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ACCREDITATION COMMITTEE

THEMATIC ANALYSIS

Assessing Generative AI as an Analytical Tool: A Thematic Analysis of WFME Accreditation Reports

(THE WFME ACCREDITATION RESULTS OF MEDICAL EDUCATION IN HUNGARY)

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Introduction

Generative artificial intelligence (GenAI) emerged as one of the defining technological developments of the early 2020s, driven by a period of rapid advancement often referred to as the AI boom. Since then, it has been widely adopted across numerous industries, with applications spanning automated content creation, data processing, and decision support, among others. This proliferation has had far-reaching implications for both social and professional domains (Hamilton et al., 2023, p. 3). Academia has been no exception: the scholarly community is currently engaged in an active and ongoing effort to map the scope, boundaries, and practical conditions under which GenAI can be meaningfully and responsibly integrated into scientific research — if at all.

Qualitative research has been no less affected by this debate, thematic analysis in particular (Hill et al., 2026, p. 2). As a cornerstone of qualitative inquiry, thematic analysis offers researchers a systematic yet flexible approach to identifying, analysing, and interpreting patterns of meaning, commonly referred to as themes, within their data. Its versatility and relative accessibility have made it one of the most widely adopted methods across academic disciplines (Hill et al., 2025, p.1). However, thematic analysis can be a demanding and time-intensive process, requiring considerable manual effort (Zhang et al., 2024, p. 2), a challenge that becomes especially pronounced when working with large or complex datasets. It is in this context that GenAI has been identified as a potentially valuable tool, one that may help streamline and enhance the analytical process. Whether GenAI is genuinely capable of fulfilling this role in its current form, however, remains a matter of considerable debate among researchers.

Proponents of GenAI-assisted thematic analysis point to its capacity to process large volumes of data rapidly and efficiently. Unlike traditional tools, GenAI can handle extensive datasets of various types (encompassing not only structured but also unstructured data) within significantly compressed timeframes, while it has been observed to comprehensively read entire documents rather than selectively processing portions of them, drawing on content from the beginning, middle, and end alike (Anjos et al., 2024, p. 2). Compared to manual analysis, GenAI tools have been shown to generate initial themes considerably faster, while also producing a greater number of them, suggesting an ability to extract finer levels of granularity from complex data. In this regard, LLMs have been highlighted for their potential to streamline the coding process and surface patterns that might otherwise require substantial researcher time and effort (Hill et al., 2025, p.12; (Zhang et al., 2024, p. 2, 20; (Hill et al., 2026), p. 2; (Hamilton et al., 2023), p. 11-12; (Nguyen-Trung, 2025, p. 4950; (Perkins & Roe, 2024, p. 392). Critics, however, raise important concerns. A fundamental technical limitation lies in how large language models process text: rather than reading word by word, they operate on tokens, meaning that in longer documents, attention may be unevenly

distributed, with content toward the middle of a text potentially receiving less analytical weight than material appearing at the beginning or end (Nguyen & Welch, 2025, p. 18-19). More broadly, sceptics argue that while several studies have found GenAI-generated themes to bear considerable resemblance to those produced by human analysts (Hamilton et al., 2023, p. 11-12), this does not necessarily reflect a genuine capacity for thematic reasoning. LLMs, it is argued, were not designed with qualitative coding in mind, and as a result may struggle to code data accurately, reliably, and comprehensively, or to generate themes that are truly meaningful within the context of thematic analysis (Nguyen & Welch, 2025, p. 25).

A recurring criticism directed at GenAI systems in the context of scientific research concerns the phenomenon commonly referred to as hallucination, or more precisely, confabulation (Sui et al., 2024, p. 2). This refers to instances in which an AI system produces false information with apparent confidence, such as citing non-existent academic articles, referencing people who do not exist, or asserting factually incorrect claims (Hill et al., 2026, p. 3; Messeri & Crockett, 2024, p. 49). Critics emphasize, however, that, this behaviour is not similar to human forgetting, since LLMs do not confabulate because they have 'forgotten' something, but because they were not designed to establish truth in the first place. In this sense, they are perhaps best understood as highly sophisticated word association systems, generating plausible-sounding outputs rather than factually grounded ones (Nguyen & Welch, 2025, p. 7-8). That said, not all scholars frame this characteristic as a straightforward deficiency. Some have argued that the inherent unpredictability of these systems may in fact carry its own value: the errors produced can also give rise to unexpected connections and associations. In this view, the 'productive randomness' of LLMs may occasionally yield unusual, creative insights, potentially contributing to innovation (Meincke et al., 2024, pp. 1, 3, 22).

A further point of dispute concerns the degree to which GenAI can be considered neutral or objective — a quality that, if genuine, would represent a significant advantage over human researchers, who are inevitably subject to their own interpretive biases. However, this assumption is far from settled. The large datasets on which LLMs are trained are not bias-free: they reflect the social, cultural, and ideological patterns embedded in the texts from which they are drawn. As a consequence, these models do not simply process data neutrally, they absorb and reproduce the biases present in their training data, potentially carrying them into the analytical process in ways that are less transparent and harder to detect than the biases of a human researcher (Zhang et al., 2024, p. 19; Nguyen & Welch, 2025, p. 29). Additionally, GenAI tends to favour the questions and methods for which it is best suited, which risks marginalizing alternative approaches and narrowing methodological diversity of qualitative research (Messeri & Crockett, 2024, p. 53).

Closely related to these concerns is the question of reproducibility. Critics highlight that the process by which GenAI arrives at a given result is largely untraceable: the internal mechanisms of these models remain opaque, and the companies developing them do not

routinely disclose the prompts, design decisions, or architectural choices that shape their outputs. This means that the analytical process cannot be meaningfully checked or verified, undermining a basic requirement of scientific transparency (Christou, 2023, p. 1984; Nguyen & Welch, 2025, p. 25; Jayawardene & Ewing, 2025, p.164). Others, however, draw the opposite conclusion, arguing that AI-driven methodologies in fact enhance consistency, reproducibility, and generalisability when compared to standard qualitative methods, where analytical outcomes are inevitably shaped by the individual researcher's judgment and interpretation (Bennis & Mouwafaq, 2025, p. 7).

Several researchers locate the solution to these limitations in prompt engineering, arguing that carefully constructed prompts can meaningfully shape and improve the quality of GenAI outputs. This position is supported by a growing body of studies suggesting that advanced prompt engineering techniques consistently yield more reliable and desirable results in analytical tasks (Jayawardene & Ewing, 2025, p.188; (Hill et al., 2025, p. 2–3; (Novy-Marx & Velikov, 2025, p.16). Alongside this, fine-tuning and regular data updates have been proposed as further means of enhancing model performance, improving both the factual accuracy and contextual relevance of GenAI outputs. Not all scholars are convinced, however. A counterargument holds that these measures address only the surface manifestations of deeper, structural problems. The errors and limitations characteristic of LLMs, in this view, are not minor imperfections that can be gradually ironed out, they are inherent to the fundamental architecture of the technology itself. As such, incremental improvements, however sophisticated, may be insufficient to resolve them in any meaningful way (Nguyen & Welch, 2025, p.29–30).

In light of all these, it is perhaps unsurprising that views on the role of GenAI in scientific research — and in thematic analysis in particular — have developed into opposing positions. At one end of the spectrum, interpretation is understood as a fundamentally human activity, one that cannot be reduced to an algorithm. On this view, GenAI does not genuinely understand data but merely simulates understanding, and its use carries significant epistemological risks: it may foster illusions of comprehension, erode the quality of analyses, and ultimately homogenize research in ways that diminish its intellectual diversity (Novy-Marx & Velikov, 2025, p. 3-6; though the authors argue the claim extends across scientific disciplines more broadly). At the other end, opinions range from viewing GenAI as a valuable research assistant that supports and augments human scholarship (Hill et al., 2026, p. 14; Nguyen-Trung, 2025, p. 4950; Jayawardene & Ewing, 2025, p. 163), to more ambitious claims that AI can produce studies virtually indistinguishable from those authored by human researchers, achieving a quality in some cases close to that of human scholarship. Moreover, it has been argued that AI is capable of executing an entire research cycle autonomously, spanning ideation, literature review, experimental design, iterative testing, manuscript writing, and peer review. From this perspective, the role of the human researcher will not disappear but transform: freed from routine and exploratory

groundwork, researchers will be able to concentrate on larger and more ambitious intellectual endeavours (Lu et al., 2024, p. 2, 21; the authors suggest broader disciplinary applicability; Hill et al., 2025, p.12). As for the criticisms levelled at GenAI, its proponents suggest that the technology itself will provide the answers, with future systems likely incorporating automated fact-checking, dynamic citation verification, and self-improving validation mechanisms (Novy-Marx & Velikov, 2025, p. 17; Lu et al., 2024, p. 21).

The present study does not seek to resolve this debate, nor could it. In our view, a definitive settlement of these questions will be the outcome of a longer collective process, through which the scholarly community gradually arrives at consensus on the issues outlined above. That process can only be advanced through active exploration: by mapping the boundaries and conditions of GenAI's applicability in scientific research, and in thematic analysis specifically, from as many perspectives as possible. It is to this effort that the present study seeks to contribute, by examining an area in which the exploration of GenAI's capabilities has so far remained comparatively underrepresented: quality assurance in higher education. Within this field, thematic analysis is not simply a methodological preference — it is a practical necessity. Quality assurance agencies are tasked not merely with evaluating institutions against predefined standards, but with identifying systemic patterns, recurring challenges, and emerging trends across the institutions they oversee. As such, thematic analysis has become central to their legitimacy and their capacity to fulfil an enhancement-oriented function within the European quality assurance framework, providing the analytical infrastructure through which agencies can move beyond individual institutional assessments and speak to the broader landscape of higher education quality. It is in light of this that the question of whether, and how, GenAI can meaningfully contribute to thematic analysis in quality assurance contexts takes on particular relevance.

The analysis pursues two interconnected purposes. The primary aim is exploratory in nature: it seeks to examine whether different large language models are capable of contributing to conducting thematic analysis in the domain of quality assurance, and if so, under what conditions and with what constraints this can be meaningfully achieved. Simultaneously, and through this analytical lens, the study aims to shed light on the quality assurance challenges faced by Hungarian medical schools, as reflected in the accreditation reports produced by the Hungarian Accreditation Committee (MAB).

Methodology

The analysis examines WFME (World Federation for Medical Education) accreditation reports from all four Hungarian medical schools (Semmelweis University – Faculty of Medicine, University of Debrecen – Faculty of Medicine, University of Pécs – Medical School, University of Szeged Albert – Szent-Györgyi Medical School). Prepared by site visit teams following MAB's successful WFME recognition in March 2022, all four reports were completed by the end of the following year. Each report provides a comprehensive assessment of the institution's compliance with the established standards, offering detailed insights into the current state of medical education in Hungary. As the smallest segment of MAB's accreditation portfolio, this dataset offers a manageable yet representative sample, enabling thorough verification and comparison between AI-generated and human-generated findings, and rigorous examination of the advantages and limitations of AI-assisted analysis before considering broader application.

The analysis uses predetermined questions targeting specific quality assurance challenges. Rather than allowing themes to emerge organically, an analytical lens shaped by the research objectives is applied, examining how medical schools address identified quality assurance domains and assessing whether GenAI can effectively analyse these areas. A hierarchical question framework follows a deliberate three-stage sequence for each analytical domain: broad questions assess GenAI's initial understanding of the task (e.g., 'How do medical schools design the curriculum?'), followed by more specific sub-dimensional questions (e.g., 'How are learning outcomes determined and structured within the curriculum?'), before returning to the initial broad question to determine whether the more specific prompts enhanced GenAI's comprehension and analytical performance. This cyclical questioning approach allows us to evaluate how well GenAI understands the analytical task, and whether providing more specific guidance enhances its comprehension and ability to extract relevant information.

Crucially, all prompts were administered using a zero-shot approach — that is, without providing the model with prior examples or demonstrations of the expected output. While a hierarchical framework was applied to guide the analysis, no illustrative examples, chain-of-thought instructions, sentence relationship, content explanation or role-playing (Hill et al., 2025, p.2-3) were employed at any stage, preserving the zero-shot character of the prompting. The analysis deliberately adopted a minimal prompt engineering approach, aiming to assess the baseline analytical capabilities of the models in an unmediated form rather than optimizing performance through sophisticated techniques. This was a conscious methodological choice, reflecting the exploratory nature of the study, we were not asking how well GenAI performs under ideal conditions, but how far it can be meaningfully employed in a straightforward, unoptimized setting.

The analysis employs a hybrid methodology involving systematic comparison between AI-assisted and traditional manual analysis. Three prominent large language models — ChatGPT (GPT 5, plus version), Claude (Sonnet 4.5, free version), and Microsoft Copilot (GPT-4-turbo)— each received identical prompts to ensure comparability. This multi-model approach serves two purposes: assessing consensus and divergence among different AI systems, and determining which model is best suited to the particular demands of this type of analysis.

Every analysis conducted through GenAI is independently replicated through traditional manual thematic analysis, with the two processes carried out in parallel and without prior knowledge of each other's results. Comparison between human and AI-generated findings is conducted only after both analyses are completed. No quantitative similarity measure, such as the Jaccard index (Bennis & Mouwafaq, 2025, p. 6), was applied to assess the degree of overlap between human and AI-generated themes. This decision reflects the interpretive nature of thematic analysis itself: themes are not fixed, clearly delimited categories that can be directly matched against each other, and two themes may be theoretically equivalent while being expressed in entirely different terms, a nuance that such measures would fail to capture. Rather than producing a similarity score, our aim was to understand the nature and quality of convergences and divergences, a question that calls for interpretive judgment rather than quantitative calculation. This iterative comparison itself generates insights into the respective strengths and blind spots of human and machine analysis.

This hybrid approach opens several avenues of inquiry that neither method could address independently. Integrating GenAI into the analytical process allows for examination of whether AI can meaningfully accelerate the processing of large text volumes, and whether it surfaces patterns that might be overlooked in manual analysis due to cognitive load or interpretive bias. Simultaneously, the human verification component ensures that contextual nuances, institutional knowledge, and ethical considerations remain central to the interpretations. Ultimately, the study seeks to determine whether this combination of complementary approaches yields a more comprehensive and reliable analysis than either method could produce on its own. All prompts and their corresponding model outputs are reproduced verbatim in the appendix, ensuring full transparency of the analytical process and enabling each step to be independently examined and verified.

Analysis of the Quality Assurance Content of Medical Education in Hungary

ChatGPT 5 Performance: Strengths and Limitations

Strengths:

One of Chat GPT's greatest strengths is its ability to categorize available data and, with appropriately formulated prompts, to synthesize it. This demonstrated outstanding performance, for example, when examining the connection and integration of faculty-level and institutional student performance evaluation systems. (e.g.: “Collection/use: Faculties collect student feedback (Neptun/OMHV/Moodle/QR) and use it locally to adjust courses, exams and teaching.”).

In every topic and sub-topic examined, there is one or more overlaps between the responses of artificial intelligence (AI) and natural intelligence (NI). In most cases, Chat GPT 5 effectively complemented natural intelligence, deepening its professional foundation. This finding is supported by the responses to the criterion "communication of student and lecturer performance evaluation system measurement results at the faculty level, and feedback to stakeholders." (e.g.: NI: "Faculties publish performance evaluation results, but less information reaches students about the related action plans and their implementation." Chat GPT 5: "Multi-Level Dissemination: Feedback is systematically provided to various levels of stakeholders, including: Department Heads/Academic Staff: For direct review and action at the teaching unit level."). At the same time, numerous irrelevant pieces of information also appeared in the content, which were likely drawn from its previous responses. (e.g.: "Student Feedback as Primary Source: All institutions predominantly rely on student feedback (via questionnaires, surveys, or dedicated systems) as the main mechanism for collecting information on assessment procedures and overall study requirements.")

There are also fundamental differences in how Chat GPT 5 and natural intelligence seek relationships (cause-and-effect). While natural intelligence often exhibits stereotypical, simplifying mechanisms (e.g.: "In many cases, the involvement of external partners in decision-making and strategic planning mechanisms is unclear. However, all faculties consider the presence and opinion of stakeholders/affected parties important."), Chat GPT 5, due to its operational characteristics (rapid analysis of large texts typical of LLM systems), categorized and synthesized across a broader range (as it primarily sought the most probable answers), and its argumentation clearly relied on the shared text corpus (Szilágyi, 2024, p. 76-85). (e.g.: "Ambiguity of External Stakeholder Involvement: While external partners are often claimed to be involved, their specific role, level of engagement, or documentation of their participation is frequently noted as "obscure," "unclear," or insufficient. "Central Role of

Internal Stakeholders: Faculty/University management, academic staff, researchers, and students (often through student unions) are consistently mentioned as being involved in the mission statement's formation or awareness.")

