



**Committee for the Evaluation of Medical Schools
In Israel**

**Hebrew University - Hadassah
Medical School**

Evaluation Report

October 2007

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Chapter 1 - Background

At its meeting on March 8th, 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 to¹:

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.
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.

¹The 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 Hebrew University and Hadassah Medical School**.

The committee's visit to the Hebrew University took place on December 25-26, 2006. In order to avoid the appearance of conflict of interests, Prof. Ben-Yehuda and Prof. Cedar 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 Hebrew University and Hadassah Medical School for their self-evaluation report and for their hospitality towards the committee during its visit to the institution.

Chapter 3 - Evaluation of the Hebrew University and Hadassah Medical School

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

The Hebrew University of Jerusalem (HUJI) was accredited as an institution for higher education in accordance with the law of the Council for Higher Education (CHE) on 1962. In 2005, HUJI served 21,000 students including about 12,000 undergraduates, 6,500 masters students and 2,500 Ph.D. students.

The Medical School of the HUJI and the Hadassah Medical organization functions within the framework of the faculty of Medicine, which is located in the Ein-Kerem campus side by side with the Hadassah Medical Center. The faculty of Medicine comprises two research institutes (Medical Sciences and Microbiology), and five schools:

- The Hebrew University and Hadassah School of Medicine
- The Hebrew University-Hadassah School of Public Health and Community Medicine
- The Hebrew University and Hadassah Henrietta Szold School of Nursing
- The Hebrew University and Hadassah School of Occupational Therapy
- The Hebrew University School of Pharmacy

The first four schools are under the umbrella of the HUJI and the Hadassah Medical Organization, while the school of Pharmacy is administrated solely by the University. The overall length of the MD program of study of the Hebrew University and Hadassah School of Medicine is six years. It comprises three years of pre-clinical studies at the end of which a bachelor's degree in medical sciences (B.Mes.Sci.) is awarded, and three years of clinical studies at the end of which the degree of doctor of medicine (M.D.) is awarded.

3.2. General observations

In preparation of this report we thought it only fair to review earlier reports;

1) that of the external review committee commissioned by the University itself in 1991 and composed of several of the most distinguished leaders in medical education in the world (including two individuals who served as presidents of the Institute of Medicine in the United States).

2) that of the Council of Higher Education in 2002 (on which two of the members of the present committee served). Remarkably there is similarity, and almost identity, of the findings, by three different committees extending almost two decades. Such agreement suggests the validity of the observations and recommendations that should be taken with appropriate seriousness by the leadership of the University.

We agree fully with the conclusions of the external committee in 1991 "the Hebrew University-Hadassah Medical School is an excellent institution with a proud history, excellent faculty and superior students". However, we agree too with the warning sounded by the 1991 committee, "as in other outstanding academic institutions there is a resistance to change at a time of major scientific, clinical, economic and social change. Failure to adapt will put the medical school's preeminent position at risk"

In their report they pointed to a number of major issues which in their opinion needed urgent attention. The 2002 report came to almost identical conclusions as the 1991 report, emphasized almost the identical issues that needed attention, commented on the slow pace of change, and expressed the hope that the coming years would bring about accelerated change. The 2002 committee was encouraged by the institution's stated plan to carry out a retreat in which a large number of the teaching staff at all levels, including students, would be involved in order to produce the appropriate institutional climate to effectuate major change, which had not taken place in the preceding decade.

It is clear from our present visit that the institution continues to be an outstanding medical school in keeping with its more than half-century tradition. Our observations, comments and recommendations are intended to assist the leadership of the institution to build on its tradition of excellence and leadership in the coming century. We will point out the areas with which we were positively impressed and those in which we think improvement is needed.

Many of the changes which we feel are needed will require additional funding (teaching in the ambulatory sector, small group teaching, detailed evaluation of the results of changes in the program, providing academic appointments to clinical teachers, increasing the attractiveness of the MD/PhD program, students as physician assistants, and others). In addition, there are societal and governmental pressures to increase the number of medical students. These additional needs for funding fly in the face of repeated budget cuts in university funding. We urge the Council for Higher Education to make all efforts to provide adequate funding to allow the institution to

continue to be a focus of excellence in medical education, and to expand its much needed programs.

Additionally, the move to appoint an individual to head the medical school is highly commended. It is clearly difficult for the dean of the faculty with several separate active schools to devote the necessary full attention to the medical school.

