MAGYAR FELSŐOKTATÁSI AKKREDITÁCIÓS BIZOTTSÁG

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RULES OF PROCEDURE

FOR THE ACCREDITATION OF FOREIGN CLINICAL TRAINING SITES IN MEDICAL EDUCATION

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IN MEDICAL EDUCATION

2026.

Contents

1. Preamble

1.1 The role of the Hungarian Higher Education Accreditation Committee (MAB) in this procedure is to assess the operation of foreign clinical training sites associated with medicical education programmes offered by Hungarian higher education institutions. The evaluation is carried out in accordance with the criteria developed by the MAB, taking into account the standards of the NCFMEA (National Committee on Foreign Medical Education and Accreditation, USA) and the WFME (World Federation for Medical Education).

1.2 MAB shall, without conducting a separate procedure, regard as accredited those clinical training sites for which the Hungarian medical higher education institution concerned has submitted a declaration to that effect and which

a) are training sites accredited in the member states of the European Higher Education Area (EHEA),

b) are accredited by the competent body in the United States of America (USA) (meeting the accreditation requirements of the NCFMEA),

c) are accredited training sites, in the relevant field of practice, of universities ranked between 1 and 300 in the QS Medicine Ranking, regardless of whether the training site and the accrediting university operate in the same country,

d) are the teaching hospitals of medical education institutions accredited by a WFME-recognised agency.

2. The purpose of the procedure

2.1 The purpose of accrediting foreign clinical training sites in medical education is to certify that specified hospital units of the clinical training site, in the fields of internal medicine, surgery, neurology, psychiatry, obstetrics and gynaecology, and paediatrics, comply with the accreditation criteria established by MAB and operate in accordance with those criteria.

2.2 As a result of the accreditation procedure, the MAB Board shall, by resolution, accredit the foreign clinical training site, which shall thereby obtain the status of a teaching hospital accredited by MAB.

3. Procedural rules and fees

3.1 Pursuant to the authorisation set out in Section 20(2) of Decree 19/2012 (II.22.) on certain issues relating to the quality assessment and development of higher education, and the procedural fees set out in the relevant resolutions of the MAB Board, the MAB is entitled to an accreditation fee for the preparation of the expert opinion, which shall be paid by the initiator of the procedure. The amount of the accreditation fee is set out in Annex 2 to the Rules of Procedure.

3.2 MAB shall send the fee request relating to the service fee (accreditation fee) to the higher education institution electronically within 15 calendar days of the receipt of the submitted accreditation documentation for the foreign clinical training site (including the application to initiate the procedure) in TIR 2.0. Once the fee request has been settled, the MAB will send the advance invoice, and the final invoice will be issued following the conclusion of the procedure (Board decision). The MAB shall inform the applicant higher education institution that an electronic fee request, advance invoice and final invoice will be issued and sent in relation to the accreditation fee. The institution shall pay the accreditation fee by bank transfer to MAB's account number 12011409-00137705-00400005 within 15 calendar days of the payment deadline stated on the fee request.

3.3 Pursuant to Section 7 of Act CXXVII of 2007 on Value Added Tax, the fees set out above are exempt from value added tax.

3.4 The MAB shall not commence the accreditation procedure until the service fee has been credited to the MAB's account specified in point 3.2.

3.5 If the applicant higher education institution fails to pay the service fee by the payment deadline specified on the fee request (final payment deadline) at the latest, it shall declare in writing whether it wishes to withdraw its request for the service.

3.6 If the applicant higher education institution wishes to withdraw from the accreditation process for any reason not attributable to the MAB, 100% of the service fee shall be retained by the MAB, and there shall be no obligation to refund it.

4. Initiation of the procedure

4.1 The procedure may be initiated in writing by a higher education institution in Hungary providing medical education by submitting to the MAB the application to initiate the procedure, which forms an Annex to these Rules of Procedure, together with the related documents detailed in points 4.2 and 4.3 of these Rules.