Chat GPT 5 also incorporated abstract concepts into the content of the reports (categories not clearly derivable from the report sections). (e.g.: "Top-Down/Consultative Approach"). It did not generate separate explanations for these, and their connection to the context could only be inferred from the examples provided in the text. This was likely due to a previously used prompt and text not directly related to the current task, based on the experience of the NI user. This is often interpreted as transfer learning, which refers to a machine learning method for trained language models used to solve a new task. However, in the current study, this was not considered a consciously managed phenomenon. Furthermore, it is worth noting the fundamental difference that while artificial intelligence relies on explicit knowledge content, natural intelligence explicitly uses its tacit knowledge when formulating its findings (Bencsik, 2024). Therefore, we cannot fundamentally speak of real knowledge in the case of AI, but it undoubtedly diversifies the system of possible patterns.

An important characteristic is that Chat GPT 5 does not reject (exclude) possible patterns based on the text corpus. It can indirectly, but certainly, facilitate the review of its own findings, and even the validity of content generated by artificial intelligence. One of the collateral effects of this can be observed in thinking (and learning) mechanisms:

In the case of natural intelligence: a shift from cause-and-effect thinking towards a circular systems thinking, which, during the study, also strengthened our motivation to uncover deeper connections (Arany & Mihálka, 2019).

(In the research process, a multi-round query process, moving from specific (prompts generated based on standards and reports) to comprehensive findings (prompts asking about overarching problems), guided both natural and artificial intelligence.)

In the case of artificial intelligence: Continuing the above reasoning of natural intelligence, it encourages the application of circular questioning (Kelló, 2016), which, depending on the questioner's intentionality, helps in exploring patterns. In this case, the so-called prompts are specified, meaning that during our study process, we moved from more general questions towards uncovering patterns of problems within the quality assurance systems and mechanisms of the faculties under examination.

Limitations:

Based on the test tasks, Chat GPT 5 is less critical of the content of the text corpus used, thus often generating inaccurate answers and inserting pre-prepared text elements corresponding to previous prompts, on which it performs minimal modifications. (e.g.: "Student Feedback as Primary Input: Student feedback is consistently identified as a crucial, if not primary, source of information for reviewing the effectiveness of assessment methods

and study requirements."; "Student Feedback as Primary Source: All institutions predominantly rely on student feedback (via questionnaires, surveys, or dedicated systems) as the main mechanism for collecting information on assessment procedures and overall study requirements."; "Student Feedback is Key: All institutions heavily rely on structured student feedback, primarily through questionnaires and surveys, as a primary mechanism to gather information on the effectiveness of assessment methods and teaching.")

On numerous occasions, we had to request that responses be shortened because direct and indirectly related elements were mixed in the content, which led to a dilution of the text's content. This was a particularly important step when generating comprehensive answers, although it also carried the risk of losing certain content elements.

Confabulations most frequently occurred during its synthesizing activities. Especially when generating comprehensive answers, it often overlooked significant content differences between individual faculties. These cannot yet be considered outright confabulations, but the validity of the results, i.e., the findings, is questionable. Placing these into overarching argumentative categories, which could be considered confabulations with a slight exaggeration, definitely required research caution and constant attention.

It can be presumed as a general experience that the larger the text corpus and the more general the prompt, the greater the possibility of errors. Thus, certain tasks can only be considered final after multiple checks. This is primarily related to the intention of natural intelligence discussed in the strengths section, which includes the epistemological position of the person conducting the examination (or research). It is also a determining factor which forum (scientific, expert) the person is a member of, and for which forum the analysis is intended.

Finally, it is important to mention the supervision of Chat GPT 5's learning, which, throughout the entire research process, can be described as exploratory. This finding is particularly supported by subsequent observations. The prompts were compiled primarily following the preferences of natural intelligence and were not aimed at enhancing the performance of artificial intelligence. The documented refinement of the requests did not occur, which significantly influenced the outcome of the research. This is not to be considered a problem due to our chosen research methodology.

Responses to Comprehensive Questions:

Its answers were structured and well-arranged, generally in the form of bullet points.

However, caution was warranted because, during the synthesis of findings relating to individual faculties, the AI's responses could not always be considered well-founded. During the process, it frequently extended an observed pattern (characteristic) to other faculties as well. (e.g.: Chat GPT 5: “Incomplete harmonization of QA documents, poor version control and inadequate multilingual updating for international audiences.” Of this, “poor version

control and inadequate multilingual updating" appears in the reports of some faculties (DE and SZTE yes), but not in all cases; at PTE ÁOK, it can rather be interpreted as a lack of harmonization. It is not characteristic of SE at all.)

This phenomenon is also attributed to the operational characteristics of Chat GPT 5 as a language model (LLM) (probabilistic reasoning). Based on our research experience, it likely did not find sufficiently probable information or data in the newly shared, expanded database[1], thus complementing or covering it with its own conclusions (elements occurring with lower probability). This can also be interpreted as confabulation, i.e., the generation of false or misleading information (Marciniak & Baksa, 2023, p. 599-611). Based on our experiences, these might seem logically coherent and relevant to the topic of the study (e.g.: Chat GPT 5: "Weak institutionalisation of stakeholder engagement (external partners, employers) and unclear roles/responsibilities in QA governance." This statement is true based on the reports of the medical faculties of PTE, SZTE, and DE, and it is also related that the SE faculty's participation is praised. However, the report sections do not describe how they should perform these tasks. Thus, the answer is fundamentally incorrect."), but in reality, they contain factual errors (for example, in the above example, partly false information is found regarding the uniform characteristics of the faculties, which are clearly misleading). In general, several types of confabulation are possible, among which we examined intentionally generated false content and erroneous conclusions arising from the specificities of the provided text. In most cases, we found examples of erroneous conclusions. It can also be established that during our study, data noise was not considered the primary characteristic regarding the report sections (approx. 1-1.5 pages (A4) of text elements per faculty and standard), but rather their content anomalies (shortcomings, differing findings, variations in emphasis of examined aspects) may have presented a disturbing factor for Chat GPT 5.

Claude's Performance: Strengths and Limitations

Strengths:

Several notable instances emerged where Claude's outputs aligned closely with, or meaningfully complemented, the findings produced through manual analysis. When examining the question of stakeholders involvement in the formation of the mission statement, Claude's response regarding the University of Debrecen largely mirrored the conclusions reached through traditional analysis. It indicated that the Faculty's stakeholders participated in the development of the mission statement, and that the document was formulated through broad consultation involving faculty leadership, academic staff, researchers, and the Student Union. Claude also correctly noted that the role of external

partners remained somewhat unclear even following in-person consultations conducted during the site visit.

Similarly, when addressing the question of whether specific interventions and improvements are made based on feedback received on assessment processes, Claude correctly identified, in the case of the University of Pécs, that the accreditation report contained insufficient data to draw conclusions about concrete interventions — a finding that aligned with the manually derived result.

There were also instances where Claude's output substantively enriched the findings of the manual analysis. When assessing whether the medical school has a foundational quality assurance document that defines quality concepts and objectives in line with its training program and mission statement, Claude's analysis of the University of Debrecen went beyond the manual finding that the Quality Assurance Handbook was not aligned with WFME standards. Claude additionally flagged a version inconsistency: while the Hungarian version of the Quality Assurance Manual available at the time of the review was the 15th edition (December 2021), the Faculty's website displayed the 13th edition, and the English version remained the 8th edition, dating from 2017.

In rare but notable cases, Claude drew attention to findings that had been overlooked in the manual analysis. Regarding the University of Pécs, Claude correctly highlighted that, according to the accreditation report, only informal relationships exist between management, academic staff, and students, with formal documentation absent regarding how stakeholders were involved in the development of the mission statement.

Limitations:

The limitations of Claude' performance were, however, considerably more conspicuous than its strengths.

The most significant recurring issue concerns Claude's capacity for differentiation — that is, its ability to attribute specific findings accurately to individual institutions rather than generalizing across all four. This dysfunction manifested most clearly when Claude was tasked with providing a synthesized response to a given question covering all four medical schools simultaneously. In numerous instances, Claude extended a finding that was documented in the report of one — or just a small number of — institutions to all four, without adequate justification.

A telling example arose in the context of the question examining the alignment of the faculty's and the institution's mission statements, where Claude incorrectly identified the operation of ISO 9001:2015 certification as a strength shared across all institutions. In reality, the accreditation report for the University of Szeged contains no reference whatsoever to any ISO standard operating at that institution.

The inconsistency of Claude's performance in this regard is further illustrated by the following pair of examples. The accreditation report for the University of Szeged notes a low rate of feedback on individual teacher performance, with participation falling below 25%. This piece of information appears twice in Claude's outputs, but with markedly different — and revealing — degrees of precision. When responding to the broad question of how the monitoring and review of the assessment system is conducted across all four institutions, Claude correctly attributed this finding to the University of Szeged, noting low participation rates. However, when the topic shifted to feedback on the effectiveness of assessment methods, procedures, and other study requirements, Claude again cited low student participation rates (<25%), this time without specifying which institution the figure pertained to — thereby creating the misleading impression that this was a systemic problem common to all four medical schools.

A further example shows that, within a single response, Claude may both demonstrate and fail to fully apply the capacity for differentiation. When tasked with addressing the question of how medical schools develop their quality objectives and monitor their fulfilment, Claude on one hand appropriately distinguished between institutions, noting that quality objectives were often limited in scope — specifying that the University of Szeged focused exclusively on education and research, while University of Pécs had not formulated independent quality objectives. Yet within the same response, Claude incorrectly asserted that WFME alignment was incomplete across institutions — a claim that is not supported by the evidence, given that the Szeged report contains no reference to WFME in the relevant section, meaning the characterization "across institutions" was simply inaccurate.

Although less frequent than the differentiation issues described above, there were also instances where Claude's responses were not fully conclusive, owing to a selective reading of the accreditation reports. Specifically, Claude at times drew exclusively on the evaluative sections of the reports while overlooking relevant content contained in the recommendations. For example, when examining how the goals and values articulated in the mission statement are reflected in the training program and quality assurance processes, Claude correctly reproduced the report's finding that the educational plan can be deduced from the mission statement. However, it failed to incorporate the corresponding recommendation that the mission statement should make specific, rather than general, statements in order to better reflect the details of the educational programme. This omission resulted in a response that, while not incorrect, presented an incomplete picture — one that conveyed a more favorable assessment than the report as a whole suggests.

Responses to Comprehensive Questions:

A notable pattern emerged when the same overarching question was posed twice: first on the basis of the shared reports alone, and subsequently following a structured sequence of

more specific prompts designed to progressively deepen the analysis. The comparison between the two rounds of responses proved instructive on several counts.

In terms of analytical depth, Claude's second response to the overarching question was demonstrably richer than the first. Not only did it identify a greater number of issues relating to the functioning of quality assurance systems, but it also nuanced assessments that had already appeared in the initial round. Where the first response had identified concerns under categories such as ISO Framework Limitations, Outdated or Misaligned Documentation, Weak Assessment Quality Assurance, Poor Stakeholder Documentation, and Vague Mission Statements, the second round introduced additional dimensions, including Structural and Role Issues and the absence of Mandatory Action Plans. The refinement of existing findings was equally telling: while the initial response had noted that certain institutional documents were misaligned and unavailable in the languages relevant to the educational context, the follow-up response added the observation that WFME standards had not been integrated into the institutional quality assurance documents — a substantively important addition.

The iterative questioning also produced a visible improvement in one of the areas identified earlier as a core weakness of Claude's performance: the capacity to differentiate between institutions when synthesizing findings. In the context of the overarching question, Claude associated its observations with specific institution names considerably more consistently than in the earlier stages of the analysis. That said, this improvement was not without exception. The recurring issue surrounding ISO certification resurfaced here as well: Claude's responses again failed to specify that references to ISO standards in the accreditation reports pertained to only three of the four institutions examined, leaving the implicit impression of universal applicability uncorrected.

Across all three models, the key issue concerns analytical added value: the extent to which they moved beyond reproducing relevant report passages and engaged instead in genuine evaluation and synthesis. While each demonstrated this capacity to varying degrees, it was in Claude's responses to the overarching question that this quality was most consistently evident. Although overlaps between the three models' responses were naturally to be expected given that all drew on the same source material, Claude's outputs contained the greatest proportion of observations that went beyond what the other two models had identified. Moreover, the large majority of these additional findings were well-founded. Instances where a Claude assertion could be directly contradicted by the report evidence were rare, though not entirely absent: the claim that the quality assurance unit's roles and responsibilities were unclear at both the University of Debrecen and the University of Szeged was, in the case of Debrecen at least, factually inaccurate.

Copilot's Performance: Strengths and Limitations

Strengths:

Despite the limitations outlined below, Copilot demonstrated several qualities that merit recognition. While its responses were consistently lengthy and frequently incorporated information not strictly pertinent to the question at hand, they were nonetheless well-organized, exhibiting a clear and logically coherent internal structure. Where the content of the accreditation reports permitted, Copilot applied the same organizational framework to its responses across all four institutions when addressing a given question. For instance, when prompted to examine the role of the profession in domestic healthcare provision, education, and science in both domestic and international contexts, Copilot structured its responses uniformly across all four institutions, consistently organizing findings under the headings of Domestic Healthcare Provision, Education (Domestic and International), and Science and Research (Domestic and International). This structural consistency facilitated the comparative processing of information across institutions, as findings organized according to identical criteria are considerably easier to synthesize and evaluate.

A further strength — and one that stands in direct contrast to a limitation observed in Claude's performance — is Copilot's near-consistent practice of incorporating the relevant recommendations from the accreditation reports into its responses. Whereas Claude's outputs at times presented an incomplete picture by drawing exclusively on the evaluative sections of the reports and neglecting the recommendations, Copilot almost routinely recalled the recommendation or recommendations pertaining to the question under examination, thereby providing more comprehensive responses.

Limitations:

The most immediately apparent limitation of Copilot is the verbosity and lack of focus that characterized its responses throughout the analysis. Rather than addressing questions directly, Copilot routinely produced extended outputs that paraphrased passages from the accreditation reports — including content only loosely connected to the question posed. The volume of indirect information rendered the responses considerably less user-friendly, as the analytically relevant content frequently had to be identified and extracted from a much larger body of text. This tendency becomes particularly evident in comparative perspective: when the same prompts were submitted to all three models, Copilot's responses were consistently the least focused. A similar pattern was observable in ChatGPT's outputs, though to a markedly lesser degree.

Among the many examples that illustrate this issue, the first question of the analysis — concerning the alignment of the faculty's and the institution's mission statements — is perhaps the most instructive. In the case of the University of Debrecen, Copilot's opening

statement, which correctly established that the Faculty of Medicine's mission statement is explicitly aligned with that of the university, would in itself have constituted a fully adequate response. Instead, the answer proceeded to address the function of the mission statement, the process and stakeholders involved in its development, and portions of the associated recommendations — none of which were solicited by the prompt.

In common with the other two language modells, Copilot also exhibited a tendency to overgeneralize when tasked with synthesizing findings across all four institutions. When prompted to address a given question for all medical schools simultaneously, it frequently extended observations documented for one or a few institutions to the others without sufficient evidence. In the case of ISO certification, Copilot partly reduced this problem by regularly using the qualifier “often,” thereby avoiding the claim that ISO systems were definitively in place across all institutions. However, this caution was not consistently applied. When examining the presence of goals and values in the mission statement as they relate to quality assurance processes, for instance, Copilot stated that effective dissemination of the mission statement and its values among staff and stakeholders was identified as an area for improvement — a recommendation that had in fact been formulated exclusively in the accreditation report of the University of Debrecen.

A further limitation, and the one that most clearly distinguished Copilot from the other two models, is its tendency to stay too close to the source texts rather than engaging with them analytically. Some difficulty in stepping back from the reports and evaluating them critically was noticeable across all three models, but it was most apparent in Copilot's case. On a number of occasions, Copilot's responses reproduced passages from the accreditation reports almost word for word, as the following paired examples show: "The goals and values from the mission statement are reflected in the faculty's operational processes, indicating that the mission guides everyday activities and strategic decisions." (Copilot) / "The goals and values included in the mission statement are reflected in the operational processes of the Faculty." (Accreditation report) "It is recommended that specific rather than general statements be made in the updated mission statement to better reflect the focused details of the processes of educational programme design, review, and quality development." (Copilot) / "It is recommended that the mission statement include more specific statements to better reflect the details of educational program design, review, and quality development." (Accreditation report) This pattern suggests that Copilot, more than the other two models, acted as a paraphrasing tool rather than an analytical one — restating what the reports said rather than offering an independent assessment of it.

