



On approval of the rules, terms of post-accreditation monitoring and revocation of the health care accreditation certificate

Unofficial translation

Order of the Minister of Health of the Republic of Kazakhstan № KP DSM-227/2020 dated 30 November 2020. Registered with the Ministry of Justice of the Republic of Kazakhstan on 2 December 2020 under № 21708.

Unofficial translation

Pursuant to subparagraph 10) of Article 8 of the Code of the Republic of Kazakhstan of 7 July 2020 “On Public Health and the Healthcare System”, **I HEREBY ORDER:**

Footnote. The preamble as amended by order of the Minister of Healthcare of the Republic of Kazakhstan dated 06.08.2025 № 77 (shall be enforced ten calendar days after the date of its first official publication).

1. That the attached rules, terms of post-accreditation monitoring and revocation of health care accreditation certificate shall be approved.

2. That, in the order established by the legislation of the Republic of Kazakhstan, the Committee of Medical and Pharmaceutical Control of the Ministry of Healthcare of the Republic of Kazakhstan shall ensure:

- 1) state registration hereof with the Ministry of Justice of the Republic of Kazakhstan;
- 2) placement hereof on the official internet resource of the Ministry of Healthcare of the Republic of Kazakhstan;
- 3) within ten working days after state registration with the Ministry of Justice of the Republic of Kazakhstan, submission to the Legal Department of the Ministry of Healthcare of the Republic of Kazakhstan of information on execution of measures provided for in sub-paragraphs 1) and 2) of this paragraph.

3. That the supervising Vice-Minister of Healthcare of the Republic of Kazakhstan shall be charged with control over execution hereof.

4. That this order shall be enforced ten calendar days after the date of its first official publication.

*Minister of Healthcare
of the Republic of Kazakhstan*

A. Tsoy

Approved by order
of the Minister of Healthcare
of the Republic of Kazakhstan
№ KR DSM-227/2020
dated November 30, 2020

Rules, terms for post-accreditation monitoring and revocation of accreditation certificates in the field of healthcare

Footnote. The Rules - as amended by order of the Minister of Healthcare of the Republic of Kazakhstan dated 06.08.2025 № 77 (shall be enforced ten calendar days after the date of its first official publication).

Chapter 1. General provisions

1. These rules, terms for post-accreditation monitoring and revocation of accreditation certificates in the field of healthcare (hereinafter - Rules) have been developed in accordance with subparagraph 10) of Article 8 of the Code of the Republic of Kazakhstan dated July 7, 2020 “On Public Health and Healthcare System” (hereinafter - Code) and determine the procedure, terms of post-accreditation monitoring and revocation of accreditation certificate in the field of healthcare.

2. The following basic concepts shall be used in these Rules:

1) accreditation - procedure of official recognition of applicant's competence to perform work in a particular field of conformity assessment;

2) post-accreditation monitoring - monitoring of activities of health care entities, organizations and legal entities, accredited in the field of health care for compliance with established requirements;

3) accreditation certificate - official document confirming applicant's accreditation in a particular field of accreditation;

4) accredited entity – an entity which passed the accreditation in the field of health care in compliance with the procedure established by subparagraph 9) of Article 8 of the Code;

5) post-accreditation monitoring commission – a commission established by the accrediting body to conduct post-accreditation monitoring of accredited entities;

6) external comprehensive evaluation expert - health care organization specialist engaged for external comprehensive evaluation of medical organizations for compliance with accreditation standards as a member of the expert group;

7) focus assessment - assessment of a medical organization based on the analysis of documents and (or) visits to a medical organization, carried out to confirm or clarify the results of previously conducted external comprehensive assessment in cases of doubt on the reliability of the results of external comprehensive assessment, or in a situation that puts the safety of patients, staff and visitors at risk, of which the body accrediting medical organizations became aware.