4.2 In the case of the accreditation of a foreign clinical training site that has not previously been accredited by the MAB and that does not fall under Section 1.2 of these Rules of Procedure, the following procedure (**full procedure**) may be initiated.

4.2.1 The documents relating to the procedure (questionnaire, letter of intent) shall be sent by the higher education institution initiating the procedure before MAB to the foreign clinical training site to be assessed.

4.2.2 The higher education institution providing medical education and initiating the procedure shall make the documents referred to in the previous point available to the MAB upon the commencement of the procedure.

4.2.3. For the purpose of conducting the procedure, the MAB shall establish an ad hoc visiting committee (Site-visit Team, hereinafter: SVT) for each institution to prepare decisions, provide opinions and make recommendations. The rules governing the composition and work of the SVT are set out in the MAB's Rules of Procedure. The members of the SVT shall be appointed by the MAB Medical Education College (hereinafter: MEC) from a list of experts approved by the Board. The election of the chair and members of the SVT shall take place at least two months prior to the on-site/online/hybrid visit. With regard to the composition of the visiting committee, institutional and geographical diversity must be taken into account. The student member of the SVT is primarily nominated by student organisations, but it is possible to elect a student member on the basis of an expert application.

4.3 In the case of the accreditation of a foreign clinical training site previously accredited by the MAB but with an expired accreditation, the following procedure may be initiated (**simplified procedure**).

4.3.1 The higher education institution providing medical education and initiating the procedure shall request the foreign clinical training site to submit a statement to the MAB, in which it must confirm that

- it undertakes to accept students and provide them with practical training for the next accreditation period (five years);
- whether there have been any changes since the previous accreditation, and if so, to explain these in detail.

4.3.2 Upon initiating the procedure, the institution initiating the procedure shall submit to the MAB and make available student feedback (covering the five years preceding the review) regarding the practical training undertaken at the relevant foreign clinical training site.

4.3.3 In this case, the procedure is document-based; no on-site visit shall take place, unless the feedback indicates that there has been a significant change in the infrastructure of the training site during the previous accreditation period which has affected teaching.

5. Formal review

5.1 The MAB Secretariat carries out a formal check on the documentation submitted via the TIR 2.0 system. In connection with the formal check, there is one opportunity to rectify any deficiencies. The institution will be notified of any request to rectify deficiencies electronically via the TIR 2.0 system. If the submitting higher education institution falls behind the 15-day deadline for rectifying deficiencies, the number of days of delay shall not be attributed to the MAB, and the duration of the delay beyond the deadline shall not be included in the procedural deadline. If the delay exceeds 10 days, the MAB shall terminate the procedure.

5.2 Applicants are permitted to submit supplementary information on one occasion. The deadline for submitting supplementary information is 15 days; this deadline may be extended once, by a further 15 days, upon request by the institution.

6. Site-visit Team

6.1 In order to conduct the accreditation procedure (**full procedure**) for a foreign clinical training site not previously accredited by the MAB, the MAB shall establish an ad hoc (visiting) committee (Site-visit Team, hereinafter: SVT) for each procedure to prepare decisions, provide opinions and make recommendations.

6.2 Selection and appointment of the Chair and members of the SVT:

6.2.1 The SVT shall consist of at least three members. From the date the SVT members' contract of engagement comes into force until the conclusion of the procedure, SVT members shall be granted access to the TIR 2.0 system for the purpose of accessing institutional documents related to the procedure. Members of the SVT who are not in an employment relationship with the MAB shall receive a fee for their work. The expert's fee shall be paid in accordance with the terms set out in the contracts of engagement.