3.3. Admission

The changes that have been introduced in the admissions process are impressive indeed. These changes were made after detailed study of the different procedures used by the three other schools in Israel, a careful review of the years of experience at the Hebrew University and an examination of procedures in some leading schools outside of Israel. The process is an interesting variation on the procedure being used by the Tel Aviv and Technion Universities, in that the various stations are local and not at the Messer Center. We commend the effort to use the interview not just as an elimination procedure, but as a positive evaluation factor. We are aware of political attempts to criticize the process, and hope that the University and the Council for Higher Education will stand fast to support the Faculty in its efforts to select the best candidates, not just from an academic point of view but also considering personality factors so critical for physicians.

We feel strongly that it is appropriate for each medical school to develop its own unique criteria for acceptance and do not feel that there needs be uniformity between the four Israeli medical schools. We also suggest that in view of the Faculty's clearly expressed goal of creating medical researchers in addition to practicing physicians, it should consider specific steps to identify such potential candidates by a selection process geared to this purpose. It is essential as well that a carefully worked out process, in conjunction with the Center for Medical Education, be instituted to evaluate and validate the new admission process.

3.4. Pre-clinical Teaching

Teaching in the three preclinical years is intensive, up-to-date and given to a large part by individuals who are not only teachers but who are at the cutting edge of research in their specific fields. Yet this part of the program has come under criticism not only from students, but also by the review committees both in 1991 and in 2002. Some of the problems cited have been taken into account by the four committees whose work

was related to us by Professor Pe'er, and may be relieved in part as a result of the changes that are to be implemented.

There are persistent and apparently valid complaints about the quality as well as the relevance of the teaching in these years. The complaints are voiced not only by those majority of students who are headed for careers in clinical medicine, but also by those students in the MD-PhD program who do have an appreciation for the basic sciences. Problematic in particular, but not only, are the courses given by teachers from the other faculties - a problem well recognized in other medical schools as well - but one which needs to be addressed with greater vigor. There are many, many truly excellent teachers as well, but the overall teaching needs to be improved. Far too much of the teaching is still by frontal lectures in disciplinary courses; this kind of teaching is particularly disappointing in a school which is encouraging a major portion of its students to seek a research career. One of the best ways to discourage interest in research is to have a student sit in lectures from morning to night and then have to sit at home memorizing rather than thinking and problem solving. There needs to be more integration between preclinical courses, more clinical relevance, and more systems teaching as is now the case in the leading research oriented medical schools in the Western world. The move to rearrange the distribution of courses between the first and second years to accommodate the entry of students from the school of natural sciences rather than to plan the sequence of course in a manner most logical for the great majority of students in the class is to be regretted.

The changes planned in the teaching of the preclinical years are a major step in the right direction, but we believe they are too slow in relation to the major changes needed and recommended. We suggest that a team of key faculty members visit several institutions such as Johns Hopkins and Harvard to see what changes have been made and are planned in basic science teaching at these research minded institutions. In addition we recommend that significant representation of staff begin to attend international meetings of academic medical education in the United States and Europe in order to be in touch with advances in teaching methods and approaches. Just as faculty attend international meetings in their area of research they should no less begin to interact with medical educators in other leading institutions.

Particularly important are the proposed changes in the teaching of statistics and of behavioral medicine. The lack of exposure to teaching of communication skills has heretofore been a major deficiency. We have not had a chance to review these in detail, and hope that these changes are major in scope and adequate to meet the needs.

3.5. Clinical Teaching

Clearly the medical school continues its long tradition of excellence in clinical teaching. This was obvious from the descriptions of the programs by the clinical directors, by a reading of the curricula, and by the feedback from the students.

The clinical department heads and senior physician in all the departments are skilled, and outstanding physicians who see their teaching role as vital and who devote time and effort to teaching.

There are some points that, in our opinion, require attention in order to maintain and even improve on an already excellent program. It is not clear that the teacher/student ratio is large enough in every clinical rotation in every hospital. It is essential that the student groups per tutor be kept small in every affiliated institution. There may be a need for additional teaching facilities to meet the large student load—some of this increase may be met by the moving of more teaching into the ambulatory sector, and/or by a reallocation of hospital beds on a national level in the most equitable manner by the various governmental bodies. We also recommend that there be more attention given to assure that the teaching in each of the clinical departments meets a uniform minimal standard, so that students who take a given rotation at one hospital do not feel shortchanged as compared to students at another institution.