3. Post-accreditation monitoring shall apply to entities that have undergone accreditation in the field of healthcare as follows:

1) healthcare entities performing accreditation of medical organizations in order to recognize the compliance of the medical services provided with established requirements and standards in the field of healthcare;

2) organizations that assess the knowledge and skills of students, graduates of vocational training programs, and healthcare professionals;

3) healthcare entities that conduct independent expert assessments in the field of healthcare;

4) legal entities that confirm readiness for management activities in the certification of healthcare managers;

5) professional medical associations and public associations operating in the field of healthcare.;

6) medical organizations based on an external comprehensive assessment of compliance with accreditation standards;

7) professional associations in the field of public health and epidemiological welfare;

8) individuals and legal entities conducting health and epidemiological audits.

4. Post-accreditation monitoring shall be carried out routinely once every three (3) years, but not earlier than six (6) months from the date of receipt of the accreditation certificate. The post-accreditation monitoring plan shall be drawn-up annually and posted on the website of the relevant accreditation body (organization) performing accreditation in the field of health care (hereinafter the accreditation body) until October 25 of the corresponding calendar year.

In cases where two or more complaints from individuals and/or legal entities are received by the accreditation body regarding the activities of an accredited organization during the period of validity of the accreditation certificate, and the results of the review confirm the facts of violation of the applicants' rights, unscheduled post-accreditation monitoring shall be carried out.

Chapter 2. Procedure for post-accreditation monitoring and revocation of accreditation certificate

5. Post-accreditation monitoring shall be carried out by the accreditation body within 20 (twenty) working days.

6. To carry out post-accreditation monitoring, a post-accreditation monitoring commission (hereinafter referred to as the commission) shall be formed by order of the chief executive of the accrediting body in compliance with the requirements of this paragraph and paragraph 7 of these Rules.

The composition of the commission shall be formed depending on the function and activities of the accredited entity and consists of an odd number of people.

The following persons cannot be included in the commission:

1) a person who is or has been in an employment or contractual relationship with an accredited healthcare entity within the last five (5) years;

2) a person who has close relatives, a spouse and/or relatives by marriage with employees and/or management of an accredited healthcare entity.

7. Persons with a criminal record that has not been expunged or removed in accordance with the laws of the Republic of Kazakhstan may not be included in the commission.

8. The chairperson of the post-accreditation monitoring commission shall be the head of the accrediting body. The commission's activities shall be supported by a secretary from a structural unit of the accrediting body.

9. To conduct post-accreditation monitoring, the accrediting body sends a request to the accredited entity to provide the following information:

criteria for an accredited entity for the accreditation of medical organizations in accordance with Annex 1 to these Rules;

criteria for an accredited entity (organizations that assess the knowledge and skills of students, vocational training graduates and healthcare professionals) in accordance with Annex 2 to these Rules;

criteria for an accredited entity (for conducting independent expert assessments in the field of healthcare) in accordance with Annex 3 to these Rules;

criteria for an accredited entity (for carrying out activities to confirm the readiness of healthcare managers for managerial activities as part of the manager certification procedure) in accordance with Appendix 4 to these Rules;

criteria for an accredited entity (professional medical associations and public associations operating in the field of healthcare) in accordance with Appendix 5 to these Rules.

10. The commission shall review the performance results of the persons specified in paragraph 3 of these Rules.

If an incomplete set of documents or inaccurate or incomplete information is provided in relation to the criteria of these Rules for post-accreditation monitoring, the commission shall issue recommendations; if a complete set of documents is provided in relation to compliance with the criteria of these Rules for post-accreditation monitoring, a conclusion shall be issued on the results of the activities of the accredited person.

The post-accreditation monitoring commission shall vote to issue its conclusion/recommendations. In the event of a tie, the decision voted for by the chairperson of the commission shall be deemed adopted.

11. Upon submission of a complete set of documents on compliance with these Rules, post-accreditation monitoring shall be conducted without visiting the production base of the accredited entity, in a remote format using remote technologies.