6.2.2 A person may be appointed as a member of the SVT if he or she

a) carries out significant and active domestic and international teaching and research activities in the theoretical and practical units of medical education,

b) prior participation in a MAB institutional or doctoral school accreditation procedure shall be an advantage,

c) has no legal relationship with the medical education institution concerned by the accreditation or its clinical training site; and holds neither internal nor external membership in any of its institutional committees; and is capable of performing evaluation tasks independently in English, both in writing and orally,

d) is familiar with the WFME and NCFMEA criteria,

e) has at least an intermediate (B2-level) English language qualification, as well as basic IT skills (user-level knowledge of Microsoft Office, use of web browsers and email systems, and platforms suitable for online meetings – e.g. Microsoft Teams),

f) prior participation in domestic and/or international accreditation procedures and/or experience in internal quality assurance processes at the candidate's institution shall be an advantage.

6.2.3 The Chair of the SVT may be appointed from among persons who, in addition to meeting the requirements set out in section 6.2.2, also meet the following criteria:

a) a university or college lecturer or associate professor who has previously served as a member or chair and has at least five years' experience in higher education management; where necessary, and provided this is professionally justified, the requirement for prior service as a member or chair may be waived,

b) is familiar with the process of quality assessment procedures and is able to provide specific feedback and recommendations to the experts and institutional stakeholders involved in the accreditation process;

c) is able to coordinate and monitor the activities of the experts involved in the accreditation process throughout the entire accreditation process,

d) is able to finalise the reports.

6.2.4 Where possible, the SVT shall include a member of the MEC.

6.2.5 Where possible, the SVT shall include a foreign expert with expertise in the field of medical education.

6.2.6 The MAB Secretariat coordinates the conduct of the procedure.

6.2.7 The MAB Secretariat sends a request to SVT members electronically (via the TIR 2.0 database). The invitation shall specify the name of the clinical training site for which SVT membership is being sought. The MAB Secretariat shall grant SVT members access to the TIR 2.0 system until the conclusion of the procedure, for the purpose of accessing documentation relating to the procedure.

6.2.8 A person may not be nominated as a member if they are, or have been within the three years preceding the invitation, in an employment or contractual relationship with the training institution or the institution to which the training institution is affiliated, or if, for any other reason, they cannot be expected to assess the matter objectively. If a member of the SVT is otherwise unable to assess the matter objectively, they are obliged to notify the MAB Secretariat in writing.

6.3 Duties of the SVT

6.3.1 The Chair and members of the SVT shall assess the documentation relating to the procedure available in the TIR 2.0 database and on the basis of the site visit (including online participation) shall also review the website of the clinical training site in accordance with MAB's evaluation criteria.

6.3.2 The Chair of the SVT organises, coordinates and oversees the tasks of the SVT, and convenes and chairs the meetings of the SVT.

6.3.3 Members of the SVT shall attend SVT meetings and other discussions convened by the Chair of the SVT.

6.3.4 In addition to providing written expert opinions, members of the SVT shall participate in the preparation of the MAB evaluation report.

6.3.5 The Chair of the SVT is responsible for compiling the SVT's full report in English, ensuring the technical coherence of the text and the professional content of the report.

6.3.6 The chair and members of the SVT shall participate in person (including via online participation) in institutional visits.

6.3.7 During the visit, the SVT shall conduct panel interviews and lead discussions on specific topics.

6.4 Data processing and confidentiality

6.4.1 The Chair and members of the SVT shall not disclose information to third parties regarding proceedings not concluded by a public decision or matters currently under consideration.

6.4.2 The Chair and members of the SVT are obliged to keep all confidential information strictly confidential; they may not disclose it, copy it, reveal it, reproduce it or distribute it, nor may they grant third parties access to the information system containing confidential data.

6.4.3 If an SVT member discloses confidential information (verbally or in writing), makes it accessible (by copying, distributing or making it reproducible), or grants third parties access to the information system containing confidential data, they commit an ethical breach.

6.4.4 If an SVT member becomes aware that confidential information has been disclosed, whether intentionally or through negligence or carelessness, or has become accessible to unauthorised persons, they are obliged to notify the Chair of the MAB in writing without delay upon becoming aware of this.