3.6. Ambulatory Care

The organization of health care has changed drastically in the past few decades with much of the care having moved from inpatient to the ambulatory sector, both within the hospital and within the community. Medical education has not kept pace with this paradigm change. The recommendation to move more teaching into the ambulatory sector has been almost universal throughout the Western world during the past few decades, but has been slow in implementation for a variety of reasons, some more valid than others. We were pleased to note the changes that were described in teaching in pediatrics and obstetrics and gynecology. In internal medicine we heard not only of the difficulties, of which we are all aware, but also of a principled opposition to moving a significant part of the teaching to the ambulatory sector. Our committee, composed in part of three senior internists, recognizes fully and appreciates the expressed concept of excellent ward teaching, but feels no less strongly that a way must be found to move a significant portion of the teaching to the ambulatory sector.

3.7. Teaching of physical diagnosis

The committee notes with satisfaction the efforts made to improve the course of physical diagnosis by teaching it in a more concentrated form at the beginning of the medicine clerkship. This change needs careful evaluation to ensure that the training is adequate in extent and depth. We have some reservations about the relative shortness of the period. The serious problem of physical diagnosis training for those students who begin their first clerkship in pediatrics cries out for a solution, which we hope will be found.

3.8. Student-Faculty Interactions

We were disappointed that the feedback from students on this review was significantly more negative than that found in 2002. There is clearly a disturbing degree of alienation felt by the students. Even if this feeling is unjustified, which it very well may be, the feeling needs to be addressed. Students expressed a desire and need to have personal contact periodically with senior staff, and we agree that there is no substitute for such direct meetings. In the twenty-first century university governance must involve students in a more active role than in the past.

3.9. Other Subjects

(1) Electives - There are very few opportunities for elective time for students. Obviously all the potentially important subjects cannot be taught during the years of medical school. It is therefore tempting to attempt to try to cram as many subject areas into the curriculum. Most Western medical schools have decided to limit the courses that are compulsory and to leave to medical students, who are adults and responsible individuals, significant elective time. Since students will ultimately pursue a variety of different medical careers, it makes sense to allow such freedom with guidance from teaching staff. We recommend consideration of allowing more elective time in the program.

(2) Academic Recognition for Teaching - If teaching is to be conducted in small groups, as it should be, there is need for a large number of teaching staff. Not all of these will be eligible for full academic appointments. But if they are expected to teach a way must be found to compensate them with some form of academic recognition. We are pleased that half-time appointments are now possible, and recommend more rapid and extensive progress in this direction. Even in the most outstanding research

oriented medical schools there is now full academic recognition of the teacher-clinician, and we recommend consideration of such recognition.

(3) Center for Medical Education - We were impressed at the important work emerging from the Center, although little time was available for its presentation. With the imminent retirement of the head of the Unit and his taking a sabbatical leave we are concerned that a valuable resource, which has not been fully exploited until now, may be further neglected. We urge immediate steps to plan for the continued function of the Center, its expansion and recruitment of appropriate leadership for the Center.

(4) Physician's Assistant ("Ozer Rofeh") - Virtually all the medical students in the institution work in order to support themselves and their families, mostly in non-medical jobs. This situation has adverse effects on the entire learning process, and on their commitment to study and research. Obviously significant financial aid on the part of the University would be of help, but this is most unlikely. If the students could find employment in jobs that keep them in the hospital and have educational value, some of the disadvantages of outside work would be eliminated. The three other medical schools in Israel have physician's assistant programs, which help the doctors on duty and provide income to the students, all within an educational framework. We urge the administrations both of the University and of the Hadassah Hospital to find ways to provide significant physician's assistant positions

(5) Relationship between the Hebrew University and Hadassah Hospital -

The medical school was created as a partnership between these two outstanding institutions, and owes its success to this intimate relationship. During this visit some of us had the feeling of tension between the institutions. Whatever underlies such tensions, which are inevitable, we hope that these can be worked out amicably, because such cooperation is essential if the school is to thrive.


Chapter 4 - Summary and Recommendations

We wish to express our appreciation to the leadership and staff of the institution for their cooperation and willingness to discuss openly all aspects of their program, and for their gracious hospitality.

We recognize the outstanding role of the Hebrew University School of Medicine in excellence and leadership over the past one half century, and feel that it has the talents and potential to new heights in the coming century. In order to achieve such goals we believe that it must make a sustained and serious effort at stocktaking and evaluating its activities critically, honestly and in depth, involving senior staff, junior staff and students at all levels.