12. In cases where an incomplete set of documents is submitted, inaccurate or incomplete information regarding the criteria of these Rules, or if the documents submitted reveal that the accredited entity does not comply with one or more points of these Rules on the results of the accredited entity's activities, post-accreditation monitoring shall be carried out with a visit to the production base of the accredited entity.

Post-accreditation monitoring with a site visit shall also be conducted if information is received from state authorities (organizations) regarding violations of healthcare legislation by the accredited entity.

Before visiting the production base of the accredited entity, the accrediting body shall notify it in writing of the upcoming visit, indicating the date and time of the visit, three (3) working days in advance.

13. If the accredited entity complies with the criteria of these Rules, the accrediting body shall issue a positive conclusion in any form.

If the information does not comply with the criteria of these Rules, recommendations for eliminating the non-compliance shall be issued in any form.

The deadline for eliminating the inconsistency of information with the criteria shall be no more than 20 (twenty) working days from the date of receipt of the recommendation. At the request of the accredited entity, the deadline for eliminating the inconsistency of information with the criteria shall be extended, but not by more than 20 (twenty) working days.

Upon complete elimination of non-conformities identified in the recommendations, the accreditation body shall issue a positive conclusion.

14. In cases where all non-conformities identified in the recommendations have not been eliminated, or where information on the criteria has been provided after the deadline specified in paragraph 13 of these Rules, the accreditation body shall issue a negative conclusion and revoke the accreditation certificate.

The accreditation certificate shall also be revoked in the following cases:

when a court sentence, court decision or other judicial act and enforcement document on the termination of activities or certain types of activities of the accredited entity comes into legal force;

termination, suspension or prohibition of activities or certain types of activities of the accredited entity.

15. The decision of the accrediting body on a positive and (or) negative conclusion shall be issued in the form of an order.

16. In the event of revocation of the accreditation certificate and/or change of category, the accrediting body shall, within 5 (five) working days from the date of revocation of the certificate, inform in writing the accredited entity in respect of which post-accreditation monitoring was carried out.

17. An accredited entity shall have the right to appeal the results of post-accreditation monitoring in accordance with the procedure provided for in Article 91 of the Administrative Procedural and Process-Related Code of the Republic of Kazakhstan.

Criteria for accredited entities to carry out accreditation of medical organizations

№	Criteria	Supporting document
1.	Availability of documents establishing the legal status of the healthcare entity, according to which the preparation of medical organizations for accreditation and other areas of accreditation of medical organizations are one of its activities.	Articles of association (for legal entities) or certificate of state registration (re-registration) of a legal entity (for entities operating on the basis of model articles of association)
2.	Availability of premises	Document confirming ownership, temporary possession and/or use of the premises (for a fee or free of charge) for the last 3 (three) years
3.	Availability of a document confirming plans for activities in the field of accreditation of medical organizations, including training on accreditation issues, participation in conferences, and explanatory work (seminars, meetings, symposiums) on issues related to the accreditation of medical organizations.	Implementation over the last three (3) years of the five (5) year strategic plan and the operational plan until the end of the current calendar year.
4.	Availability of an approved budget providing adequate resources to achieve the objectives and targets set	Approved financial and economic activity plan/development plan for the last 3 (three) years with information on implementation
5.	Availability of a document defining the operating procedures of the accreditation commission	Approved Regulations on Commission
	Availability of a document confirming that employees of the medical organization have been familiarized with the Order of the Minister of Healthcare of	