7. Further stages of the procedure

7.1 In the case of the accreditation of a foreign clinical training site not previously accredited by the MAB (**full procedure**), the further course of the procedure is as follows.

7.1.1 The medical higher education institution initiating the procedure shall keep the MAB staff member responsible for the procedure continuously informed of the current status of the procedure and shall provide that staff member with the opportunity to participate at any stage of the procedure, including during site visits.

7.1.2 The medical higher education institution initiating the procedure (which maintains contact with the foreign clinical training site) shall, prior to the dispatch of the SVT, inform the foreign clinical training site of the competencies that its students are required to acquire in relation to the specific specialism and type of placement. They shall consult with the clinical training site to ascertain whether it is able to ensure that students can complete these practical requirements at the institution and whether it possesses the necessary capacity to do so. If this is not possible for all specialisms, the clinical training site may be granted partial accreditation for the relevant specialism.

7.1.3 During the site visit, conducted in person, the SVT assesses whether the foreign clinical training site meets the criteria prescribed by MAB. Where justified, the visit may also be conducted online; this shall be decided by the MEC.

7.1.4 Within 30 days of the visit, the SVT shall compile a report in English based on the documents and findings gathered during the visit, in which it assesses whether the professional, staffing and infrastructure requirements for accreditation have been met (see the assessment and evaluation criteria) at the foreign clinical training site and makes a recommendation regarding the site's eligibility for accreditation.

7.1.5 The MEC discusses the SVT's report and formulates a recommendation regarding accreditation eligibility and the scope of accreditation for the MAB Board.

7.1.6 The MAB Board shall take a decision on the matter. It shall notify the heads of institutions responsible for medical education (rectors, deans) of this decision by letter.

7.2 In the case of the accreditation of a foreign clinical training site previously accredited by the MAB but with an expired accreditation (**simplified procedure**), the further course of the procedure is as follows.

7.2.1 The MEC shall discuss the submitted documentation (statement, student feedback) and formulate a recommendation regarding eligibility for accreditation and the scope of accreditation for the MAB Board.

7.2.2 The MAB Board shall decide, by way of a resolution, on the accreditation of a foreign clinical training site and the scope of such accreditation. It shall notify the heads of higher education institutions (rectors, deans) responsible for medical education of this decision by letter.

7.3 The MAB shall publish on its Hungarian and English-language websites a list of those foreign clinical training sites in respect of which it has issued a positive decision following the procedure described above. Higher education institutions providing medical education shall publish the same information on their official websites, notify the training site of the decision, and continuously monitor and update the content on their Hungarian and English websites regarding study and practical training opportunities abroad that meet accreditation criteria.

8. Evaluation criteria

8.1 The accreditation criteria, assessment and evaluation criteria, and professional expectations applicable in the quality assurance procedure for foreign clinical training sites are as follows.

8.1.1 The following criteria shall apply when selecting an institution (hospital, clinic, institute) to be accredited as a clinical training site:

a) the training site must operate in a country where there is accredited medical training;

b) where possible, the accreditation of medical education should be carried out by an organisation recognised by WFME or meeting NCFMEA requirements;

c) the chosen clinical training site should, if possible, be a recognised training site of a medical education institution accredited in the country in question;

d) in countries/institutions where the above conditions (a) to (c) are not met, the accreditation assessment must be carried out with particular rigour.

8.1.2 The institution to be assessed (hospital, clinic, institute) must provide documented data as requested:

– by completing the data sheet sent by the Hungarian higher education institution providing medical education and acting as the contact point (see the 'Questionnaire' section of the attached English-language document), and

– it must declare that it is able to implement the practical training programme drawn up in accordance with the professional and specialist requirements (see the 'Academic requirements' and 'List of competences required' sections of the attached English-language document).