Responses to Comprehensive Questions:

An observation worth noting at the beginning is that one of the limitations identified in the earlier assessment of Copilot — namely, its reluctance to adopt a genuinely critical and analytical stance — was considerably less apparent in its responses to the overarching

question. In this context, Copilot produced observations that could be considered analytically its own, rather than restatements or near-paraphrases of the source texts, suggesting that the nature and scope of the prompt itself may influence the degree to which the model engages in independent reasoning.

Perhaps the most unexpected finding regarding Copilot's performance on the overarching question is how little fundamental difference existed between the two rounds of responses. In most instances examined in this analysis, the second round of responses — informed by the preceding sequence of specific prompts — was richer or more refined than the first. In Copilot's case, however, this pattern was reversed: it was the first-round response that contained observations absent from the second, specifically the recognition of varied maturity across institutions and the absence of a unified framework for translating mission statements into quality assurance objectives. Beyond content, the two rounds also differed in form. While the first response organized findings on an institution-by-institution basis, the second presented conclusions as fully cross-institutional, omitting specific institution names and offering a more generalized, and a more elaborated account of the issues identified.

This brings into focus a tension that runs through Copilot's responses more broadly. Although the first-round response did link many findings to particular institutions, a considerable number of assertions were nevertheless formulated without reference to any specific institution. Consequently, several statements overstated the findings, giving the impression of general applicability despite limited supporting evidence.

Another limitation concerns the precision of Copilot's language. In some cases, its wording was stronger than the available evidence justified. For example, stating that strong departmental autonomy actively resists standardized quality assurance processes would have been more accurate if described as hindering or impeding them. This distinction is analytically important, as resistance suggests a fundamentally different relationship than simple obstruction. Similarly, describing external stakeholder involvement as symbolic goes beyond the available evidence; terms such as not fully developed or insufficiently structured would have reflected the findings more precisely and more faithfully to the source material.

Comprehensive Assessment of Quality Assurance Systems

(University of Debrecen Medical School, University of Pécs Medical School, Semmelweis University Medical School, and University of Szeged Albert Szent-Györgyi Medical School)

Varying Maturity Levels of Quality Assurance Systems Across Faculties:

The background to these discrepancies lies in differences in the level of strategic awareness regarding quality culture. There are several reasons for this, the primary one being not merely a problem, but a quality management challenge. Faculty quality assurance is based on several frameworks with differing quality focuses, and the interoperability between them is not yet fully developed. Furthermore, the organizational scopes of faculty quality assurance systems vary, as there are "grey areas" in the definition of responsibilities and activities related to the capacity for effective intervention ("empowerment"). Additionally, the reports do not clarify the basis on which they review the "measurement capability" of their performance evaluation systems regarding the realization of quality objectives. It is also a significant related finding that visiting committee members observed reactive corrections at the faculties rather than systematic improvement cycles. Behind this lies a fundamental tenet of quality assurance systems: that ideal operation should strive for the prevention of non-conformities rather than mere error correction.

The External Stakeholder Engagement as an Area Needing Further Development:

Based on the evaluation reports formulated by the visiting committee, the process of stakeholder engagement is not always transparent, a fact behind which both natural and artificial intelligence found numerous interconnected causes. The deficiency, to some degree, of documentation regarding external stakeholder contact and engagement was highlighted repeatedly. This was interpreted not only in a mechanical quality assurance sense but also at the level of quality culture, pointing to the strong presence of documentation for compliance with rules, as opposed to the multidimensional (strategic) strengthening of external stakeholder engagement. A particularly important preference of the visiting committee members is the strategic-level interpretation of external stakeholders, which is a key area of the various standards, norms, and guidelines that constitute the faculties' quality assurance systems. All of this extends beyond faculty student and staff performance measurement practices, as well as general institutional pathways and mechanisms for feedback.

Inconsistency Between Quality Policy, Quality Strategy, and Procedures:

Harmonization problems typically arose regarding the content of faculty quality assurance documents. According to the reports, strategic documents (new missions/strategies) are not consistently translated into manuals, unit action plans, and the KPIs (Key Performance

Indicators) derived from them. Committee members also made numerous observations regarding quality assurance policies, which are documents of central importance from a strategic perspective. Most frequently, they highlighted the problem caused by the generality of objectives, particularly regarding their measurability, thereby pointing to obstacles in the fulfillment of the quality cycle (PDCA). From a practical aspect, they emphasized that without specific program developments and quality assurance indicators built upon them, evidence-based decision-making cannot be realized.

Decentralized Governance and Quality Assurance Units with Limited Authority:

In numerous instances, committee members referred with varying degrees of specificity to adaptation problems stemming from traditional academic culture as phenomena that trigger or imply hindering factors. Among other things, it was found that quality assurance systems are highly bureaucratic by their function, and furthermore, they exhibit a rigid structure that is less adaptive. Consequently, quality assurance units appeared more as organizational units encompassing management or administration rather than strategic-level quality management. Regarding their practical operation, it was also established that the activity of quality assurance units does not reach the executive, strategic level, and often does not exceed the dean's level, which limits their operation. This also points to the lack of clarity surrounding the issue of organizational-level empowerment, which is clearly a question affecting quality culture. Both natural and artificial intelligence found independently of each other that the strongly hierarchical and bureaucratic establishment—particularly in the field of quality assurance—typically appears as a hindering factor in recognizing internal partners and increasing the efficiency of decision-making processes.

Quality Assurance Systems Designed for Compliance with Regulatory Requirements:

The concept of quality philosophy, which involves constant "knowledge work" (the ongoing generation of actionable knowledge aimed at driving value creation), forms part of quality culture. Connected to this is the observation by committee members alling the attention of individual faculties to constant activity regarding the interpretation of the quality assurance system's function. Particularly valuable and crucial for higher education quality management is the analysis of the educational development impacts of the quality assurance system. A previous finding already discussed the danger of the generality of mission statements, which implies the difficulty of translating them into concrete educational and/or quality objectives. in practice, specifications for faculty performance evaluation systems tailored to the needs of medical education are not visible. Furthermore, a focus on administrative processes rather than pedagogical development is identifiable. These are all areas to be transformed into fundamental development (quality improvement) objectives in the case of medical schools.

Summary and Conclusions

This study set out to explore two interconnected questions: whether, and under what conditions, different large language models are capable of contributing to thematic analysis in the domain of quality assurance; and what the accreditation reports produced by the Hungarian Accreditation Committee reveal about the state of quality assurance in Hungarian medical education. The findings speak to both.

With regard the first question, all three language models interpreted the prompts well and consistently directed their responses to the relevant sections of the accreditation reports. In no instance did any of the models produce a response that was entirely incorrect or wholly unrelated to the question posed. The models also demonstrated a capacity for summarizing and synthesizing information, however this was precisely the area where their current limitations became most visible. Inaccuracies in the synthesizing responses most commonly stemmed from a failure to attribute specific findings to the correct institution, with observations documented for one or a few institutions being extended to all four, thereby distorting the overall picture.

As the analysis has shown, this is not a question of a complete lack of capability: there were multiple instances where the models performed this task successfully. Yet the cases where a model simultaneously succeeded and failed at differentiation within a single response are perhaps the most telling, as they point to what is arguably the most significant limitation of the examined models in their current state: unpredictability. The same task can be performed excellently and poorly within the same output, and it is not possible to reliably anticipate how a model will perform in any given instance. This makes the models unsuitable for independent operation, their outputs must in every case be traced back to the source material and verified by a human analyst. This in turn raises a fundamental practical question: whether the added value that GenAI brings to the analytical process justifies the considerable time and effort required to continuously cross-check and verify its outputs, a trade-off that each research team must carefully weigh before committing to an AI-assisted approach.

That said, the analysis also points to a genuinely important contribution that AI assistance can offer. All three models proved capable not only of identifying and extracting relevant information from the shared reports, but also stepping back from the source material rather than simply reproducing its contents. Even in these cases, traces of overgeneralization were detectable, rooted primarily in the same differentiation failures described above. Nevertheless, the models were at times able to introduce perspectives and observations that meaningfully enriched and extended the findings of the manual analysis, resulting in a more thorough diagnosis of the quality assurance systems of the medical schools under examination than would likely have not been achievable through traditional methods alone.

This capacity can be attributed probably, to the breadth of the models' training data, which in all likelihood included substantial material on quality assurance in higher education, a body of knowledge the models were able to draw upon and bring to bear on the analytical task, going beyond what was explicitly present in the shared documents. Given that the present study deliberately adopted a minimal prompt engineering approach in order to establish a baseline, the findings reported here should be understood as a conservative estimate of what these models are capable of. To what extent more sophisticated prompt engineering strategies could unlock greater analytical depth and precision, and whether systematically exploring this potential might yield findings that substantially revise the conclusions drawn here, remains an open and compelling question for future research.

On the substantive question of quality assurance in Hungarian medical education, the analysis — drawing on both AI-generated and manually derived findings — identified a set of recurring challenges that cut across all four institutions. Notably, all three language models, independently of one another and in their own formulations, converged on the same two fundamental problems. The first is a cultural and attitudinal one: across the institutions examined, quality assurance tends to be approached primarily as a compliance exercise — a set of requirements to be met — rather than as a driver of genuine enhancement and continuous improvement. This orientation has a direct structural consequence, which the models equally identified as another core problem: because quality assurance is not embedded at the strategic level, quality assurance units are unable to fulfil their role fully. Their activity often fails to reach beyond administrative functions, and falls short of the strategic influence that effective quality management would require. These two fundamental problems also help explain the other recurring findings identified in the analysis: the inconsistencies between strategic documents and operational procedures, the varying levels of system maturity across institutions, the limited transparency of stakeholder engagement processes, and the tendency to focus on administrative compliance rather than pedagogical development all appear, to a significant degree, as symptoms of the same underlying dynamic. The fact that three language models, working independently, arrived at this same diagnosis alongside the manual analysis lends additional weight to these conclusions, and underlines both the substantive significance of the findings and the potential value of AI-assisted analysis as a complementary tool in quality assurance work.

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Appendix

QUESTIONS

Standard 1 MISSION STATEMENT

The medical school has a public mission statement that sets out its values and goals.

Explanation: A higher education institution (HEI) must have a publicly available mission statement. The medical school must also have its own independent mission statement, which, where appropriate, must be aligned with the mission statement of the higher education institution that the medical school is part of. The purpose of this independent mission statement is to clearly define the role to be played by the medical school in the domestic provision of healthcare and in domestic and international education and science. The mission statement must address the social responsibility and third mission of the medical school. The mission statement must be capable of guiding the interpretation of the content of the programmes offered by the medical school, as well as the quality assurance activity performed by it.

Prompt No.	Evaluation criteria	Prompt
1	The alignment of the Faculty's mission statement with the University's mission statement.	Based on the chapter titled Mission Statement, summarize briefly the statements regarding the alignment of the faculty's and the institution's mission statements!
2	The identification and prioritisation of the Faculty's educational, research, and societal roles, as well as its role in national healthcare and in the scientific field both domestically and internationally. Planning based on differentiated strategic roles (educational, research, societal).	Based on the chapter titled '1. Mission Statement', summarize the statements made about the role of the profession in the domestic healthcare provision, education, and science in both domestic and international contexts. Summarize briefly point by point!
3	The grounding and implementation of the strategic objectives derived from the Faculty's (or University's) mission statement across the operational levels of the Faculty.	Based on the chapter titled "1. Mission Statement," please summarize the findings related to how the goals and values articulated in the mission statement are reflected in the training program and quality assurance.
4	The relationship between the mission statement and the quality culture, and its	Based on the section titled "Mission Statement," summarize the findings regarding the presence of goals and values

	manifestation within the institutional processes of medical education.	in the mission statement as they relate to quality assurance processes (planning, measurement, evaluation).
5	The identification of the Faculty's stakeholders and the extent of their involvement in the development of the mission statement.	Based on the chapter titled '1. Mission Statement', summarize the statements regarding the following points: The stakeholders and partners involved in the formation of the mission statement. Summarize briefly point by point!

Standard 3.2 QUALITY ASSURANCE OF ASSESSMENT

The medical school has processes in place to provide feedback on the effectiveness of assessment methods and procedures and other academic requirements. Assessment data are fed back to those concerned, and these data are used to improve the quality of the assessment system, the educational programme and the medical school.

Explanation: The medical school must monitor the outcomes of the assessment process and the related feedback throughout the entire educational cycle. It must examine whether the principles and methods of assessment motivate students for learning, support academic progress and are appropriate for ensuring the achievement of the intended learning outcomes. The medical school must examine if the principles and methods of assessment are used fairly.

Prompt No.	Evaluation criteria	Prompt
6	The linkage and level of integration between the Faculty's and the institution-level student performance assessment systems.	Based on the chapter titled 3.2 Quality Assurance of Assessment, summarize the integration and connection between faculty and institutional student performance!
7	The linkage and level of integration between the Faculty's and the institution-level student performance assessment systems.	Based on Chapter 3.2 Quality assurance of assessment, summarize the findings related to the following statement: The medical training institution has processes in place that provide feedback on the effectiveness of assessment methods, procedures, and other study requirements. Summarize briefly for each aspect!
8	Evaluation and development of the student and teacher performance assessment system.	Based on the chapter titled 3.2 Quality Assurance of Assessment, summarize the statements related to the following evaluation aspect: The review of the assessment system at the faculty is ensured. The review criteria are

		defined and known to those involved in the assessment. Summarize briefly point by point!
9	Faculty-level communication and feedback of the measurement results of the student and teacher performance assessment system to the stakeholders.	Based on Chapter 3.2, Quality assurance of assessment, summarize the findings related to the following evaluation criterion: The medical training institution regularly collects feedback on assessment procedures and feeds this back to the relevant stakeholders. Provide a brief summary for each criterion.
10	Faculty-level interventions based on the results of the student and teacher performance assessment system.	Based on Chapter 3.2, Quality assurance of assessment, summarize the findings related to the following assessment criteria: Specific interventions and improvements are made based on feedback received on the assessment processes. Summarize briefly for each criterion!

Standard 7 QUALITY ASSURANCE

The medical school has a quality assurance organisation and quality assurance processes and documents that support the implementation of its educational programme.

Explanation: The medical school must maintain a quality assurance organisation to regularly monitor and evaluate all processes that support students and faculty in the implementation of the educational programme. The medical school must have a core quality assurance document that defines the concept of quality and sets quality objectives in line with the educational 20 programme and the mission statement. The quality assurance processes of the medical school must be regulated and documented, and the outcomes of the quality assurance processes must be transparent.

Prompt No.	Evaluation criteria	Prompt
11	The implementation level of the quality assurance system of the medical training institution (instead of faculty-level).	Based on Chapter 7, The Quality Assurance System of the Medical School, summarize the findings related to the following question: Describe how the quality assurance organization of the medical school fits into the institution's quality assurance system. Summarize briefly for each aspect.
12	Soundness of quality objectives.	Based on Chapter 7, The quality assurance system of the medical school, summarize

		the findings related to the following questions: How does the medical school develop its quality objectives? How does it monitor their fulfillment? Summarize briefly for each point!
13	Harmonization of the standards and regulations that constitute the quality assurance system.	Based on Chapter 7, The Quality Assurance System of the Medical School, summarize the findings related to the following statement: The medical school has a basic quality assurance document that defines quality concepts and quality objectives consistent with the training program and mission statement. Summarize briefly for each point!
14	The level of practical implementation of quality objectives and their performance evaluation.	Based on Chapter 7, The quality assurance system of the medical school, summarize the findings related to the following statements: -The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program. -The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent. Summarize briefly for each statement!
15	The responsible persons and their competencies within the faculty's quality assurance system.	Based on Chapter 7, The quality assurance system of the medical school, briefly summarize the findings related to the following question: Briefly introduce the people responsible for the quality assurance system at the medical school.
16	Identification and involvement of external and internal partners in the faculty's quality assurance processes.	Based on Chapter 7, The quality assurance system of the medical school, briefly summarize the findings related to the following statement: Describe how stakeholders (external and internal) participate in the quality assurance activities of the medical school.

In the case of comprehensive questions concerning all four institutions, the prompt question was supplemented with the following: „Identify briefly the patterns that are common across all institutions."

ANSWERS

Standard 1 MISSION STATEMENT – Prompt 1

Based on the chapter titled Mission Statement, summarize briefly the statements regarding the alignment of the faculty's and the institution's mission statements!

Natural Intelligence Response

University of Debrecen:

The Faculty's mission statement is consistent with the University's mission statement and the core values of institutional quality management.

University of Pécs:

The Faculty's mission statement is consistent with the institutional mission statement.

Semmelweis University:

It has also been confirmed that the Faculty's educational goals and activities are consistent with the University's mission and vision.

University of Szeged:

It is consistent with the core values of the University's mission statement.