6.	the Republic of Kazakhstan dated 23 December 2020 № ҚР ДСМ-319/2020 "On the Approval of the Code of Honor for Medical and Pharmaceutical Workers of the Republic of Kazakhstan" (registered in the Register of State Registration of Regulatory Legal Acts under № 21890) (hereinafter referred to as the Code of Honor)	Document confirming that employees of the organization have been familiarized with the Code of Honor, taking into account staff turnover	
7.	The presence of a document regulating the principle of confidentiality of the external comprehensive assessment and the protection of information received from a medical organization during the external comprehensive assessment	A document regulating the procedure for handling confidential information	
8.	Availability of job descriptions defining the functions and powers of the head and employees of the organization	Approved job descriptions for all specialists	
9.	Availability of internal rules and procedures for personnel management (appointment, selection, training, assessment, incentives)	Approved internal regulatory documents	
10.	Availability of the system of internal financial control and audit	Approved regulation on the internal audit service	
	11.	Availability of software, server and/or switching equipment or a virtual (cloud) server to ensure information security of stored data of accredited medical organizations	A document confirming the ownership, temporary possession, and/or use of functioning server or switching equipment, or a virtual (cloud) server (for a fee or free of charge). List of software.
	12.	Availability of own functioning internet resource (website) with up-to-date information in Kazakh and Russian on the accreditation procedure for medical organizations	Link to a functioning website (screenshot of website pages)

13.	Availability of a form of an agreement between the entity and the medical organization specifying the subject matter, terms, rights, obligations and responsibilities of the parties	Provision of all agreements between the accredited healthcare entity and the medical organization for conducting an external comprehensive assessment
14.	Availability of experts in external comprehensive assessment in the field of healthcare. A list of at least 20 (twenty) experts in external comprehensive assessment, of whom at least 40% have higher medical education, at least 30% have higher and/or secondary medical education in the specialty "Nursing", in accordance with paragraph 58 of the Rules for Accreditation in the Field of Healthcare, approved by the Order of the Minister of Healthcare of the Republic of Kazakhstan № ҚР ДСМ-299/2020 dated 21 December 2020 (registered in the Register of State Registration of Regulatory Legal Acts under № 21852) (hereinafter referred to as the Accreditation Rules).	Electronic database/register of experts posted on the entity's website. Electronic copies of documents confirming employment in accordance with Article 35 of the Labor Code of the Republic of Kazakhstan or civil law contracts confirming work experience
15.	Documents confirming the training of experts to conduct external comprehensive assessments of medical organizations.	Documents confirming training in the accreditation of medical organizations in accordance with international standards over the last 3 (three) years
16.	Availability of a certificate of accreditation as an accrediting body from an international organization for quality in healthcare (for entities previously accredited as an accrediting body) Availability of a certificate of institutional membership in an international organization for quality in	

		healthcare (for entities applying for accreditation as an accrediting body for the first time)	Certificate of accreditation as an accrediting body
	17.	Availability of a certificate of institutional membership in an international organization for quality in healthcare (for entities applying for accreditation as an accrediting body for the first time)	Certificate of institutional membership in an international organization for quality in healthcare
	18	A document confirming the possibility of providing the state service "Accreditation of medical organizations for the purpose of recognizing the compliance of their activities with accreditation standards" through the "E-Licensing" portal.	A document drawn up in accordance with civil law and confirming access to the "E-Licensing" portal.

* In the case of post-accreditation monitoring of healthcare entities, documents are provided for the period of activity, 6 (six) months after accreditation.

Annex 2
to the Rules, terms for post-
accreditation monitoring and
revocation of accreditation
certificates in the field of
healthcare

Criteria for an accredited entity (organization that assesses the knowledge and skills of students, graduates of professional training and healthcare professionals)