8.1.3 Required content and personnel conditions:

- the head of the organisational unit/department and their staff must have experience in training medical students and must have a residency programme;
- the head of the organisational unit/department must be a specialist with extensive experience who is recognised within the higher education system of the country in question;
- there must be at least three specialist doctors and a sufficient number of doctors at the relevant training site/department to allow time for teaching.

8.1.4 Required material conditions:

- infrastructure enabling the fulfilment of the professional and specialist requirements (as set out in the 'Academic requirements' and 'List of competences required' sections of the Questionnaire) in accordance with current standards, taking into account the specific characteristics of the relevant specialism;
- other facilities and services (as detailed in the bilateral agreements) ensuring that students accepted for practical training can carry out their tasks and work safely.

8.1.5 The fulfilment of the requirements set out in points 8.1.1–8.1.4 above is examined and assessed on the basis of the documentation received from the institution under review and the findings of the on-site visit by the SVT appointed for this task.

8.1.6 When certifying an institution that has been assessed and ultimately found suitable as a clinical training site, the SVT report must specify the specialist areas within that institution that meet the accreditation requirements and served as the basis for the accredited training site certification. A training site may be accredited as a teaching hospital for a given speciality or specialities if the relevant accreditation requirements for those specialities are met.

9. Outcome of the procedure

9.1 The MAB Board shall decide on accreditation and its scope by way of a resolution.

9.2 The period of accreditation may not exceed five years, but the MAB Board may specify a shorter period.

9.3 The MAB Board may also require a monitoring procedure to be carried out during the period of accreditation. The date of the monitoring procedure shall be determined by the MAB Board.

9.4 The report approved by the MAB Board, including the duration of accreditation and the date of the monitoring procedure, shall be published on the MAB website.

9.5 The institution initiating the procedure, or MAB at its request, shall notify the hospital concerned of the accreditation decision by email and shall attach:

- a link to the relevant decision published on the MAB website,
- an electronic copy (PDF) of the certificate issued by MAB, and
- the original certificate, which shall be sent to the institution initiating the accreditation procedure so that it may arrange for the ceremonial presentation of the original certificate on behalf of MAB.

9.6 The documents relating to the procedure shall be uploaded to the MAB TIR 2.0 database for all procedures.

10. Final provisions

10.1 These Rules of Procedure have been discussed and approved by the MEC.

10.2 The MAB Board approved these Rules of Procedure at its meeting on 27 February 2026 (Resolution No. 2026/2/XV.).

10.3 Any amendment to the rules governing the accreditation procedure for foreign clinical training sites requires a decision by the MEC.

Appendix

RECTOR'S APPLICATION
TO INITIATE THE ACCREDITATION PROCEDURE
for a foreign clinical training site

Details of the applicant institution:

- Name of institution: [Name of higher education institution]
- Registered office: [Address]

Contact details of the person responsible for the accreditation procedure (contact person):

Name: [Name of person responsible]

Email address: [Email address]

Telephone number: [Telephone number]

I, the undersigned, acting as the authorised representative of [name of higher education institution], hereby request the initiation of the [simplified/full] accreditation procedure in respect of the following foreign clinical training site.

Name of the clinical training site: [English and Hungarian names]

Address of the clinical training site: [country and town in English and Hungarian]

Name and position of the contact person at the clinical training site: [Name of the person with whom the university maintains contact and receives information regarding the decision, position]

Email address of the contact person at the clinical training site: [email address]

Telephone number of the contact person at the clinical training site: [telephone number]

The clinical training site [has previously been accredited, with accreditation valid until (date) / has not previously been accredited].

Please indicate whether the MAB Board's decision should:

☐ be sent directly by MAB to the clinical training site

or

☐ be sent to the institution that initiated the procedure.

To be completed by MAB:

Date of initiation of the procedure:

Expected timetable for the procedure:

- Year of the procedure:
- Deadline for submission of documentation:
- Date of contract signing:

Reference number:

MAB code:

Designated coordinator: