately or up to one year).
  - 4.3.5 A combination of any of the above.
- 4.4 The committee's report shall include the following:

### 4.4.1 Part A — General background and an executive summary:

- 4.4.1.1 General background concerning the evaluation process, the names of the members of the committee, a general description of the institution and the academic unit being assessed, and the committee's work.
- 4.4.1.2 An executive summary which will include a description of the strengths and weaknesses of the academic unit and program being evaluated, according to the subjects listed in the body of the report and a list of recommendations for action.

# 4.4.2 Part B — In depth description of subjects examined:

- 4.4.2.1 This part will be composed according to the topics examined by the evaluation committee, in accordance with the committee's Terms of Reference and the report submitted by the institution, and at the discretion of the committee.
- 4.4.2.2 For each topic examined the report will present a summary of the findings, the relevant information and an analysis thereof, and conclusions and recommended actions.
- 4.4.3 Part C Summary and recommendations:

- 4.4.3.1 A short summary of every one of the topics described in detail in Part B, including the committee's recommendations.
- 4.4.3.2 Comprehensive conclusion/s and recommendation/s regarding the evaluated academic unit and the study-programs.

# 4.4.4 Part D- Appendices:

The appendices shall contain the committee's Terms of Reference, relevant information about the institution and the evaluated academic unit, the schedule of the on-site visit.

- 4.5 The final report will be delivered to the institution, with the deadline for its and the academic unit's response noted.
- 4.6 The Committee's final report together with the response of the institution and the academic unit will be brought before the CHE.
- 4.7 The CHE will discuss these documents and formulate its decisions within (approximately) a year from the time the guidelines for self-evaluation were sent to the institutions.

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# Appendix 2

The schedule of the visit

# ביקור הוועדה להערכת איכות בתי הספר לרפואה <u>13-14.11.2006</u> אוניברסיטת תל אביב

# כל המפגשים יתקיימו בבניין הפקולטה לרפואה חדר 202

של הוועדה	ישיבה סגורה ע	9: 00-9: 30	13.11.2006

מושב פתיחה	9: 30-10: 00

פרופי דני לויתן, רקטור פרופי רענן ריין, סגן רקטור פרופי יוסי מקורי, דקאן הפקולטה לרפואה פרופי שלום אברבנאל, הממונה על הערכת האיכות פרופי יואב הניס, תבר הוועדה להערכת האיכות

### 10:00-11:00 התנהלה האקדמית והאדמיניסטרטיבית של הפקולטה

פרופי יוסי מקורי - דקאן
פרופי אהוד גרוסמן – סגן דקאן לקידום אקדמי
פרופי ענת לבנשטיין – סגן דקאן לעניינים קליניים
פרופי ענת לבנשטיין – סגן דקאן לעניינים קליניים
פרופי לאונרד ליבוביץ – סגן דקאן וראש בית הספר לרפואה
פרופי משה פיליפ – סגן דקאן לתכנון, מחקר ופיתוח
פרופי משה קוטלר – סגן דקאן לתנינים קדם קליניים
פרופי רות שלגי – סגן דקאן לעניינים קדם קליניים
גבי יעל קיילין – משנה מנהלי לדקאן
פרופי דב ליכטנברג – דקאן יוצא

פרופי רן טור-כספא – ראש בית ספר לרפואה יוצא

### 11:00-11:45 חברי ועדת ההוראה הקדם קלינית

דייר דרורית נוימן – יוייר פרופי עינת אבן ספיר פרופי אילן המל פרופי חיים ורנר פרופי לאונרד ליבוביץ דייר מיכל פאול דייר רונית סאציי-פינרו פרופי עמוס פיין פרופי חגי פיק

### נציגי הסטודנטים (מלווה בארוחת צהריים) 11:45-13:15

אוהד ביתן	דן פרט	שנה בי
אורגד רוזנבלט	סטף ליפשיץ	שנה גי
נעם גודר	ליחי עצמוני	שנה די
צבי סירוטקין	עדי נצר	שנה ה
אביב שאול	יונה ויסבוך	שנת וי

חברי ועדת החוראה הקלינית 13: 15-14: 00

פרופי מיכה רפפורט – יוייר פרופי מרק גלזרמן פרופי ישראל הרשקוביץ דייר יחזקאל ויסמן פרופי מיקי לישנר פרופי מיקי מוגיה

דייר נטע נוצר פרופי יואב ציפמן

פרופי יוסף רוזנמן דייר ישראל שטראוס

פרופי רן טור כספא – יוייר ועדת הוראה יוצא

14: 00-14: 30

פרופי אשר ברזילי דייר ירון דגן

פרופי משה מיטלמן פרופי משה קוטלר

14: 30-15: 30

פרופי אילן המל דייר דרורית נוימן פרופי משה רכבי פרופי יואל רק פרופי רות שלגי

15: 30-16: 15

דוברת ברס אודליה כץ אסף מרום לינה צעדון קובי רומנו

16: 15-16: 45

9: 00-10: 15 14.11.2006

פרופי אהובה גוליק החוג לרפואה פנימית, מנהלת מחלקה פנימית,

בית חולים אסף הרופא

פרופי שלמה שנייבאום ראש החוג לכירורגיה, מחלקה כירורגית,

המרכז הרפואי סורסקי

פרופי מרק גלזרמן ראש החוג לגניקולוגיה, מנהל מחלקה גניקולוגית,

מרכז רפואי רבין

פרופי עמי באלין ראש החוג לפדיאטריה, מנהל מחלקה פדיאטרית,

בית חולים וולפסון

פרופי מיכאל דוידסון ראש החוג לפסיכיאטריה, מנהל מחלקה פסיכיאטרית,

המרכז הרפואי שיבא

פרופי מירי נויפלד ראש החוג לנוירולוגיה, מחלקה נוירולוגית,

המרכז הרפואי סורסקי

ד"ר שלמה וינקר ראש החוג לרפואת המשפחה, המרכז הרפואי שיבא

מנחל בית חיות - ד"ר נעים קריב	10:15-11:15
יו"ר ועדת מחשבים - דייר משה לשנו	,
<b>מנהלת הספריה -</b> גבי אילנה פלד	
חברי ועדות מחקר, MD/PhD ועבודות גמר	11: 15-12: 15
דייר גיל אסט	22.27 22.27
פרופי שמעון אפרת	
פרופי משה פיליפ	
פרופי עופר קפלן	
פרופי רונית שגיא אייזנברג	
פרופי רות שלגי	
תלמידי תכנית MD/PhD (מלווה בארוחת צהריים)	13: 45-14: 15
רן ברזילי	
גיל סמותה שרגא שוורץ	
שו גא שוווץ	
ישיבת חברי הוועדה	13: 15-13: 45
ישיבת סיכום	13: 45-14: 15
פרופי דני לויתן, רקטור	
פרופי רענן ריין, סגן רקטור	
פרופי יוסי מקורי, דקאן הפקולטה לרפואה	
פרופי לאונרד ליבוביץ, סגן דקאן וראש בית הספר לרפואה	
פרופי שלום אברבנאל, חממונה על הערכת האיכות	
פרופי יואב הניס, חבר הוועדה להערכת האיכות	
ישיבת סיכום – חברי הוועדה	14: 15-15: 00