№	Criteria	Document
1.	Availability of documents of title, according to which the assessment of knowledge and skills of students, graduates of professional training and specialists in the field of healthcare (hereinafter referred to as the assessment of knowledge and skills) is one of the types of activities of the organization	Articles of association or certificate of state registration (re-registration) of a legal entity (for persons operating on the basis of model articles of association)
2.	Availability of premises equipped with a video surveillance system (audio and video recording) for assessing knowledge and skills	Document confirming the availability of premises equipped with a video surveillance system (audio and video recording) for assessing knowledge and skills regarding ownership rights, temporary possession rights and/or

		rights to use the premises (for a fee or free of charge) over the last 3 (three) years.
3.	Ensuring accessibility of knowledge and skills assessment procedures for healthcare professionals	A document confirming the implementation of the assessment of knowledge and skills in cities of national and regional significance, the capital (statistical report) for the period from the moment of receiving the accreditation certificate until the post-accreditation monitoring.
4.	Availability of a document, confirming the planning of activities	Implementation of the operational plan for the period from the moment of receiving the accreditation certificate until post-accreditation monitoring.
5.	Availability of an approved budget providing adequate resources to achieve the objectives and targets set	Implementation of the financial and economic activity plan/development plan for the period from the date of receipt of the accreditation certificate to the post-accreditation monitoring
6	Availability of a document regulating ethical standards that guide employees of the entity within the team, as well as when interacting with experts, stakeholders and the population	Electronic copies of approved ethical standards
7.	Availability of job descriptions defining the functions and powers of the head and employees of the organization	Approved job descriptions for all specialists
8.	Availability of internal rules and procedures for personnel management (appointment, selection , training, assessment, incentives)	Approved internal regulatory documents
9.	Availability of the system of internal financial control and audit.	Approved regulation on the internal audit service
10.	Availability of a unified automated assessment information system with the possibility of integration with the e-government portal with an appropriate level of information security	Document, confirming the availability of a functioning unified automated information system (platform)
11.	Availability of a document, regulating the principle of confidentiality integrity of official information	Document, regulating the procedure for handling confidential information
12.	Availability of software, server and/ or switching equipment, or a virtual (A document confirming the availability of functioning server, switching equipment, or a virtual (cloud) server based on the right of

	cloud) server to ensure assessment of knowledge and skills	ownership, temporary possession, and/or use (for a fee or free of charge). List of software.
13.	Availability of own functioning internet resource (website) with up-to-date information in Kazakh and Russian on issues of assessing the knowledge and skills of healthcare specialists	Link to a functioning website (screenshot of website pages)
14.	Availability of a functioning telephone for inquiries	A functioning telephone number listed on the website of organization
15.	Availability of a functioning unified information system for assessing knowledge and skills with a personal identification system (video capture) during testing	Documents confirming Availability of a functioning information system for assessing knowledge and skills based on the right of ownership, temporary possession and/or use (for a fee or free of charge).
16.	Availability of computer equipment and other technology to ensure the quality of knowledge and skills assessment services. If remote technologies are used, an online proctoring system must be available.	Documents confirming the availability of functioning computer and other equipment (technology) on the basis of ownership, temporary possession and/or use (for a fee or free of charge).
17.	Availability of clinical stations, material and technical equipment, appropriate for conducting assessment of knowledge and skills in accordance with the Order of the Minister of Healthcare of the Republic of Kazakhstan dated December, 11,2020, № КР ДСМ-249/2020 "On approval of the rules for assessing the knowledge and skills of students, assessing the professional preparedness of graduates of educational programs in the field of healthcare, assessing the professional preparedness of specialists in the field of healthcare" (registered in the Register of State Registration of Regulatory Legal Acts under № 21763) (hereinafter the Assessment Rules)	A document confirming the ownership, temporary possession, and/or use of clinical stations and material and technical equipment (for a fee or free of charge). List of clinical stations and material and technical equipment.
18.	Availability of simulation equipment (mannequins, phantoms, dummies or automated virtual models, interactive educational computer programs, audio-video materials) and consumables for organizing and conducting an assessment of the	A list of the simulation equipment, apparatus, and medical instruments of the organization being assessed (№, name, manufacturer, year of manufacture, model, quantity, and note). Documents confirming the availability of the simulation equipment and consumables on the basis of ownership, temporary