The most effective way to do this in the experience of institutions that have succeeded (including two of Israel's schools that have revised their programs extensively and successfully) is to organize carefully a faculty retreat to discuss the plans of the school for the coming decade. At the previous review in 2002 a commitment to such a retreat was made by the leadership of the school. The time has come to take such action to plan and guarantee the institution's continued excellence and leadership.

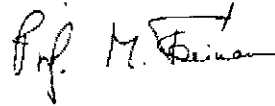
Signed By:



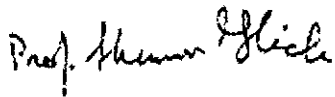
Prof. Irun Cohen
Chairperson



Prof. Haim Bitterman



Prof. Menahem Fainaru



Prof. Shimon Glick



Prof. Howard L. Weiner

Appendix 1

Terms of Reference of the Committee



מדינת ישראל

STATE OF ISRAEL

Minister of Education Culture and Sports

November 7, 2005

To:

<i>Professor Irun R. Cohen -</i>	Department of Immunology, Weizmann Institute of Science
<i>Professor Dina Ben-Yehuda -</i>	Chairperson of the Hematology Department, Haddasah University Hospital, Faculty of Medicine, The Hebrew University of Jerusalem
<i>Professor Chaim Bitterman -</i>	Chairman of Medicine, Carmel Medicine Center, Faculty of Medicine, Technion – Israeli Institute of Technology, Haifa
<i>Professor Chaim Cedar -</i>	Faculty of Medicine, The Hebrew University of Jerusalem
<i>Professor Menahem Fainaru -</i>	Sakler Faculty of Medicine, Tel-Aviv University
<i>Professor Shimon Glick -</i>	The Joyce and Irving Goldman Medical School, Ben-Gurion University of the Negev
<i>Professor Howard L. Weiner -</i>	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.

Appendix 2

The schedule of the visit

Site visit to the Hebrew University of Jerusalem

Committee for the Evaluation of Medical Schools in Israel

December 21, 2006

First Day – December 25th, 2006

The meeting will take place at the Medical School

Prof. Ehud Razin, Dean

Prof. Shlomo Rotshenker, Vice-Dean

Time	Subject	Participants: <ul style="list-style-type: none"> • <i>Pre-clinical*</i> • <i>Clinical-Hadassah**</i> • <i>Clinical-Specified</i>
09:30-10:00 Conference Room – Dean	Opening Session Rector, Vice-Rector. Heads of Academic Review	<ul style="list-style-type: none"> • Prof. Haim D. Rabinowitch, Rector • Prof. Miriam Gur-Arye, Vice Rector • Prof. Eliahu Friedman, Head of Academic control in the Experimental Sciences. • Prof. Jacob Metzger, Head of Academic Control in the Humanities, Social and Law studies.
10:00-11:00 Conference Room – Dean	The Heads of the academic units: Dean of the Faculty of Medicine School's academic & administrative leadership	<ul style="list-style-type: none"> * Prof. E. Razin, Dean * Prof. S. Rotshenker, Vice Dean for Appointments and Control, Committee Chairman. * Prof. H. Rosen -Vice Dean, Dept. of Parasitological * Prof. A. Honigman – Dept. of Virology * Mr. S. Revach, Associate Dean
11:00-11:45 Conference Room – Dean	Committees involved in Pre-Clinical Education	<ul style="list-style-type: none"> * Prof. S. Sasson, Chairman Pre-Clinical Teaching Committee * Prof. O. Meyuhas, Dept. of Biochemistry. * Prof. D. Lichtshtein, Dept. of Physiology * Prof. A. Lev-Tov, Head Dept. of Anatomy * Prof. A. Panet, Dept. of Virology. ** Prof. J. Pe'er, Vice Dean for the School of Medicine Prof. R. Cohen, Director Medical Teaching Center
11:45-13:15	Lunch – with Students	Students: Roni Zemet; Elias Teka; Yael Emanuel; Dmitry Kaluzhny; Irit Rozen; Roey Abramovitch; Shay Ofir; Dror Leviner; Orit Ben-Dor; Alon Krispin.
13:15-14:00 Conference Room - Dean	Committees involved in Clinical education	<ul style="list-style-type: none"> **Prof. T. Peretz, Chairperson Clinical Teaching Committee **Prof. S. Heyman, Dept. of Medicine Mt. Scopus **Prof. A. Brzezinski, Dept. of Gynecology **Prof. Y. Haskel, Surgery, Dept. of Mt. Scopus Dr. R. Klar, Dept. of Pediatrics, Bikur Holim Prof. R. Cohen, Director Medical Teaching Center
14:00-14:30 Conference Room - Dean	Admission of Students	<ul style="list-style-type: none"> ** Dr. E. Rudis, Dept. of Cardio-Vascular Surgery **Prof. D. Hochner , Dept. of Gynecology Mt. Scopus & Vice Dean for Students. *Dr. Y. Babad, Psychologist
14:30-15:30 Conference Room - Dean	Senior Academic Staff	<ul style="list-style-type: none"> **Prof. A. Ben-Yehuda, Head Dept. of Medicine C. ** Prof. T. Chajeck, Head Dept. of Medicine Mt. Scopus **Prof. T. Ben-Hur, Head Dept. of Neurology *Prof. Y. Bergman, Dept. of Cancer Research *Prof. C. Kalcheim, Dept. of Anatomy
15:30-16:15 Conference Room - Dean	Junior Academic Staff & Teaching Assistants	<ul style="list-style-type: none"> **/*Dr. E. Pikarski, Dept. of Pathology ** Dr. M. Lotem, Dept. of Oncology ** Dr. E. Banin, Dept. of Ophthalmology * Dr. A. Klar, Dept. of Anatomy
16:15-16:45	Closed Meeting	Committee Members