Comprehensive response:

No problems were identified; in all cases, the mission statements of the faculties examined are consistent. Possible anomaly: in the case of Semmelweis University, there is no separate faculty strategy based on the university's special role in medicine and the integration of doctoral schools.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

The Faculty of Medicine's mission statement is explicitly aligned with that of the University of Debrecen. The Faculty's mission statement reflects the core values and quality management principles of the University.

The mission statement is a high-level document underpinning the quality management system, quality policy, and objectives at both the Faculty and University levels.

The Faculty's mission statement is developed with input from key stakeholders (Faculty Management, Quality Assurance Committee, academic staff, researchers, Students' Union, and external partners), ensuring that its goals and values are consistent with institutional priorities.

The document notes that while the mission statement's alignment is clear, it recommends making the Faculty's mission statement more specific—especially regarding educational program design, review, and quality development—to further strengthen this alignment and operational clarity.

The mission statement is considered in developing and reviewing educational programs, but its articulation and dissemination among department heads and program directors could be improved for better institutional coherence.

Key Insight: The Faculty's mission statement is formally and substantively aligned with the University's mission and quality management system, but there is room for improvement in specificity and internal communication to maximize its impact.

University of Pécs:

The institution's mission statement (revised in 2020) is positioned as a high-level, overarching document that guides the principles of quality management and strategic development. It is linked to the strategic framework PotePillars, which outlines medium-term priorities and cultural values.

The evaluated mission statement of the faculty/programme is described as being in line with the institutional mission statement, particularly regarding the shared core values of institutional quality management. This means the faculty's aims and principles are consistent with those defined at the institutional level.

However, there is noted misalignment between earlier documents and the newer institutional mission: the 2018 Quality Policy Statement has not yet been updated to reflect the 2020 mission and the PotePillars strategic concept. This suggests partial but incomplete harmonization across levels.

Overall Conclusion

The chapter concludes that while the faculty's mission statement generally aligns well with the institution's mission and quality values, a more systematic harmonization of related

strategic and policy documents is still needed to ensure full consistency across the institution.

Semmelweis University:

Institutional Mission Statement:

The University's mission statement, vision, and strategic aims are publicly available and included in the Institutional Development Plan.

Faculty's Mission and Activities:

The Faculty's educational aims and activities are confirmed to be in strong alignment with the University's mission and vision. The Faculty works closely with key stakeholders to achieve the University's strategic goals.

Faculty Mission Statement Status:

The Faculty does not currently have its own publicly available mission statement. Instead, its educational plan and mission follow those of the University.

Recommendations for Improvement:

It is recommended that the Faculty develop and publish its own mission statement, set specific goals and tasks, and involve external stakeholders in its development and review.

University of Szeged:

The mission statement of the Albert Szent-Györgyi Medical School is described as being in line with the core values of the University's mission statement. Both emphasize the importance of medical education, research, and patient care, reflecting shared foundational principles.

However, the faculty's mission statement is noted to be quite general, lacking detailed references to education, research activities, or staff development. This generality makes it challenging to establish a direct link between the faculty's mission and its educational programmes or quality assurance processes.

The development of the faculty's mission statement involved internal consultations and some engagement with external stakeholders, but the extent of external involvement was unclear. The report recommends making the mission statement more specific to better reflect the processes of educational programme design, review, and quality development, and to ensure that development and quality goals can be clearly derived from it.

Key Recommendation:

To strengthen alignment, the faculty's mission statement should move from general to specific statements, explicitly detailing how its goals and values connect to educational

programme design, review, and quality assurance, and involving a broader range of stakeholders in its regular review and development.

Comprehensive response:

Alignment with Institutional Mission: All faculties either align their mission statements with the university's mission or explicitly state that their aims and activities are consistent with institutional values and strategic goals.

Integration with Quality Management: The mission statement is universally treated as a foundational document for quality management systems (often ISO 9001:2015), underpinning quality policy and objectives.

Need for Specificity: Across all institutions, there is a recurring recommendation to make mission statements more specific and actionable, particularly to better inform educational program design, review, and quality development.

Stakeholder Involvement: There is an emphasis on involving both internal (faculty, students, staff) and external (partners, employers) stakeholders in the development and review of mission statements, though the extent and clarity of this involvement vary.

Public Availability: Mission statements are generally made publicly available, often in multiple languages, reflecting transparency and accessibility.

Recommendations for Improvement: Each institution is encouraged to harmonize related documents (mission statement, quality policy, strategic plans), clarify stakeholder roles, and ensure that mission statements are disseminated and understood at all organizational levels.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Based on the provided text, the Faculty's mission statement aligns with that of the University, as well as with the core values of institutional quality management.

University of Pécs:

The institution's 2020 Mission Statement and its 2018 Quality Policy Statement are largely consistent. However, the 2018 Quality Policy Statement has not been fully aligned with the 2020 Mission Statement or the PotePillars conceptual framework. A recommendation is to harmonize the content of the mission statement, the PotePillars concept, and the quality policy statement. The mission statement itself is noted to be in line with the institutional mission statement and the core values of institutional quality management.

Semmelweis University:

The Faculty's educational plan and mission are aligned with the University's mission statement, even though the Faculty does not have its own separate, publicly available mission statement.

University of Szeged:

The Faculty's mission statement is generally aligned with the core values of the University's mission statement. However, it is noted that the faculty's mission statement is very general and lacks specific details on education, research, or staff development, which makes it challenging to link directly to educational programs or quality assurance.

Comprehensive response:

Common Patterns Across All Institutions:

General Alignment: Most faculties either directly align their mission with the university's or operate under the university's overarching mission.

Lack of Specificity: Mission statements are frequently criticized for being too general, abstract, or lacking sufficient detail to directly inform specific educational program design, review, or quality development goals.

Stakeholder Involvement: There's a recurring theme of stakeholder involvement (academic staff, students, management) in developing these statements, though often with recommendations for better documentation or broader engagement, particularly with external partners.

Foundation for Quality Management: Mission statements generally serve as high-level documents that underpin the institution's quality management system, policies, and objectives.

Regular Updates: Mission statements are subject to periodic review and updates to reflect current directions.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

The mission statement of the Faculty aligns with that of the University and the core values of institutional quality management. The Faculty's mission statement clearly states its position in Hungarian healthcare and references its role in domestic and international medical education.

University of Pécs:

The Faculty's mission statement is in line with the institutional mission statement and the core values of institutional quality management. Both documents are consistent with each

other, though the 2018 Quality Policy Statement has not been aligned with the 2020 Mission Statement.

Semmelweis University:

The Faculty's educational aims and activities co-align with the mission and vision of the University. The Faculty does not have its own publicly available mission statement, but its educational plan and mission follow those of the University.

University of Szeged:

The Faculty's mission statement is in line with the core values of the University's mission statement. The mission statement remains very general and it is challenging to establish a direct link to specific educational programmes or quality assurance.

Comprehensive response:

Strengths: Mission statements publicly available in multiple languages ISO 9001:2015 quality systems in place Internal stakeholders involved (faculty, students, management) Weaknesses: Too general and abstract Unclear external stakeholder involvement Cannot derive specific, actionable goals from them Poor dissemination beyond leadership.

Standard 1 MISSION STATEMENT – Prompt 2

Based on the chapter titled 1. Mission Statement, summarize the statements made about the role of the profession in the domestic healthcare provision, education, and science in both domestic and international contexts. Summarize briefly point by point!

Natural Intelligence Response

University of Debrecen:

It states that the utilization of knowledge created in higher education is a top priority, and its goal is to play a leading role in shaping health policy in the region and in Hungary. The Faculty's educational plan can be clearly derived from the content of the mission statement, which serves the purpose of their quality assurance system. The mission statement clearly defines the Faculty's place in Hungarian healthcare, refers to its role in domestic and international medical education, and highlights the importance of medical research in Hungary and internationally. The mission statement also addresses the social role of the medical faculty, i.e., its "third mission."

University of Pécs:

Based on the faculty's mission statement, it sees itself primarily as a healthcare provider and secondarily as a training provider. The mission statement lacks a section on its third mission, despite its decisive role at the regional, professional, and social levels.

Semmelweis University:

One of the university's missions and visions is to become Central Europe's leading international university and knowledge center in its field by 2024. By 2030, Semmelweis University aims to be among the five most successful medical universities in Europe and among the top 100 of the world's 28,000 universities. The main goal of Semmelweis University, as stated in its mission statement, is to improve the health of Hungarian citizens through high-quality training, research, and patient care.

University of Szeged:

It emphasizes the importance of medical education and continuing education, theoretical and clinical research, and patient care. The mission statement outlines the role of the Faculty in the Hungarian healthcare system in the region (third mission) and emphasizes the importance of medical education and training, theoretical and clinical research, and patient care.

Comprehensive response:

The role of each of the three missions of higher education is not always clearly communicated and defined. In some cases, the focus shifts towards the role of healthcare provider, and the perspectives of higher education strategy are less prominent. Faculties interpret their roles in higher education with varying degrees of conviction, and the related strategic guidelines are defined differently.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Domestic Healthcare Provision: The Faculty of Medicine holds a significant position in Hungarian healthcare. It aims to play a leading role in shaping health policy for the region and Hungary as a whole. The mission statement emphasizes the social responsibility of the medical school, prioritizing the utilization of knowledge created in higher education for the benefit of domestic healthcare.

Education (Domestic and International): The Faculty provides medical and health sciences education, including undergraduate, specialized, further, and doctoral (PhD) training. The mission statement highlights the Faculty’s role in both domestic and international medical education. The mission statement is publicly available in both Hungarian and English, reflecting its commitment to international education.

Science and Research (Domestic and International): The Faculty is active in scientific research, development, and innovation in accredited fields. The importance of research in medicine is emphasized for both Hungary and the international community. The Faculty's mission includes contributing to scientific advancement and innovation at both national and international levels.

University of Pécs:

Significant domestic healthcare role: The institution plays a direct and substantial role in Hungary's healthcare provision as a large healthcare provider.

Key contributor to healthcare workforce training: It also plays an indirect but crucial role in national healthcare through its function as a healthcare professional training institution, shaping future medical and health professionals.

Influence in national decision-making: The institution holds a consultative role in national decision-making mechanisms related to the healthcare system and medical education, contributing expertise and strategic input.

Strong professional and scientific presence: Through professional relationships and associations, the institution has a broad professional impact within Hungary's medical and scientific community.

Regional and international relevance: The institution plays a significant regional and international professional role, supported by its involvement in various professional associations and bodies operating beyond the domestic context.

Semmelweis University:

Domestic Healthcare Provision: The University's mission emphasizes improving the health of Hungarian citizens through high-quality training, research, and patient care. The institution aims to play a leading role in the national healthcare system by fostering innovation and excellence in medical practice.

Education (Domestic and International): The University and Faculty strive to be a leading knowledge center in Hungary and Central Europe. Their educational activities are designed to meet both domestic needs and international standards, with programs offered in multiple languages and a focus on attracting international students.

Science and Research: The mission statement highlights the importance of research and innovation, aiming to develop a special ecosystem that supports scientific advancement. The University aspires to become a top international institution and knowledge center, contributing to scientific progress both nationally and globally.

International Context: The University's vision includes becoming a leading international specialized university in Central Europe by 2024 and ranking among the top 100 universities

worldwide by 2030. This demonstrates a strong commitment to international competitiveness and collaboration."

University of Szeged:

Domestic Healthcare Provision: The faculty plays a significant role in the Hungarian healthcare system, emphasizing its regional importance. The mission statement highlights the faculty's contribution to healthcare services in Hungary, reflecting its commitment to supporting the national health infrastructure.

Education: The mission statement underlines the importance of medical education and training, positioning the faculty as a key institution for educating future healthcare professionals in Hungary. It references the historical legacy of medical education in Szeged, inspired by Albert Szent-Györgyi, and its ongoing influence on the quality and reputation of medical training. The faculty's educational mission is aligned with the core values of the university, aiming to maintain high standards in teaching and learning.

Science (Research): The mission statement points out the significance of both theoretical and clinical research conducted by the faculty. It acknowledges the faculty's contributions to scientific advancement, both within Hungary and in the broader international scientific community. The faculty's research activities are intended to support innovation and excellence in medical science.

International Context: The mission statement is available in both Hungarian and English, reflecting the faculty's openness to international engagement. The faculty's reputation, partly built on the legacy of Nobel laureate Albert Szent-Györgyi, supports its international standing in medical education and research. The faculty aims to contribute to global scientific and educational developments, not just domestic ones.

Comprehensive response:

Domestic Healthcare Provision: All faculties emphasize their significant role in supporting and improving domestic healthcare, both as providers and as training centers for future professionals.

Education (Domestic and International): Each institution highlights its contribution to medical education at both national and international levels, aiming for excellence and leadership.

Science and Research: The importance of scientific research and innovation is a recurring theme, with faculties aiming to contribute to both Hungarian and international scientific communities.

Social Responsibility ("Third Mission"): Faculties recognize their broader social role, including shaping health policy and serving societal needs.

Alignment with Institutional Values: Mission statements are consistently aligned with university-level strategies and values, ensuring coherence across organizational levels.

Aspirations for International Recognition: There is a shared ambition to achieve international prominence and recognition in medical education and research.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Healthcare: The Faculty holds a defined position in Hungarian healthcare and aims to lead in shaping regional and national health policy.

Education: It plays a significant role in both domestic and international medical education, providing training in medical, health, biological sciences, and PhD programs.

Science/Research: The Faculty emphasizes the importance of its research, development, and innovation in medicine on both a national and international scale.

University of Pécs:

Direct Healthcare Provider: The Institution plays a direct and substantial role as a healthcare provider.

Healthcare Professional Training: It serves as a substantial institution for training healthcare professionals.

Regional, Professional, and Social Role: Through its professional relationships and associations, including a consultant role in decision-making for the healthcare system and medical education, it plays a profound regional, professional, and social role.

Engagement in Professional Bodies: The institution is involved in professional associations and bodies.

Science and Innovation: Its strategic plan, PotePillars, includes "Science and Innovation" as a key pillar, aligning with its mission.

National, European, and Global Medical Education: The institution's role in national, European, and global medical education is recognized, although the mission statement itself is noted for not explaining this role clearly or specifically.

Semmelweis University:

Healthcare Provision: Improve Hungarian health through high-quality patient care. Increase competitiveness within the health care industry.

Education: Provide high-quality training (including international programs, PhDs). Implement innovative teaching methods. Aim to become a leading international specialized university (top 5 in Europe, top 100 worldwide).

Science/Research: Conduct high-quality research and foster innovation. Serve as a leading knowledge center at national and Central European levels.

University of Szeged:

Domestic Healthcare: Contribution to the Hungarian healthcare system (third mission) and patient care.

Education: Emphasis on medical education and training.

Science: Importance of theoretical and clinical research.

International Context: Not explicitly detailed for these areas in the current statement, though historical international scientific recognition is acknowledged.

Comprehensive response:

Common Patterns Across All Institutions:

Integral to Domestic Healthcare: All institutions see themselves as crucial players within the Hungarian healthcare system, contributing to its provision and development, often with a specific regional focus.

Combined Mission of Education, Research, and Patient Care: Each faculty explicitly or implicitly embraces a triple mission of providing medical education, conducting scientific research, and delivering patient care.

Quality Focus: There's a consistent emphasis on maintaining high standards in training, research, and healthcare services.

Knowledge Generation and Application: All aim to generate new knowledge through research and apply it through education and direct healthcare services for societal benefit.

Varying Degrees of International Ambition: While most explicitly aim for international recognition and participation in global medical education and research (PTE, Debrecen, Semmelweis), some (SZTE) maintain a stronger, more localized domestic focus.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Mission statement clearly defines the Faculty's position in Hungarian healthcare. References its role in domestic and international medical education. Emphasizes the importance of research in medicine both nationally and internationally. Covers the medical school's social role (third mission role). States high priority for knowledge utilization in higher education. Aims to play a leading role in shaping health policy of the region and Hungary.

University of Pécs:

Clearly states the Faculty's position in Hungarian healthcare. References its role in domestic and international medical education. Emphasizes the importance of research in medicine both in Hungary and internationally. Highlights the Faculty's social role (third mission). States that utilization of knowledge created in higher education has high priority. Intends to play a leading role in shaping the health policy of the region and Hungary.

Semmelweis University:

Main goal: improve the state of health of Hungarian citizens through high quality training, research, and patient care activities.

Objective: become a leading knowledge centre at both national and Central European levels.

Vision: become a leading international specialized university and knowledge centre in Central Europe by 2024. By 2030: become one of Europe's five most successful universities in medical sciences and among the top 100 of 28,000 universities worldwide.