	knowledge and skills of healthcare specialists in accordance with the Assessment Rules.	possession, and/or use (for a fee or free of charge).
19.	Availability of specialists with at least 3 (three) years of experience in the field of healthcare, medical education, business and law, information systems and technologies and trained in organizing and conducting assessments of knowledge and skills	<p>Information about the organization's specialists (last name, first name, patronymic (if any), address (place of registration and actual place of residence), education, name of the university and year of graduation, specialty according to diploma, primary place of employment (name, address of the organization), length of service (in the specialty, at the organization as assessed), information about advanced training over the past 5 (five) years (certificate number, by whom issued, duration of training, number and date of issue).</p> <p>Electronic copies of documents confirming training.</p> <p>Electronic copies of documents in accordance with Article 35 of the Labor Code of the Republic of Kazakhstan or civil contracts confirming work experience</p>
20.	Availability of experts in the development and evaluation of examination test materials for the assessment of knowledge and skills, independent assessment of scientific and pedagogical staff, students and graduates of educational and scientific organizations in the field of healthcare	<p>List of healthcare experts by specialty.</p> <p>Electronic copies of documents confirming training in the development and evaluation of examination test materials.</p> <p>Electronic copies of documents confirming employment history, in accordance with Article 35 of the Labor Code of the Republic of Kazakhstan, or civil contracts confirming work experience</p>
21.	Availability of a bank of test tasks developed in accordance with the requirements of the authorized body in the field of healthcare for the assessment of knowledge and skills and independent assessment of scientific and pedagogical personnel, students and graduates of medical educational and scientific organizations, at least 200 (two hundred) test tasks for each medical, pharmaceutical specialty in Kazakh and Russian languages.	Test tasks (at least 200 (two hundred) test tasks for each medical and pharmaceutical specialty in accordance with the Order of the Minister of Healthcare of the Republic of Kazakhstan dated November 30, 2020 № KP ДСМ-218/2020 "On approval of the list of specialties and specializations subject to certification of specialists in the field of healthcare" (registered in the Register of State Registration of Regulatory Legal Acts № 21699) in Kazakh and Russian)

22.	Availability of a bank of clinical scenarios developed for the assessment of knowledge and skills: at least 10 (ten) clinical cases in the main profiles of medical specialties (therapy, surgery, pediatrics, obstetrics and gynecology, anesthesiology and resuscitation, dentistry)	Electronic database of clinical scenarios (at least 10 (ten) clinical cases in the main medical specialties)
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* In the case of post-accreditation monitoring of healthcare entities, documents are provided for the period of activity, 6 (six) months after accreditation.

Annex 3
to the Rules, terms for post-accreditation monitoring and revocation of accreditation certificates in the field of healthcare

Criteria for an accredited entity (on conducting independent expert assessments in the field of healthcare)

№	Criteria	Document
1.	Availability of documents of title providing for the regulation:	Articles of association describing the functions and activities or describing the conditions and procedure for admission to and withdrawal from membership of the organization (if membership exists) or a certificate of state registration (re-registration) of the legal entity (for persons operating on the basis of model articles of association)
1.1.	by the area of activity of the organization - conducting independent expert assessments in the field of healthcare	
1.2.	by the terms and conditions of membership (for non-profit organizations) / employment – non-competition agreement	
2.	Availability of a premise	Document confirming ownership, temporary possession and/or use of the premises (for a fee or free of charge).
3.	Availability of a document, confirming the planning of activities	Implementation of the Strategic Plan for 5 (five) years over the last 3 (three) years. Implementation of the Operational Plan until the end of the current calendar year.
4.	Availability of a document regulating the ethical standards that guide the entity's employees within the team, as well as when interacting with experts, stakeholders and the population	Electronic copies of approved ethical standards
5.	Availability of a document regulating the principle of	