Site Visits of the Hebrew University Medical School

Second Day – December 26th, 2006

The meeting will take place at the Medical School

Prof. Ehud Razin, Dean

Prof. Shlomo Rotshenker, Vice-Dean

Time	Subject	Participants: <ul style="list-style-type: none"> • Pre-clinical* • Clinical-Hadassah** • Clinical-Specified
09:30-10:45 Conference Room Oncology – Sharett Institute	Clinical Teaching (8 participants)	Prof. Mor-Yoseph , General Director Hadassa Hospital **Prof. T. Peretz , Head Dept. of Oncology **Prof. A. Shalev , Head Dept. of Psychiatry ** Prof. N. Laufer , Head Dept. of Gynecology ** Prof. A. Rivkind , Head Dept. of Surgery Prof. E. Granot , Head Dept. of Pediatrics Kaplan Hospital & the Kaplan Hospital representative. **Prof. Y. Ilan , Head Dept. of Medicine A. **Prof. Y. Naparstek , Head of Medicine Division (invited by committee's request)
10:45-12:00 Conference Room Oncology – Sharett Institute	Research (5 participants)	*Prof. S. Katzav , Chairperson Experimental Medicine & Cancer Research, Chairperson Faculty Research Committee **Prof. A. Ben-Yehuda , Head Dept. of Medicine C, Chairman Research Committee **Prof. A. Rivkind and Chairman of Committee of MD Thesis. *Prof. S. Sasson , School of Pharmacology and representative of the MD/PhD Program. **Prof. Y. Naparstek , Head of Medicine Division (invited by committee's request)
12:00 – 13:00 Lecture Hall, Histology, Lab. - Computer Farm	Services for Supporting Teaching (5 participants)	*Prof. A. Lev-Tov , Anatomy, Chairman Computer Committee *Mrs. V. Erez , Director of Teaching Services Unit *Dr. R. Kalman , Director Animal Facilities *Mrs. S. Lenga , Director Faculty Library *Prof. R. Cohen , Director Medical Teaching Center
13:00-13:45	Lunch - MD/PhD students (6 participants)	Amir Sonnenblick; Rotem Kedar; Yaqub Hanna; Ravid Straussman; Tomer Nir, Eran Nizri
13:45-14:15	Closed Meeting	Committee Members
14:15-14:45 Conference Hall - Dean	Summation (9 participants)	<ul style="list-style-type: none"> • Prof. Haim D. Rabinowitch, Rector • Prof. Miriam Gur-Arye, Vice Rector • Prof. Eliahu Friedman, Head of Academic control in the Experimental Sciences. • Prof. Jacob Metzger, Head of Academic Control in the Humanities, Social and Law studies. * Prof. E. Razin, Dean Faculty of Medicine * Prof. S. Rotshenker, Vice Dean for Academic Promotions and Control – Chairman of Committee. * Prof. S. Sasson, Chairman Pre-Clinical Teaching Committee **Prof. T. Peretz, Chairperson Clinical Teaching Committee **Prof. J. Pe'er, Vice-Dean for School of Medicine
14:45-15:30	Closed Meeting	Committee Members