University of Szeged:

Describes the history of medical education in Szeged and the influence of Nobel Prize winner Albert Szent-Györgyi. Outlines the Faculty's role in the region for the Hungarian healthcare system (third mission). Emphasizes the importance of medical education and training, theoretical and clinical research, and patient care. Mission statement remains general without specific details on education, research, or staff development.

Comprehensive response:

Strengths: All recognize triple mission: education, research, and patient care/healthcare provision All acknowledge regional and national healthcare roles All reference international context in medical education and research Third mission (social impact/health policy influence) mentioned across institutions.

Weaknesses: Statements too general and abstract - lack specificity about how roles are fulfilled International ambitions vary widely in clarity (Semmelweis specific with top 100 goal; others vague) Healthcare provider role often mentioned but not clearly articulated in operational terms Difficult to distinguish unique contributions of each institution from generic statements.

Standard 1 MISSION STATEMENT – Prompt 3

Based on the chapter titled 1. Mission Statement, please summarize the findings related to how the goals and values articulated in the mission statement are reflected in the training program and quality assurance.

Natural Intelligence Response

University of Debrecen:

It is recommended that the mission statement contain specific rather than general statements so that it can be better integrated into the details of educational program planning, review, and quality improvement. With regard to the mechanisms for implementing the Faculty's tasks, the content of the mission statement is too general and difficult to understand. It is essential that specific development and quality objectives can be derived from the mission statement.

University of Pécs:

The mission contains general and abstract statements that hinder the formation of objectives.

Semmelweis University:

The Faculty should prepare its own mission statement and make it publicly available on its website. Although the Faculty's mission is consistent with that of the University, the Faculty may define specific tasks and objectives (for example, in addition to common non-communicable diseases, communicable diseases should also be the focus of basic/preclinical and clinical education).

University of Szeged:

At the same time, the mission statement remains very general and does not contain detailed information about education, research activities, or staff development. It is important that specific development and quality objectives can be derived from the mission statement.

Comprehensive response:

There are differences in the development of individual faculty strategic objectives and their harmonization with university strategic objectives. The review, evaluation, and analysis of strategic objectives are inconsistent.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Educational Program Development: The mission statement guides the development and review of the Faculty’s educational programs. The educational plan and quality assurance system are clearly derived from the mission statement’s content.

Quality Assurance System: The Faculty’s mission statement aligns with the University’s core values and institutional quality management system. The University operates its quality

management according to the ISO 9001:2015 standard, with the mission statement serving as a foundational document for quality policy and objectives.

Operational Processes: The goals and values in the mission statement are mostly well reflected in the Faculty's operational processes, including planning, measurement, and evaluation within quality assurance.

Areas for Improvement: The mission statement is considered somewhat general regarding the specifics of educational program design, review, and quality development. It is recommended that the mission statement be made more specific to better support these processes.

Dissemination: There is a need for more effective communication and dissemination of the mission statement and quality assurance programs among department heads and program directors to ensure consistent application.

Summary: The mission statement's goals and values are integrated into the Faculty's training program and quality assurance processes, but greater specificity and broader dissemination are recommended to further strengthen this alignment.

University of Pécs:

How the Mission Statement Is Reflected in the Training Program

The mission statement provides a high-level strategic framework that guides the institution's educational directions. Through the PotePillars strategy—particularly the Learning Culture Concept—it influences the design and medium-term development of the training program.

Staff members at different levels (lecturers, students, non-teaching staff) are aware of and embrace the institutional mission and its strategic pillars, which indicates that the mission's values permeate the everyday teaching–learning culture.

However, the chapter notes that the mission statement currently remains too abstract. Because of its generality, it does not yet clearly translate into specific educational goals or program-level quality development objectives, making it difficult to derive concrete curricular or pedagogical development actions from it.

How the Mission Statement Is Reflected in the Quality Assurance System

The mission statement is embedded in the institution's ISO 9001:2015-based quality management system, where it forms part of the institution's quality policy framework and underpins the operating principles, quality policy, and quality objectives.

Despite general consistency, there is a misalignment between the 2020 mission statement and the 2018 quality policy statement, which has not yet been updated to reflect the revised mission and strategic concept (PotePillars). This indicates a partial but incomplete integration of mission-level goals into quality assurance processes.

The evaluation recommends further harmonization to ensure that mission-based values are systematically incorporated into quality assurance procedures, including the design, review, and improvement of training programs. It stresses the need for specific, not general, statements to allow measurable and actionable quality objectives aligned with the educational mission.

The chapter also emphasizes documenting stakeholder involvement (students, staff, external partners) in the development and review of mission-related documents, which is an essential quality assurance requirement.

Overall Synthesis

The mission statement sets a clear strategic direction and contributes to a shared culture of quality, but its broad and abstract formulation limits its direct application in curriculum development and quality assurance. To fully reflect mission-level goals in the training program and QA processes, the institution needs greater specificity, alignment among documents, and formalized stakeholder involvement."

Semmelweis University:

Reflection in the Training Program

Health impact focus in teaching: Curricular design (block teaching, small group education, elective courses) is aimed at improving the health of Hungarian citizens through high quality training and patient care competencies—directly mirroring the mission's public health orientation.

Stakeholder aligned educational aims: The Faculty collaborates closely with key stakeholders (research and clinical/hospital partners) so program aims and delivery support the University's strategic goals and vision.

International competitiveness in programs: Multilingual programs and ambitions to be a leading Central European knowledge center embed the mission's internationalization and excellence values into program offerings.

Reflection in Quality Assurance (QA)

Mission driven QA linkage: Educational aims and activities are confirmed to co align with the University's mission and vision, indicating that QA processes are used to verify alignment between teaching practice and strategic intent.

Governance and stakeholder representation: Mission formation by the Rector and Senate—with broad stakeholder representation (faculty, students in HU/DE/EN programs, PhD candidates, staff)—signals QA governance that incorporates diverse perspectives consistent with mission values.

Improvement recommendation for transparency: The chapter recommends the Faculty develop and publish its own mission statement and activity plan with measurable goals—strengthening QA by clarifying criteria, tracking accomplishment, and enabling public accountability.

External engagement in QA: Advises involving external stakeholders (training institutions, health industry partners) in developing/reviewing the Faculty mission, reinforcing QA mechanisms that ensure the program continually serves societal and professional needs.

University of Szeged:

General Alignment: The mission statement expresses broad goals and values—such as commitment to medical education, research, and patient care—which are consistent with the university's core values.

Operational Processes: The goals and values from the mission statement are reflected in the faculty's operational processes, indicating that the mission guides everyday activities and strategic decisions.

Quality Assurance System: The Education Committee, involved in developing the mission statement, plays an active role in implementing the quality assurance system, helping to ensure that the mission's values are embedded in quality processes.

Challenges in Specificity: The mission statement is described as very general, making it difficult to establish a direct link to the training program or quality assurance. There is limited specific information about education, research, or staff development.

Recommendations for Improvement: It is recommended that the mission statement include more specific statements to better reflect the details of educational program design, review, and quality development. This would allow clearer derivation of development and quality goals from the mission statement.

Comprehensive response:

Mission Statement as Foundation: In all faculties, the mission statement serves as a foundational document for both the training program and the quality assurance system.

Integration with Quality Management: The mission statement is integrated into the quality management system (often ISO 9001:2015), guiding quality policy, objectives, and processes.

Need for Specificity: There is a recurring recommendation to make mission statements more specific and actionable, so that concrete goals and quality objectives can be derived for educational program design and quality assurance.

Alignment and Consistency: There is a strong emphasis on ensuring consistency and alignment between the mission statement, strategic plans, and quality policy documents.

Stakeholder Involvement: Faculties are encouraged to involve both internal and external stakeholders in the development and review of mission statements and quality assurance processes.

Dissemination and Awareness: Effective dissemination of the mission statement and its values among staff and stakeholders is highlighted as an area for improvement.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Training Programs: The Faculty's educational plan is clearly derived from the mission statement, and its goals and values are largely reflected in the medical school's operational processes and program development.

Quality Assurance: The mission statement is fundamental to the University's quality management system, underpinning its principles, policy, and objectives, with its goals and values reflected in QA planning, measurement, and evaluation processes.

Areas for Improvement: The mission statement needs to be more specific to better integrate into educational program design, review, and quality development, and to enable clearer derivation of specific development goals and quality objectives.

University of Pécs:

Training Program Reflection:

Mission goals, particularly "Learning Culture" and "Science and Innovation" from PotePillars, guide medium-term development and are known to staff and students. Challenge: The mission statement's abstract nature makes it difficult to derive specific training program details, goals, and quality objectives.

Quality Assurance Reflection:

The mission statement is integrated into the ISO 9001:2015 quality management system, aligning with core values and forming a quality culture. Challenge: The 2018 Quality Policy Statement is not fully aligned with the 2020 Mission Statement and PotePillars, requiring harmonization. Challenge: Documentation is needed on how stakeholders are involved in the development and review of these foundational documents.

Semmelweis University:

The Faculty's educational aims and activities, including the introduction of teaching methods like the block-system, small group education, and electives, are confirmed to align with the University's mission of providing high-quality training and becoming a leading knowledge center. This alignment is validated by self-assessment. Recommendations suggest the

Faculty create its own public mission and activity plan, involving external stakeholders, to further enhance and assure the quality and reflection of these values in its programs.

University of Szeged:

Reflection in Operational Processes: The goals and values articulated in the mission statement are generally reflected in the operational processes of the Faculty.

Challenge in Direct Linkage: However, because the mission statement is very general and lacks specific details regarding education, it is challenging to establish a direct link to the specific educational programs or the Faculty's quality assurance system.

Need for Specificity: It is recommended that future updates to the mission statement include more specific details to better reflect the processes of educational program design, review, and quality development, enabling clearer derivation of specific development and quality goals.

Comprehensive response:

Common Patterns Across All Institutions:

Foundational Document for Quality Assurance: The mission statement consistently serves as a high-level document that underpins the institution's quality management system, its operating principles, quality policy, and objectives.

Intent for Educational Guidance: There is a clear intention for the mission statement to guide or directly influence educational plans, programs, and activities.

Challenge of Specificity: A recurring issue is that the mission statements are often too general, making it difficult to directly translate their high-level goals and values into specific details for educational program design, review, and quality development processes. This often leads to recommendations for more specific formulations.

Alignment with Broader Institutional Quality: The mission statement is expected to align with and contribute to the core values of institutional quality management and the overall quality culture.

ISO Certification: At least two institutions (PTE and Debrecen) explicitly mention adhering to ISO 9001:2015 standards for their quality management systems, indicating a structured framework within which the mission statement is expected to operate.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

The educational plan can be clearly deduced from the mission statement, which serves as the foundation for the quality assurance system. Goals and values are mostly well reflected in operational processes.

University of Pécs:

The institution's strategic plan (PotePillars) is integral to the mission statement, with the "Learning Culture Concept" developed as a strategy document. Staff awareness extends beyond upper management to lecturers, students, and non-teaching staff who embrace the contents.

Semmelweis University:

The Faculty's educational aims and activities co-align with the University's mission and vision, supported by implementation strategies like block-system teaching, small group education, and elective courses.

University of Szeged:

Goals and values included in the mission statement are reflected in the Faculty's operational processes.

Comprehensive response:

Strengths: Mission statements recognized as foundation for quality management systems General alignment between mission values and operational processes exists.

Weaknesses: Too abstract/general - cannot derive specific educational design or quality objectives Weak operationalization - difficult link between mission statements and actual program development Mission statements don't effectively guide concrete quality improvement actions Gap between high-level values and actionable educational goals.

Standard 1 MISSION STATEMENT – Prompt 4

Based on the section titled Mission Statement, summarize the findings regarding the presence of goals and values in the mission statement as they relate to quality assurance processes (planning, measurement, evaluation).

Natural Intelligence Response

University of Debrecen:

At the same time, the mission statement and quality assurance programs in general should be formulated and disseminated more effectively, especially among department heads and program directors within the Faculty.

University of Pécs:

The mission statement has a clear impact on the quality culture.

Semmelweis University:

The faculty does not have its own publicly available mission statement, but its educational plan and mission follow those of the University.

University of Szeged:

It (Mission Statement) does not contain detailed information on education, research activities, or staff development.

Comprehensive response:

There are differences between the faculties in terms of how quality culture is handled at the strategic level.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Foundation for Quality Assurance: The mission statement serves as a high-level document that underpins the Faculty's quality management system, quality policy, and quality objectives.

Integration into Processes: The goals and values articulated in the mission statement are reflected in the Faculty's quality assurance processes, including planning, measurement, and evaluation.

Operational Reflection: These goals and values are mostly well represented in the operational processes of the medical school.

Recommendation for Specificity: It is recommended that the mission statement include more specific statements to better support the detailed design, review, and quality development of educational programs.

Summary: The mission statement's goals and values are integrated into the Faculty's quality assurance processes (planning, measurement, evaluation), but greater specificity in the mission statement would further enhance their practical application.

University of Pécs:

Forms part of the ISO-based quality policy system: The mission statement is treated as a high-level foundational document within the ISO 9001:2015 quality management framework, underpinning quality planning and the definition of quality objectives.

Provides general strategic direction but lacks specificity: The mission statement contains broad, abstract statements, which makes it difficult to translate directly into specific, measurable quality assurance goals for planning, monitoring, and evaluation.

Inconsistency between mission and quality policy documents:

Although generally aligned, the 2018 Quality Policy Statement has not been updated to match the revised 2020 mission statement and the PotePillars framework, limiting coherent quality assurance integration.

Need for clearer link to QA processes:

The evaluation stresses that mission-level goals must be formulated more concretely so they can be incorporated into the design, review, and quality development processes of educational programs.

Stakeholder involvement insufficiently documented:

While informal communication exists, the institution lacks documentation on how stakeholders contribute to the planning, review, and evaluation of mission-related and quality assurance documents—an important QA requirement.

Supports a culture of quality but requires operationalization:

The mission statement helps create a shared institutional quality culture, yet it must be more explicitly connected to measurable QA indicators to effectively guide planning and evaluation.

Semmelweis University:

Strategic Planning: The University's mission, vision, and strategic aims are embedded in the Institutional Development Plan, guiding the planning of educational programs and quality assurance activities.

Measurement: The mission's focus on high-quality training, research, and patient care is reflected in the design of teaching methods (block-system, small-group education, electives) and in the tracking of program outcomes, supporting the measurement of progress toward strategic goals.

Evaluation: Quality assurance processes are used to verify that educational aims and activities align with the University's mission and vision. Stakeholder involvement in mission formation and program review ensures that evaluation criteria are consistent with institutional values.

Continuous Improvement: Recommendations include developing and publishing a faculty-specific mission statement and activity plan, with measurable goals and public accountability, to strengthen planning and evaluation within quality assurance.

External Stakeholder Engagement: The involvement of external partners in developing and reviewing the mission statement is advised, ensuring that quality assurance processes remain relevant and responsive to broader societal and professional needs.

University of Szeged:

General Reflection: The mission statement expresses broad goals and values that are reflected in the faculty's operational processes, including aspects of quality assurance.

Quality Assurance System: The Education Committee, which helped develop the mission statement, is actively involved in implementing the quality assurance system. This indicates that the mission's values are intended to guide quality assurance activities.

Lack of Specificity: The mission statement is described as very general, making it difficult to directly link its goals and values to specific quality assurance processes such as planning, measurement, and evaluation.

Recommendations: It is recommended that the mission statement be updated to include more specific statements. This would allow for clearer connections between the mission's goals and values and the concrete steps of quality assurance—such as planning, measuring, and evaluating educational program quality.

Stakeholder Involvement: The process of creating and updating the mission statement should be structured and documented, involving all relevant internal and external stakeholders to ensure that quality assurance processes are comprehensive and aligned with the mission.

Comprehensive response:

Mission Statement as Foundation: In all faculties, the mission statement serves as a foundational document for quality assurance processes, guiding planning, measurement, and evaluation.

Integration with Quality Management: The mission statement is integrated into the quality management system (often ISO 9001:2015), underpinning quality policy, objectives, and processes.

Need for Specificity: There is a recurring recommendation to make mission statements more specific and actionable, so that concrete quality objectives and measurable outcomes can be derived.

Alignment and Consistency: There is a strong emphasis on ensuring consistency and alignment between the mission statement, strategic plans, and quality policy documents.

Stakeholder Involvement: Faculties are encouraged to involve both internal and external stakeholders in the development and review of mission statements and quality assurance processes.

Dissemination and Awareness: Effective dissemination of the mission statement and its values among staff and stakeholders is highlighted as an area for improvement.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

The mission statement is a high-level document that underpins the operating principles, quality policy, and quality objectives of the Faculty's ISO 9001:2015 compliant quality management system. Consequently, the goals and values set out in the mission statement are reflected in the quality assurance processes, including planning, measurement, and evaluation.