	confidentiality and integrity of official information	Document regulating the procedure for handling confidential information
6.	Availability of specialists (at least 20 (twenty) specialists of various profiles, of which 2 (two) specialists in therapeutic, surgical, obstetric-gynecological, and pediatric profiles) included in a single register of independent experts, indicating the number of independent examination services provided by each expert	Information about specialists of organization according to Annex 17 of the Accreditation Rules
7.	Availability of documents on obtaining additional education in matters of independent expertise	A certificate of advanced training of at least 108 (one hundred eight) hours, received within the last 5 (five) years
8.	Availability of our own functioning Internet resource (website) with up-to-date information in Kazakh and Russian on healthcare issues	Link to a functioning website (screenshot of website pages)
9.	At least 30% of experts in their field have authored (co-authored) and/or made discoveries in the field of healthcare	Documents confirming publications by experts in healthcare publications

* In the case of post-accreditation monitoring of healthcare entities, documents are provided for the period of activity, 6 (six) months after accreditation.

Annex 4
to the Rules, terms for post-accreditation monitoring and revocation of accreditation certificates in the field of healthcare

Criteria for the accredited entity (for carrying out activities to confirm the readiness of healthcare managers for managerial activities as part of the manager certification procedure)

№	Criteria	Document
1.	Availability of documents of title stating that confirming the readiness of healthcare managers for management activities is one of the areas of activity of organization	Articles of association or certificate of state registration (re-registration) of a legal entity (for persons operating on the basis of model articles of association)
2.	Availability of premises equipped with a video surveillance system (audio and video recording) for conducting knowledge assessments and solving situational problems (case testing)	Document confirming ownership, temporary possession and/or use of the premises (for a fee or free of charge).
	Ensuring accessibility for healthcare professionals to knowledge	Document confirming the assessment of knowledge and decision-making skills in situational

3.	assessment procedures and situational problem solving (case testing)	tasks (case testing) in cities of republican and regional significance, the capital
4.	Availability of a document, confirming the planning of activities	Implementation of the Strategic Plan for 5 (five) years over the last 3 (three) years. Implementation of the Operational Plan until the end of the current calendar year.
5.	Availability of an approved budget providing adequate resources to achieve the objectives and targets set	Approved financial and economic activity plan/development plan for the last 3 (three) years with information on implementation
6.	Availability of a document regulating ethical standards (rules) that the organization follows when making decisions and determining rules of conduct for employees when serving applicants	Electronic copies of approved ethical standards
7.	Availability of job descriptions defining the functions and powers of the head and employees of the organization	Approved job descriptions for all specialists (for specialists working under employment contracts)
8.	Availability of internal rules and procedures for personnel management (appointment, selection, training, assessment, incentives)	Approved internal regulatory documents
9.	Availability of membership rules reflecting interaction between members and the organization, resolution of conflicts of interest and incidents relating to ethical conduct of members (for public associations)	Approved internal regulatory documents (regulations, rules)
10.	Availability of a document regulating the principle of confidentiality and integrity of official information	Document regulating the procedure for handling confidential information
11.	Availability of software, server and/or switching equipment, or a virtual (cloud) server to ensure security of documents	Document confirming Availability of functioning server and switching equipment or a virtual (cloud) server under ownership, temporary possession and/or use rights (for a fee or free of charge). List of software.
12.	Availability of own functioning internet resource (website) with up-to-date information in Kazakh and Russian on the activities of the organization	Link to a functioning website (screenshot of website pages)
13.	Availability of a functioning telephone for inquiries	A functioning telephone number listed on the website of organization