However, the text also notes a recommendation for the mission statement to become more specific to better integrate into the quality development processes and allow for the derivation of clear development goals and quality objectives.

University of Pécs:

The mission statement serves as a high-level foundation for the institution's ISO 9001:2015 quality management system, informing quality policy and objectives, thus guiding planning. It also shapes the institution's strategic thinking and quality culture.

However, its abstract nature makes it difficult to derive specific development goals and quality objectives for effective measurement and evaluation. Additionally, a misalignment between the 2020 Mission Statement, PotePillars, and the 2018 Quality Policy Statement hinders coherent quality assurance processes, necessitating harmonization.

Semmelweis University:

Planning: The University's mission is part of its Institutional Development Plan. The Faculty is recommended to create its own mission and an "activity plan" with specific tasks and goals.

Measurement and Evaluation: A Faculty self-assessment and on-site visit confirmed alignment with the University's mission. The recommended "activity plan" would help measure goal accomplishment and evaluate implemented measures and improvements.

Overall: The mission statement underpins strategic planning, and assessments are used to confirm alignment, with recommendations pushing for formalized faculty-level QA processes including external stakeholder input.

University of Szeged:

It's challenging to directly link its goals and values to specific training programs or the quality assurance system. This lack of specificity hinders the derivation of concrete development and quality goals for planning, measurement, and evaluation within QA processes.

Recommendation: Future updates need specific statements for better integration with and utility for quality assurance.

Comprehensive response:

Mission statements across the institutions articulate goals and values, generally aligning with strategic plans and involving stakeholders. However, a common finding is that these statements are often too abstract or general. This lack of specificity makes it challenging to directly derive concrete development goals and measurable objectives for quality assurance planning, and subsequently hinders effective measurement and evaluation of quality processes related to educational programs. The primary recommendation is to make mission statements more specific and actionable for better integration into quality assurance.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Goals and values are reflected in QA processes (planning, measurement, evaluation). Mission statement underpins the quality management system (ISO 9001:2015). Educational plan can be clearly deduced from the mission statement. Goals and values are mostly well reflected in operational processes. Content is too general regarding delivery mechanisms. Difficult to derive specific development goals and quality objectives. Poor dissemination among department heads and program directors.

University of Pécs:

Mission statement is part of the quality policy document system (ISO 9001:2015). Creates a comprehensive quality culture with active management-lecturer-student relationships. PotePillars strategic plan is integral to the mission statement. Staff awareness extends beyond management to lecturers, students, and non-teaching staff. Mission statement is too abstract - difficult to understand delivery mechanisms. Misalignment: 2018 Quality Policy Statement not harmonized with 2020 Mission Statement and PotePillars. Cannot derive specific development goals and quality objectives. Insufficient documentation of stakeholder involvement.

Semmelweis University:

Faculty's educational aims and activities co-align with University's mission and vision. Mission includes strategic aims for 2021-2024. Specific implementation strategies: block-system teaching, small group education, elective courses. Strong cooperation with stakeholders (research-oriented, clinical/hospital).Faculty has no own mission statement (follows University's). Should develop faculty-specific tasks and goals. Needs better external stakeholder involvement in development and review.

University of Szeged:

Goals and values are reflected in operational processes. Aligns with University's core values. Mission statement is very general with little specific information. Challenging to establish direct link to educational program or quality assurance. Lacks details on education, research activities, or staff development. Cannot derive specific development and quality goals. Unclear stakeholder involvement (external partners' role remained unclear).

Comprehensive response:

Strengths: Mission statements positioned as foundational documents for quality management systems ISO 9001:2015 framework links mission to quality policy and objectives Goals and values generally reflected in operational/QA processes.

Weaknesses: Lack of harmonization between mission statements and quality policy documents Unclear mechanisms for translating mission into specific QA planning, measurement, and evaluation activities Abstract nature prevents effective operationalization into measurable quality indicators.

Standard 1 MISSION STATEMENT – Prompt 5

Based on the chapter titled 1. Mission Statement, summarize the statements regarding the following points: the stakeholders and partners involved in the formation of the mission statement. Summarize briefly point by point!

Natural Intelligence Response

University of Debrecen:

Stakeholders of the Faculty participated in the development of the Faculty's mission statement. As a result of broad consultation, the Faculty Leadership developed the mission statement involving the teaching staff, researchers, the Student Government, and—according to them—external partners. However, the role of external partners remained somewhat unclear even after the in-person consultations conducted during the site visit.

University of Pécs:

The individuals involved in the development/shaping of the mission statement and their points of contact can be identified.

Semmelweis University:

According to the Faculty's self-evaluation report, and as confirmed during the site visit, the University's mission statement was determined by the Rector and members of the Senate.

The Senate represents the University's stakeholders through members elected by the teaching staff and researchers of the faculties, students of the Hungarian, German and English programs, PhD students, trade union members, and employees in other positions. It is recommended that external stakeholders—such as training institutions and healthcare industry partners—actively participate in the development and review of the Faculty's mission statement.

University of Szeged:

Faculty representatives, the faculty leadership and the Education Committee participated in its development. The role of external partners in the development of the mission statement remains somewhat unclear to the committee conducting the on-site visit.

Comprehensive response:

In many cases the involvement of external partners in decision-making and strategic planning mechanisms is not clear. At the same time, each faculty considers the presence and opinions of stakeholders/interested parties important.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

The Faculty Management led the development of the mission statement. The Quality Assurance Committee, which plays a vital role in the quality assurance system, was actively involved. Academic staff and researchers contributed to the process. The Students' Union participated in the development. External partners were also involved, although their specific role remained somewhat unclear even after direct inquiry by the site-visit team.

University of Pécs:

Upper and middle management: These groups are clearly aware of and engaged with the mission statement and its strategic framework.

Lecturers (teaching staff):

The chapter notes that lecturers know and embrace the elements of the mission and PotePillars, indicating their role in internalizing and supporting its formation.

Students:

Students are also aware of the mission and strategic pillars, suggesting they are considered stakeholders in understanding and shaping the institutional direction.

Non-teaching staff:

Administrative and support staff are mentioned as being familiar with the mission and its associated strategic concepts, indicating their involvement as internal stakeholders.

External professional partners:

Although not directly involved in drafting the mission statement, the chapter highlights the institution's extensive relationships and roles in professional associations, healthcare provision, and advisory bodies—indicating these partners form part of the institution's broader stakeholder environment.

Need for documented stakeholder involvement:

The evaluation explicitly states that the institution has not documented how stakeholders were involved in developing the mission statement, PotePillars, and the quality policy—implying that formal involvement is expected but currently insufficient."

Semmelweis University:

Rector and Senate: The University's mission statement was defined by the Rector and the members of the Senate.

Academic Staff and Researchers: Academic staff members and researchers from different faculties participated in the process.

Students: Students from Hungarian, German, and English programs, as well as PhD candidates, were involved as stakeholders.

Trade Unions and Employees: Members of trade unions and employees elected by staff in other positions also contributed to the mission statement's development.

External Stakeholders (Recommendation): It is recommended that external stakeholders, such as training institutions and health industry partners, be actively involved in the development and review of the Faculty's mission statement.

University of Szeged:

Faculty Representatives: Representatives from the faculty were involved in developing the mission statement.

Faculty Management: The management team of the faculty played a key role in the process.

Education Committee: The Education Committee was actively involved, especially in implementing the quality assurance system.

Academic Staff and Researchers: Extensive consultations were held with academic staff and researchers prior to finalizing the mission statement.

Faculty Council: The Faculty Council participated in the discussions and development process.

Student Union: The Student Union was also consulted during the formation of the mission statement.

External Partners: The involvement of external partners was mentioned, but the specific role and extent of their participation remained somewhat unclear to the review team.

Recommendation: It is recommended that a wider range of external stakeholders be identified, documented, and more actively involved in the regular review and development of the mission statement and educational programme.

Comprehensive response:

Broad Internal Stakeholder Involvement: All faculties involve a wide range of internal stakeholders—management, academic staff, students, and committees—in the formation of the mission statement.

Consultation Process: Extensive consultations are conducted, often including formal committees and representative bodies.

External Partners: While external partners are mentioned as stakeholders, their roles are often less clearly defined or documented.

Recommendations for Improvement: There is a recurring recommendation to better document stakeholder involvement, clarify the role of external partners, and ensure structured, regular participation in the development and review of mission statements.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Core Participants: The stakeholders of the Faculty, the Faculty Management, and the Quality Assurance Committee participated in the development of the mission statement.

Consultation Process: The Faculty Management developed its mission statement through "extensive consultation" involving academic staff, researchers, and the Students' Union.

External Partners: The Faculty Management also claimed involvement from their external partners. However, the text notes that "the role of the external partners remained somewhat obscure even after a face-to-face consultation.

University of Pécs:

Undocumented Involvement: The text notes a lack of documentation regarding how stakeholders were involved in the formation of the mission statement, PotePillars, and quality policy.

Post-Formation Awareness: While staff and students are aware of PotePillars, this refers to their understanding after its development, not their participation in its creation.

Need for Review Process: There's a recommendation to document mechanisms for stakeholders to submit comments upon reviewing these documents.

Semmelweis University:

University Leadership: The Rector and members of the Senate were responsible for defining the University's mission statement.

Internal University Stakeholders (represented in the Senate): Academic staff members and researchers from different faculties. Students (from Hungarian, German, and English programs). PhD candidates. Members of trade unions. Employees elected to other positions.

Faculty's Main Stakeholders (in cooperation for mission aims): Research-oriented stakeholders. Clinical/hospital stakeholders.

Recommended External Stakeholders (for Faculty's mission review): Training institutions. Health industry partners.

University of Szeged:

Internal Stakeholders: Representatives of the Faculty, Faculty management, Education Committee, Academic staff, Researchers, Faculty Council, Student Union.
External Stakeholders: The role of external partners in the development of the mission statement was noted as "somewhat unclear" to the site-visit team.

Comprehensive response:

Common Patterns Across All Institutions:

Central Role of Internal Stakeholders: Faculty/University management, academic staff, researchers, and students (often through student unions) are consistently mentioned as being involved in the mission statement's formation or awareness.

Ambiguity of External Stakeholder Involvement: While external partners are often claimed to be involved, their specific role, level of engagement, or documentation of their participation is frequently noted as ""obscure,"" ""unclear,"" or insufficient.

Recommendations for Documentation and Broadening Engagement: There is a recurring theme of recommending better documentation of stakeholder involvement processes and, in particular, broadening and clarifying the active involvement of external partners.

Top-Down/Consultative Approach: The process often involves management leading the development, with consultations or involvement of other internal groups.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Involved: Faculty stakeholders, Faculty Management, Quality Assurance Committee, academic staff, researchers, Students' Union, and external partners (claimed).

Problem: Role of external partners remained obscure even after face-to-face consultation with site-visit team.

University of Pécs:

Gap: No documentation of how stakeholders were involved in development.

Recommendation: Need to document stakeholder involvement and how they can submit comments during reviews.

Note: Informal relationships exist between management, lecturers, and students, but formal documentation is missing.

Semmelweis University:

Involved: Rector and Senate members (including academic staff, researchers from different faculties, students from Hungarian/German/English programs, PhD candidates, trade union members, employees in other positions).

Strong cooperation: With research-oriented and clinical/hospital stakeholders for achieving mission goals.

Recommendation: External stakeholders (training institutions, health industry partners) should be actively involved in Faculty's own mission statement development.

University of Szeged:

Involved: Faculty representatives, Faculty management, Education Committee, academic staff, researchers, Faculty Council, Student Union.

Consultations: Extensive consultations held prior to development.

Problem: Role of external partners remained unclear to site-visit team.

Recommendation: External stakeholders (training institutions, health industry partners) should be actively involved beyond information exchange.

Comprehensive response:

Strengths: All institutions involve internal stakeholders (management, academic staff, students). Students represented through student unions/councils. Faculty management leads the process.

Weaknesses: External stakeholder involvement unclear or poorly documented at all institutions. Lack of systematic documentation of stakeholder involvement processes. Need for structured, transparent processes with documented steps and schedules. Gap between claimed involvement and actual clarity of external partners' roles.

Standard 3.2 QUALITY ASSURANCE OF ASSESSMENT – Prompt 6

Based on the chapter titled 3.2 Quality Assurance of Assessment, summarize the integration and connection between faculty and institutional student performance!

Natural Intelligence Response

University of Debrecen:

No information.

University of Pécs:

Quality assurance in faculty training is closely linked to the overall institutional quality assurance process. It is an integral part of it.

Semmelweis University:

The Faculty's assessment policy and quality assurance are clearly defined in the University's Organizational and Operational Regulations, Study and Examination Regulations.

University of Szeged:

The Faculty's assessment policy and quality assurance procedures are defined and published in the Faculty's Study Regulations, which form part of the institution's Study and Examination Regulations. Furthermore, the principles and rules of student feedback are defined and published in the University of Szeged's "Student Education Evaluation Regulations" and the Albert Szent-Györgyi Faculty of Medicine's "Regulations on Student Evaluation of Teaching Performance."

Comprehensive response:

The faculty performance evaluation systems operate within a comprehensive institutional framework. These can be derived from the hierarchical structure of institutional regulatory documents (institutional and faculty documents).

Artificial Intelligence (COPILOT) Response

University of Debrecen:

The chapter outlines a multi level, interconnected system in which student performance and feedback are continuously communicated between individual faculty members, department leadership, and institutional management. This creates a feedback loop that directly links teaching quality, assessment methods, and student learning outcomes.

1. Student Performance Insights Flow Upward Through the Institution

Students provide structured feedback on subjects, teaching quality, and lecturers once each semester via Neptun questionnaires approved by the Students' Feedback Subcommittee.

These results are forwarded to the dean, the Subcommittee president, and department heads, ensuring that institutional leadership gains clear insight into where performance issues or strengths lie.

2. Faculty-Level Reflection and Action

Department heads share the feedback with academic staff, discuss performance indicators, and identify areas for refinement in teaching or assessment practices.

Faculty members then consider specific actions—such as adjusting course content, improving practical sessions, or modifying the timing and venue of classes—to support student learning and achievement.

3. Institutional Quality Enhancement

Insights derived from student feedback inform institutional decisions on curriculum development and assessment policy.

Feedback from external partners, including foreign training sites, is also integrated into the curriculum design process, further aligning educational standards with broader expectations.

4. Continuous Quality Improvement Loop

The institution uses student feedback not only to evaluate teaching quality but also to enhance assessment methods and academic requirements.

Summarized results are made publicly accessible, creating transparency and reinforcing a culture of accountability and continuous improvement."

University of Pécs:

Student performance is monitored mainly at the faculty/unit level: Examination performance indicators are tracked by individual organisational units (departments, institutes), not centrally at the institutional level.

Institutional integration is limited: There is no institution-wide analysis or summary of examination performance; thus, data remain fragmented across faculties and units.

Student feedback exists institutionally but is used locally: Students can provide feedback on exams through the institution-wide Feedback System, but this feedback is primarily accessed and used by heads of organisational units, rather than being integrated into institutional-level evaluation.

Need for coordinated institutional analysis: The chapter highlights that joint analysis of performance indicators and student evaluations across units should be strengthened to achieve consistent institutional oversight.

Institution-wide recommendations lacking: The institution should develop overall recommendations for all units involved in teaching, based on combined performance data and student feedback—this is not yet systematically done.

Stronger alignment needed between program outcomes and assessment criteria: Differences between subjects' expected learning outcomes across the training program hinder the creation of institution-level assessment review criteria, indicating a gap between faculty-level and institutional expectations.

Semmelweis University:

The chapter describes a well structured connection between student performance, faculty action, and institutional quality assurance processes. The integration works through a clear, cyclical system that links individual teaching activities to broader institutional oversight.

1. Student Performance and Feedback Feed Into Faculty Decision Making

Students provide feedback every semester on: subjects, lecturers, assessment methods.

This feedback is collected through Neptun questionnaires, which are centrally approved and monitored. These data points directly reflect student performance, perceptions of exam fairness, and overall learning experience.

2. Faculty-Level Processing: Departments Interpret and Act

The collected feedback is forwarded to: the dean, the president of the Students' Feedback Subcommittee, heads of departments.

Department leaders then: share results with academic staff, discuss teaching and assessment implications, implement changes such as modifying course content, improving practical sessions, or adjusting lecture timing and venues. Thus, faculty use student performance and feedback to refine their teaching and assessment practices.

3. Institutional-Level Integration: Quality Assurance Structures Review Trends

At the institutional level, aggregated data contribute to: reviewing assessment methods, improving academic standards, adjusting curriculum design, considering external partner feedback (e.g., foreign training sites). This ensures that faculty actions remain aligned with program-level goals and overall institutional expectations.

4. Continuous Improvement Loop

The system establishes a feedback loop:

Students report performance perceptions and assessment experiences.