14	Availability of computer technology and other equipment (technology) to ensure the quality of services for assessing knowledge and solving situational problems (case testing). In the case of remote technologies, availability of an online proctoring system.	Documents confirming Availability of functioning computer and other equipment (technology) on the basis of ownership, temporary possession and/or use (for a fee or free of charge).
15.	The presence on the staff or among the members of not fewer than thirty-five (35) specialists with at least ten (10) years of professional experience in the healthcare sector, holding educational qualifications in the fields of “Healthcare” and/or “Business, Management and Law,” and having completed retraining in the specialties of “Public Health” and “Healthcare Management” and/or postgraduate education in the field of public health and healthcare management or public health	A list of specialists indicating the following information: last name, first name, patronymic (if applicable); education (name of the higher education institution, year of graduation, degree major as stated in the diploma); higher/postgraduate education; primary place of employment (name and address of the organization); length of work experience in the healthcare sector; a document confirming the relationship between the specialist and the organization (membership, civil contract, employment contract, or other), specifying the date on which such relationship commenced; member status (type of membership) , (if applicable)). Electronic copies of documents in accordance with Article 35 of the Labor Code of the Republic of Kazakhstan or civil-law contracts confirming work experience. Electronic copies of documents confirming training in healthcare management
16.	Availability of a bank of at least 200 (two hundred) test assignments and situational problems in Kazakh and Russian, developed based on the requirements of the authorized healthcare body to assess the preparedness of healthcare managers for management activities as part of the manager certification procedure. Availability of experts to develop and evaluate examination materials to confirm the preparedness of healthcare managers for management activities	Test assignments, situational problems (at least 200 (two hundred) in Kazakh and Russian languages) that meet the requirements established by the authorized body
	Availability of experts in the development and review of examination materials to confirm the	List of experts. Electronic copies of documents confirming training in the development and evaluation of examination materials. Electronic

17.	preparedness of healthcare managers for management activities	copies of documents in accordance with Article 35 of the Labor Code of the Republic of Kazakhstan or civil contracts confirming work experience
18.	Availability of the system of internal financial control and audit.	Approved regulation on the internal audit service

* In the case of post-accreditation monitoring of healthcare entities, documents are provided for the period of activity, 6 (six) months after accreditation.

Annex 5
to the Rules, terms for post-accreditation monitoring and revocation of accreditation certificates in the field of healthcare

Criteria for an accredited entity

(professional medical associations and public associations operating in the field of healthcare)

№	Criteria	Documents
1.	Availability of documents of title, confirming the area of activities and registration in the Republic of Kazakhstan	Articles of association or certificate of state registration (re-registration) of a legal entity (for persons operating on the basis of model articles of association)
2.	Availability of a premise	Document confirming ownership, temporary possession and/or use of the premises (for a fee or free of charge)
3.	Availability of a document, confirming the planning of activities by types of activities, specified in the constituent documents	Implementation of the Strategic Plan for 5 (five) years over the last 3 (three) years. Implementation of the Operational Plan until the end of the current calendar year.
4.	Membership in professional medical associations or public associations operating in the field of healthcare (hereinafter referred to as PMA or PA) of specialists, taking into account the representativeness of the profession. The ratio (share) of members shall be at least 15% of the total number of specialists in the Republic of Kazakhstan in this specialty	List of current PMA members with details (full name (if available), IIN) and specialty (according to current specialist certificate), membership status, individual membership number
5.	Improving the knowledge of its members. Every year, the PMA holds a general meeting or conference, congress, or convention of members to disseminate professional information	Agenda or program of the general meeting or conference, list of participants, minutes of the meeting or conference, information on the website (social networks)

6.	Availability of a document, regulating ethical regulations that guide members of the PMA or PA	Electronic copies of approved ethical standards
7.	One of the members must have a PMA or PA document confirming membership in an international health association or a related field	International certificate (certificate)
8.	Transparency of activities is demonstrated by an activity report indicating the activities carried out and financial performance indicators	PMA activity report (for the last 3 (three) years), available to PMA members
9.	Availability of own functioning Internet resource (website) with up-to-date information in Kazakh and Russian about the mission, activities, contact details.	Link to a functioning website (screenshot of website pages)

* In the case of post-accreditation monitoring of healthcare entities, documents are provided for the period of activity, 6 (six) months after accreditation.