Faculty interpret and respond to these results in their departments.

Institutional quality assurance bodies analyze overall trends.

New policies and improvements influence future teaching and assessment.

This creates an integrated structure where student performance drives both faculty-level adjustments and institutional decision-making, ensuring consistent quality enhancement.

Integrated Conclusion

In summary, the chapter shows that student performance is the central connector between: faculty practice, departmental decision-making, and institutional quality assurance.

Feedback flows upward from students to faculty to institutional bodies, and improvement actions flow back downward—creating a unified, data-driven system that maintains and enhances the quality of assessment across the institution.

If you'd like, I can also provide: a shorter paragraph version for accreditation reports, a visual diagram of the feedback and governance flow, or a cross-institution comparison drawing on your other uploaded file.

University of Szeged:

The chapter describes a structured, multi layered system in which student performance and feedback form the central link between faculty-level teaching practices and the institution's overall quality assurance processes.

1. Student Performance Data as the Starting Point

Students provide feedback once per semester through standardized questionnaires in Neptun. This includes evaluations of: subjects, lecturers, the assessment experience itself. These data represent the most direct indicator of student performance and learning experiences at the institutional level.

2. Faculty-Level Analysis and Action

Collected feedback is forwarded to: the dean, the Students' Feedback Subcommittee president, heads of departments.

Department heads then: share results with instructors, discuss issues related to teaching and assessment, implement improvements (e.g., adjusting course content, scheduling, or practical arrangements). This creates an immediate connection: student performance ↠ faculty review ↠ pedagogical change.

3. Institutional-Level Quality Assurance Integration

Institutional bodies use aggregated feedback and performance indicators to: evaluate the effectiveness of assessment methods, improve academic requirements, revise curriculum elements, consider input from external training partners when designing or updating

courses. Thus, faculty-level findings feed upward, influencing institution-wide policies and educational standards.

4. Continuous Improvement Loop

The process creates a reinforcing cycle:

Students provide performance-related feedback.

Faculty respond through instructional and assessment adjustments.

Institutional leadership uses the data to refine broader assessment frameworks.

Updated practices lead to improved student performance and new feedback.

This loop ensures that individual student experiences systematically shape both faculty practice and institutional quality assurance.

Integrated Conclusion

The chapter demonstrates a tightly connected system in which student performance directly informs faculty actions, and these faculty-level developments feed into institutional assessment policies and continuous quality improvement. This creates a unified, evidence based approach ensuring that assessment quality evolves in alignment with student needs, institutional goals, and academic standards.

Comprehensive response:

Across all four medical faculties (PTE, DE, Semmelweis, SZTE), the chapter shows a clear, systemic relationship between student performance, student feedback, department-level evaluation, and institution-wide quality assurance. While each institution implements unique mechanisms, they share a common integration pattern:

1. Student Feedback as the Primary Data Source

All institutions collect structured student feedback through digital platforms (e.g., Neptun, OMHV, CooSpace, Google Forms) on: exam experience, course content, teaching quality, assessment methods. This feedback acts as the foundation for evaluating both individual instructors and broader assessment systems.

2. Department-Level Analysis and Action

Department heads and academic units: review student performance indicators, receive student evaluation data shortly after exam periods or at semester end, discuss feedback with teaching staff, propose or implement changes in teaching and assessment practices (e.g., adjusting exam formats, updating MCQs, optimizing course structures). This ensures faculty-level responsiveness and closes the first loop between student performance and teaching practice.

3. Institution-Level Oversight and Quality Assurance

Although institutional coordination varies across faculties, all institutions include: committees (e.g., Education Committees, OMHV Committee), dean's offices, quality assurance representatives, who receive aggregated performance data and student feedback.

They use this information to: develop institution-wide recommendations, revise or harmonize assessment methodologies, review program-level learning outcomes and alignment with assessment criteria. This represents the second loop: student performance faculty institution-level quality assurance.

4. Use of Feedback to Improve Teaching and Assessment

Common improvement actions include: modification of assessment methods, adjusting timing and structure of exams, updating question banks, ensuring consistency of evaluation criteria across units, piloting new feedback systems (QR-based, written exam feedback, block-level evaluations).

Common Patterns Across All Institutions

Despite variations in execution, the following shared structural patterns emerge clearly:

1. Student feedback is systematically collected and formally integrated

All faculties use standardized feedback systems to evaluate: teaching quality, subject organization, assessment fairness and clarity, exam experiences.

2. Department heads act as crucial intermediaries

They: receive raw or compiled performance/feedback data, disseminate results to instructors, initiate local improvements. This creates a consistent link between individual faculty performance and broader institutional standards.

3. Institutional bodies review aggregated data

University-level committees evaluate: cross-faculty patterns, assessment methodologies,

alignment with learning outcomes. This ensures a centralized quality assurance mechanism.

4. Continuous quality improvement is an explicit goal

All: use feedback to refine teaching and assessment, emphasize the need for improved representation in surveys, encourage periodic review of questionnaires, support transparent reporting of results and action plans.

5. Faculty and institution collaborate in a two-way feedback loop

Student performance, Faculty interpretation, Institutional quality enhancement, Updated teaching and assessment, New student performance data. This cyclic pattern exists across every institution reviewed.

Overall Synthesis

The chapter presents an interlinked ecosystem where student performance and student feedback drive educational quality at both faculty and institutional levels. Departments respond directly to student input, while institutions use aggregated data to shape broader assessment policies and ensure alignment with learning outcomes. Although the specific systems differ, the underlying frameworks are highly consistent, demonstrating a shared commitment to evidence-based improvement.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Process and governance: The faculty's QA of assessment is tied to its student feedback system governed by formal regulations ("Regulations for Student Feedback on Teaching Work"). Questionnaires in Neptun (pre-approved by the Students' Feed-back Subcommittee) collect semesterly opinions on courses and lecturers.

Data flow: Questionnaire results are sent to the Dean and the Subcommittee chair, shared with department heads and Subcommittee representatives, and summarized publicly on the Subcommittee website. Department heads discuss results with staff and report actions to faculty management.

Use of data: Feedback informs local changes (course content, practicals, venues, scheduling) and can feed curriculum development where external partner feedback is relevant.

Integration with institutional QA: Faculty-level feedback processes feed into faculty governance and inform academic requirements and quality improvement; however, the passage describes integration at the faculty level rather than explicit institution-wide aggregation or central analysis.

Outcome: The faculty uses feedback systematically to improve assessment and teaching quality; a suggested enhancement is to consider implementing OSCE for clinical assessment."

University of Pécs:

Local collection and use: Faculties/departments collect student feedback on teaching and exams (Neptun/OMHV/Moodle/QR/other tools). Data are used locally to adjust courses, exams, teaching methods and create departmental action plans.

Institutional linkage: Faculties feed feedback and some performance data into institutional QA structures (ISO-based quality systems, central QA units/boards). Central units review reports and may support development of methodology and action plans.

Missing central analysis: Examination performance indicators are tracked at unit level but not routinely analysed or summarised at institutional level; joint analysis of assessment indicators with student evaluations is underdeveloped.

Consequences: Lack of institution-wide synthesis limits consistent, comparable monitoring of student performance and hinders issuing coordinated recommendations to educational units.

Data quality issues: Heterogeneous collection tools, variable response rates (notably international programmes) and inconsistent/document versions across languages reduce comparability and transparency.

Recommended strengthening: Develop institution-level joint analyses of assessment metrics and student feedback; formulate centralized recommendations for unit leaders; align assessment review criteria with programme learning outcomes; improve data standardization, response rates and dissemination.

Semmelweis University:

Policy and governance: Assessment policy is codified in the University's Study and Examination Regulations and monitored by faculty bodies (Education Committee, OMHV Committee) which report to the Dean and Faculty Council.

Multi-source feedback collection: Student feedback on teaching and assessment is gathered via OMHV/Neptun surveys (semester/block), QR-code instant feedback, Moodle questionnaires and block-end reviews; tools and languages (HU/EN/DE) are provided, though response rates are higher in the Hungarian programme.

Data flow and use: Survey results are processed by OFMSZK and the faculty OMHV Committee, shared with department heads and the Dean's Office, published on Moodle/internal sites, and used locally to revise syllabi, exam formats, question banks, practical content and logistics.

Institutional linkage: Central units (OFMSZK) and faculty committees integrate feedback into quality-improvement actions and inform faculty-level educational governance; faculty-level outcomes feed upward through reports and action plans.

Quality assurance and review: The Education Committee annually reviews syllabi and assessment balance (normative vs. summative) and may recommend changes to assessment quantity and methods.

Gaps and development needs:

Routine, systematic feedback specifically on examinations and midterms is still in pilot stage and should be institutionalized for both written and oral formats.

Assessment-system evaluation should be standardized (e.g., add an overall assessment-system questionnaire to Neptun UNIPOLL).

Improve outreach to international students to raise response rates.

Departmental action plans based on feedback need annual evaluation for completion and should be published transparently alongside subsequent plans.

Net effect: Robust faculty-level feedback mechanisms inform local improvements and feed institutional QA structures, but stronger routine institutionalization, standardization and international student engagement are needed to ensure consistent, comparable institution-wide monitoring of student performance.

University of Szeged:

Policy and scope: Assessment policy and student-feedback rules are published in faculty/university regulations; however the faculty SAR focused on feedback systems rather than broader faculty-level QA processes.

Data collection: A faculty-wide feedback system (primarily NEPTUN, plus CooSpace/GoogleForm) gathers anonymous semester feedback on compulsory courses and practicals; supplementary once-per-curriculum awards and an online complaints system exist.

Data flow and governance: Compiled feedback (Excel) is sent to the Dean, faculty management and department heads; consolidated results are shared with Education Committee, Faculty Council, students and via the faculty newsletter. Implementation of recommended improvements is considered in subsequent instructor evaluations.

Use and impact: Feedback has driven changes in exam conduct and teaching practice; examples include suspension of an examiner following complaints and other corrective actions.

Gaps and risks:

Low response rates (<25%) limit representativity; a points-incentive system is used to increase participation. The faculty report does not clearly describe how feedback links to higher-level QA processes. Questionnaires and departmental action responses need regular revision, standardization and transparent publication.

Recommendations (summarized):

- Introduce on-the-spot (QR) feedback for rapid evaluation.
- Regularly revise and tailor questionnaire content to training objectives.
- Require structured, annual departmental action plans in response to feedback and publish them online.
- Improve representativity of student feedback (esp. response rates).

Comprehensive response:

Collection/use: Faculties collect student feedback (Neptun/OMHV/Moodle/QR) and use it locally to adjust courses, exams and teaching.

Institutional link: Faculty data feed into ISO-based institutional QA via central units (Quality Management/OFMSZK) and faculty QA boards.

Gaps: No consistent institution-level analysis of exam indicators; joint analysis of performance metrics and student evaluations is underdeveloped; tools and response rates vary, reducing comparability.

Good practices: Annual committee reviews, Moodle question banks, QR feedback, external partner input.

Needs: Create institution-level joint analyses, standardize data/tools, clarify responsibilities, routinely evaluate and publish departmental action plans, and improve international student response rates.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Process: Neptun-based system via Student Feedback Subcommittee; data shared with leadership and departments.

Participants: Dean, Subcommittee, department heads, instructors.

Frequency: Once per semester.

From Whom: Students; external partners (foreign training sites).

Form: Neptun questionnaires; results public on Subcommittee website.

University of Pécs:

Process: Decentralized - no institutional-level system; units monitor independently.

Participants: Department/institute leaders.

Frequency: 24 hours post-exam, available for one month.

From Whom: Students.

Form: Feedback system for exams; performance indicators tracked by units.

Semmelweis University:

Process: OMHV system via OFMSZK; QR-code feedback; end-of-block evaluations; annual curriculum review.

Participants: OFMSZK, OMHV Committee, Dean, Faculty Council, department heads, instructors.

Frequency: Annual surveys; immediate QR feedback; annual reviews.

From Whom: Students (all language programs); staff.

Form: Neptun questionnaires, QR-codes, Moodle. Results on Moodle; action plans on department websites.

University of Szeged:

Process: NEPTUN feedback system; Excel data to Dean/leadership; mass data processing.

Participants: Dean, Quality Assurance Rep, department heads, Educational Committee, Faculty Council.

Frequency: Per semester; annual awards voting.

From Whom: Students (<25% response rate).

Form: NEPTUN (primary), CooSpace, GoogleForm, annual awards, online complaints. Results in Faculty Newsletter.

Incentive: Points and priority enrollment for participation.

Comprehensive response:

Common Patterns:

Strengths: All institutions collect student feedback on teaching and assessment. Results shared with relevant stakeholders (deans, department heads, teachers). Feedback used to implement improvements.

Weaknesses: Low participation rates (especially at SZTE <25%; SE notes lower rates in English/German programs). PTE lacks institutional-level comprehensive analysis - monitoring only at unit level. Limited diversity in feedback sources - primarily students, minimal teacher/alumni/employer feedback on assessment methods.

Standard 3.2 QUALITY ASSURANCE OF ASSESSMENT – Prompt 7

Based on Chapter 3.2 Quality assurance of assessment, summarize the findings related to the following statement: the medical training institution has processes in place that provide feedback on the effectiveness of assessment methods, procedures, and other study requirements. Summarize briefly for each aspect!

Natural Intelligence Response

University of Debrecen:

The rules governing the Faculty's feedback system are set out in the document entitled "Student Feedback on Teaching" (OMHV), which is publicly available on the institution's website. Student feedback on courses and teaching staff is collected using questionnaires available in the Neptun system, which have been approved in advance by the Student Feedback Subcommittee.

University of Pécs:

Teaching performance is measured using a specially developed institutional system (Feedback-OMHV). There is no subject-specific system. The joint analysis of student and teaching performance indicators is not sufficiently developed.

Semmelweis University:

The OMHV assessment system allows students to express their opinions on teaching at the end of the semester or block via the Neptun system, and assessment methods are determined based on the results of the feedback.

During the on-site visit, Faculty representatives mentioned that the feedback rate is higher in the Hungarian program than in the English and German programs.

Another way of collecting student opinions on teaching is through QR code-based instant feedback at the end of lectures.

The Faculty collects data from various sources and uses feedback and responses on the learning process, teaching, and assessment (exams) to improve the quality of teaching, address student needs and issues, further develop institutional action plans, and introduce new methods and tools. intézkedési tervek továbbfejlesztésére, valamint új módszerek és eszközök bevezetésére.

University of Szeged:

This system evaluates the performance of individual instructors, as well as the performance of courses and departments. Feedback is usually provided through the NEPTUN system, but other systems also exist (CooSpace, GoogleForm).

In addition to the NEPTUN-based semester feedback system, there is a one-time, curriculum-level vote/feedback given by 6th-year Hungarian and English students and 2nd-year German students for the titles of "Best Instructor of the Year," "Best Practical Leader of the Year," and "Best Institute of the Year."

It is recommended that the Faculty develop an instant feedback system, such as a QR code-based system, for the effective evaluation of lectures (or any area requiring quick response).

Comprehensive response:

A karok között a változatos teljesítményértékelési eszközök kapcsán eltérések tapasztalhatók. Az OMHV kötelező mérésén kívüli, "karspecifikus" mérések kialakítása mindenképpen fontos kihívásként fogalmazható meg.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Feedback Mechanisms: Student feedback is systematically collected through the OMHV survey system (via Neptun), QR code-based instant feedback at lectures, and block-end feedback in years 4 and 5. The OMHV survey covers subjects, teaching, and examination methods, and is available in Hungarian, English, and German.

Review and Analysis: The OMHV Committee reviews the feedback results and reports to the Dean and Faculty Council. The Education Committee annually reviews course syllabi and assessment types, making recommendations for improvement.

Action and Improvement: Feedback results are used to enhance teaching quality, respond to student needs, and develop departmental action plans. Examples of improvements based on feedback include updated exam questions, expanded question banks, and new assessment tools (e.g., Moodle Test).

Transparency and Communication: Survey results are published on the Moodle site and internal websites, and action plans are submitted to the Dean's Office. There is a recommendation to further promote feedback opportunities, especially among international students, and to transparently publish the evaluation of action plans.

Summary: The institution has established, multi-level processes for collecting, reviewing, and acting on feedback about assessment methods and requirements, ensuring continuous quality improvement and responsiveness to student input.

University of Pécs:

1. Tracking of Examination Performance

Examination performance indicators are monitored at the level of organisational units (departments, institutes), which allows local evaluation of how assessment methods function.

2. Student Feedback on Exams

The institutional Feedback System enables students to provide structured feedback on exam quality and procedures for one month after the exam period, offering direct insight into the effectiveness of assessment methods.

3. Availability of Feedback to Heads of Units

Exam-related feedback is accessible to heads of organisational units, allowing them to reflect on and adjust their assessment practices.

4. Lack of Institution-Level Synthesis

There is no institution-wide analysis that integrates exam performance data and student feedback; analysis remains unit-level only. This limits the ability to evaluate assessment effectiveness comprehensively across the entire institution.

5. Potential to Improve Assessment Methodology

The chapter states that joint analyses (if developed) could support refinement of assessment methodology, including institution-wide recommendations for evaluation criteria.

6. Challenges in Aligning Learning Outcomes

Differences in learning outcomes across subjects make it difficult to build institution-level review criteria, which impacts how effectively feedback can guide improvements in assessment procedures.

Semmelweis University:

Student Feedback System: Students can provide feedback on exams through a formal system, available for a month after the exam period, starting 24 hours after each exam. This feedback is specifically designed to evaluate the effectiveness of assessment methods and procedures.

Access and Review by Organizational Units: Heads of departments and institutes have access to student feedback, allowing them to review and act on the effectiveness of assessment methods and study requirements within their units.

Performance Indicator Tracking: Exam performance indicators are tracked by organizational units, providing ongoing data on the effectiveness of assessment procedures.

Integration into Quality Assurance: The feedback and performance data are integrated into the institution's quality assurance processes, supporting continuous improvement of assessment methods and study requirements.

Recommendations for Further Development: The chapter recommends further development of joint analysis of assessment performance indicators and student feedback, and the formulation of recommendations for educational leaders to enhance the effectiveness of assessment processes.

University of Szeged:

Defined Procedures: The assessment policy and quality assurance processes are formally defined and published in the Faculty Academic Regulations and institutional Academic and Examination Regulations.

Student Feedback System: A faculty-wide feedback system exists, primarily collecting student feedback on assessment methods and study requirements through anonymous questionnaires (NEPTUN, CooSpace, GoogleForm). Feedback covers compulsory subjects,

practices, and seminars from the previous semester. Low participation rates are addressed by incentivizing students (e.g., points, priority admission).

Data Collection and Review: Compiled feedback data are submitted to the Dean, Faculty management, and department heads. The Education Committee, Faculty Council, and students receive consolidated data. Feedback is processed and published in the Faculty Newsletter.

Action and Improvement: Recommendations and improvements based on feedback are tracked and considered in subsequent instructor evaluations. There are examples of changes made in response to student feedback (e.g., suspension of an examiner).

Additional Feedback Channels: An online problem/complaint submission system allows students to report issues directly to the Dean's representative for quality assurance.

Recommendations for Enhancement: The committee recommends implementing rapid feedback systems (e.g., QR codes), regularly revising questionnaires, and requiring structured departmental responses to feedback, published annually.

Comprehensive response:

Systematic Student Feedback: All institutions have established processes for collecting student feedback on assessment methods, procedures, and study requirements, primarily through digital questionnaires.

Multi-level Review: Feedback is evaluated by faculty management, department heads, and dedicated committees, with results shared among stakeholders.

Actionable Improvements: Feedback is used to inform modifications and improvements in teaching, assessment methods, and study requirements.

Regular and Transparent Processes: Feedback is collected regularly (typically each semester or after exams) and results are transparently shared and acted upon.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Process: Online questionnaires collect student feedback each semester; results are evaluated centrally and at department level and used to adjust assessment, course content, and organization.

Participants: Students, Students' Feedback Subcommittee, dean, heads of departments, academic staff, faculty management, and some external partners.

Frequency: Once per semester per subject/lecturer.

Sources of feedback: Mainly students; additionally some external training partners. Form of feedback, structured online questionnaires, with summarized results shared and discussed.

University of Pécs:

The institution has a student feedback system for exams (available to unit heads). While exam performance indicators are tracked at the departmental level, they aren't analyzed institutionally. The document recommends improving the joint analysis of these two feedback types to generate recommendations for organizational units and refine evaluation methodologies. Additionally, it notes divergences in learning outcomes across subjects, indicating a need for institutional review criteria to better align the assessment system with overall program objectives.

Semmelweis University:

Effectiveness of Assessment Methods: Student feedback via annual OMHV surveys directly informs and influences assessment methods. This feedback drives improvements like updated Moodle tests and question banks, with ongoing pilot phases for regular exam feedback.

Procedures: Assessment procedures are formally outlined in university regulations and are systematically reviewed by the Faculty's OMHV Committee. The Education Committee also annually reviews and recommends optimizations for all assessment procedures.

Other Study Requirements: Feedback from students (OMHV surveys, QR codes, block-end reviews) covers broader aspects like teaching quality, subjects, and practicals. This diverse feedback on the "learning process" and "teaching" is crucial for developing action plans and introducing new educational tools.

University of Szeged:

Effectiveness of Assessment Methods & Procedures: Student feedback directly resulted in changes to examination conduct and even examiner suspension. An online system also captures assessment-related complaints.
Effectiveness of Other Study Requirements: Faculty-wide feedback covers compulsory subjects, their practices, seminars, and department performance.
Process for Using Feedback: Compiled feedback generates "recommended improvements" considered in subsequent assessments, and consolidated data is widely shared with committees, faculty, and students.

Comprehensive response:

Common Patterns Across All Institutions:

Student Feedback is Key: All institutions heavily rely on structured student feedback, primarily through questionnaires and surveys, as a primary mechanism to gather information on the effectiveness of assessment methods and teaching.

Formalized Feedback Mechanisms: There are official regulations, policies, or systems (like Neptun, OMHV) in place that govern how feedback is collected, ensuring a structured approach.

Feedback Loop for Improvement: All institutions describe processes where collected feedback is reviewed by various levels of faculty and management (department heads, deans, committees) with the explicit intention of making improvements or taking action to enhance the quality of education and assessment.

Desire for Greater Specificity/Actionability: While feedback processes exist, some institutions highlight a need to improve the depth of analysis, ensure better alignment of quality documents, or make the feedback more specific and directly actionable to refine assessment methods and study requirements.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Feedback processes exist: Student feedback system provides input on courses and teaching. Feedback used to implement modifications (e.g., expanding practical course content, optimizing schedules). External partner feedback incorporated into curriculum development.

University of Pécs:

Feedback processes limited: Exam performance indicators monitored only at department/institute level, not institutionally. Students can provide exam feedback within one month post-exam.

Major gap: Need to develop comprehensive joint analysis of performance indicators and student evaluations; institutional-level recommendations for assessment criteria review are lacking.

Semmelweis University:

Feedback processes exist: OMHV system collects feedback on courses, practical training, and exams. QR-code feedback allows immediate improvement of lectures. Educational Committee annually reviews assessments and can recommend balance between formative/summative evaluations and optimization of exam numbers.

Limitation: Regular feedback on assessments (exams and tests) is in pilot development phase - routine collection needs encouragement for both written and oral assessment forms.

University of Szeged:

Feedback processes exist: System evaluates instructors, courses, and departments. Data analyzed and shared widely. Implementation of recommended improvements monitored in subsequent evaluation periods. Evidence of exam procedure changes based on student feedback.

Comprehensive response:

All institutions have established student feedback systems with multiple collection channels (Neptun/OMHV, questionnaires, some with QR-codes), and there's evidence of data-driven improvements to teaching and assessment practices. Low student participation rates (<25%), lack of institutional-level comprehensive analysis of assessment effectiveness, underdeveloped systematic feedback specifically on exams/assessments, and absence of mandatory transparent action plans with follow-up evaluation.

Standard 3.2 QUALITY ASSURANCE OF ASSESSMENT – Prompt 8

Based on the chapter titled 3.2 Quality Assurance of Assessment, summarize the statements related to the following evaluation aspect: the review of the assessment system at the faculty is ensured. The review criteria are defined and known to those involved in the assessment. Summarize briefly point by point!

Natural Intelligence Response

University of Debrecen:

Overall, the medical faculty has processes in place to ensure feedback on assessment methods.

University of Pécs:

Performance evaluation processes require further development and harmonization at the faculty and institutional levels. Therefore, this area has not been elevated to the strategic level.

Semmelweis University:

The OMHV system is supervised by the Faculty OMHV Committee, whose members report to the Dean and the Faculty Council and provide expert advice on the further development of the medical program.

The action plans prepared by the institutes based on student feedback (OMHV) must be evaluated at least annually in terms of their implementation and the efforts made in the given areas of education.

Regular feedback on assessment (exams and midterm papers) is currently in a pilot development phase. Students can provide comments and feedback on assessment, for example through the evaluation of Moodle written exam questionnaires. The routine collection and evaluation of student feedback (OMHV) in this important area should be encouraged for both written and oral forms of assessment.

It is recommended that a questionnaire be integrated into the Neptun UNIPOLL system that focuses on evaluating the assessment system as a whole and the new assessment methods used in the three modules of the curriculum, with a view to continuously improving the quality of the existing assessment system.

It is recommended that feedback questionnaires be promoted more widely among international students (English/German programs) through student organizations.

University of Szeged:

The aggregated feedback data (in Excel spreadsheets) shall be submitted to the Dean and the Faculty management. The content of the questionnaires (the questions themselves) shall be reviewed regularly and designed to accurately reflect the quality of training and assessment in the direction of family medicine training.

Comprehensive response:

In the case of preparing faculties and WFME evaluators, it is also worth clarifying the types of performance evaluation system assessment. One relates to the evaluation of data measured by the performance evaluation system, and the other to the measurement performance of the performance evaluation system itself.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Regular Review Process: The faculty's assessment system is regularly reviewed through a structured feedback process linked to the medical school's feedback system.

Defined Criteria and Regulations: The criteria and regulations for feedback and review are set out in the publicly available document "Regulations for Student Feedback on Teaching Work".

Student Involvement: Students provide feedback on subjects and lecturers via questionnaires in the Neptun system, which are pre-approved by the Students' Feedback Subcommittee.

Transparent Evaluation: Feedback is collected once per semester, forwarded to the dean and the president of the Students' Feedback Subcommittee, and shared with department heads and subcommittee representatives.

Communication of Results: Department heads inform academic staff about feedback results, discuss them internally, and notify faculty management of any actions taken. Summarized feedback is published on the Subcommittee's website for university citizens.

Actionable Outcomes: Feedback results are used to modify and improve educational quality, such as expanding practical course content or optimizing lecture venues and timing.

External Feedback Considered: Feedback from external partners (e.g., foreign training sites) is considered when developing new courses or curricula.

Continuous Improvement: The collected data is used to enhance education quality, academic requirements, and to address student needs and expectations.

University of Pécs:

1. Assessment system monitoring occurs at unit (faculty) level

Examination performance indicators are continuously tracked by organisational units (departments, institutes), ensuring that assessment processes are reviewed locally.

2. Student feedback contributes to the review process

The institutional feedback system allows students to comment on exams after each exam period, providing important input for reviewing assessment methods and requirements.

3. Heads of units have access to review data

Department and institute leaders have access to both performance indicators and student exam feedback, enabling them to review assessment quality within their units.

4. Review criteria are not fully harmonized institution-wide

The chapter notes that due to divergent learning outcomes between subjects, institution-level review criteria are difficult to define, indicating that criteria are not yet uniformly established or applied across all units.

5. Need for further development of unified review processes

The institution lacks joint, institution-level analysis of assessment performance and student evaluations, meaning review processes are not yet fully integrated or uniformly known across all stakeholders.

6. Recommendations stress clearer, shared criteria

The evaluation explicitly recommends developing institution-wide criteria and providing common guidance for units involved in assessment, implying that current criteria are not yet clearly defined or widely known.

Semmelweis University:

Institutional Quality Assurance System: There is a unified institutional system for quality assurance of evaluation processes, which is linked to the review of educational programme content.

Tracking and Analysis: Examination performance indicators are monitored by individual organisational units (departments, institutes), not at the institutional level.

Student Feedback Mechanism: Students can provide feedback on exams within a month after the exam period, starting 24 hours after each exam. This feedback is accessible to heads of organisational units.

Need for Joint Analysis: The document highlights the need to further develop the joint analysis of assessment performance indicators and student evaluations, and to formulate recommendations for heads of organisational units.

Review Criteria Development: It is possible to develop review criteria for the assessment system at the institutional level, ensuring alignment with the learning outcomes and objectives defined in the programme requirements. This is necessary due to differences in expected outcomes across subjects.

Recommendations for Improvement: The document recommends enhancing the joint analysis of assessment indicators and student feedback, and creating institution-wide recommendations for revising evaluation criteria.

University of Szeged:

Regular Review Ensured: The faculty has established processes for the regular review of the assessment system, as defined in the Faculty Academic Regulations and institutional Academic and Examination Regulations.

Defined Review Criteria: The principles and rules for assessment and student feedback are clearly defined and published in official documents, such as the University of Szeged Policy on Student Evaluation of Teaching and the Albert Szent-Györgyi Medical School Regulations on Student Evaluation of Instructor Performance.

Transparency and Communication: The review criteria and processes are made known to all participants involved in assessment (faculty members, students, management) through published regulations and policies.

Feedback-Based Evaluation: The review process includes the collection and analysis of student feedback on assessment methods and instructor performance, using standardized questionnaires and online systems.

Action on Review Outcomes: Compiled feedback and review results are submitted to the Dean, Faculty management, and department heads, and are considered in subsequent evaluations and improvements.

Recommendations: The committee recommends regular revision of questionnaire content to ensure it accurately reflects the quality of training and assessment, and structured departmental responses to feedback should be published annually.

Comprehensive response:

Defined Review Criteria: All faculties have clearly defined review criteria for the assessment system, documented in official regulations or policies.

Transparency and Communication: Criteria and review processes are communicated to all relevant participants (faculty, staff, students).

Regular Review Process: The assessment system is reviewed regularly, often at the end of each semester or academic year.

Multi-level Involvement: Review involves multiple levels of the institution, including management, committees, department heads, and academic staff.

Feedback-Informed Improvements: Student and staff feedback is systematically collected and used to inform the review and improvement of assessment criteria and processes.

Recommendations for Further Development: There is a recurring emphasis on further developing joint analysis, improving representativity, and documenting departmental responses.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

The faculty has a regulated feedback system ("Regulations for Student Feedback on Teaching Work") that frames how assessment-related feedback is collected and used. Students complete standardized, pre-approved questionnaires in Neptun on subjects and lecturers once each semester. These questionnaires and their processing provide a structured basis for reviewing assessment methods and related study requirements. Results are evaluated by the dean and the Students' Feedback Subcommittee president and then shared with department heads and Subcommittee representatives. Department heads discuss results with academic staff and inform Faculty management about possible actions, ensuring systematic review of assessment-related issues. Summarized results are published on the Subcommittee's website, making the procedures and outcomes transparent to university citizens. Through these regulated tools and open publication, the criteria and procedures for review are, at least in part, defined and accessible to those involved in the assessment process.

University of Pécs:

Review System: An institutional quality assurance system exists, but exam performance indicators are tracked at the unit level, not fully analyzed institutionally. Joint analysis of performance data and student feedback needs further development.

Criteria Defined: Institutional-level review criteria for the assessment system are not fully defined; their development and revision are identified needs.

Criteria Known: It's not explicitly stated that current review criteria are universally known, likely due to their ongoing development.

Semmelweis University:

Review Ensured: The assessment system is regularly reviewed by the Faculty's OMHV Committee and the Education Committee. Departmental action plans, based on feedback, are also evaluated annually.

Defined Review Criteria: Assessment policies and criteria are clearly defined in the University's Study and Examination Regulations. OMHV feedback aims to enhance educational quality, and the Education Committee focuses on optimizing assessment balance and number.

Criteria Known to Involved Parties: The foundational regulations and OMHV procedures are officially documented and publicly available. Feedback results and action plans are transparently shared on internal platforms, ensuring knowledge among stakeholders.

University of Szeged:

Review Ensured: The faculty has published assessment policies and a faculty-wide feedback system that evaluates performance. Compiled feedback is submitted to management, influences future assessments, and consolidated data is shared widely. An online complaint system and past changes based on student feedback further confirm review processes.

Review Criteria Defined and Known: Principles for student feedback are defined and published in regulations. Questionnaire content implicitly sets criteria. Although not explicitly stated as "known to all," published policies and a recommendation to revise questionnaire content indicate that defined evaluation criteria are in place and considered important.

Comprehensive response:

Common Patterns Across All Institutions:

Formal Documentation: All institutions have formal regulations, policies, or specific documents that define their assessment policies and quality assurance processes, implying a structured approach to review.

Student Feedback as Primary Input: Student feedback is consistently identified as a crucial, if not primary, source of information for reviewing the effectiveness of assessment methods and study requirements.

Tiered Review Process: Review processes often involve multiple levels, from departmental tracking (PTE) to evaluation by specific committees (Debrecen, Semmelweis) and oversight by faculty management (Dean).

Existence of Defined Criteria (with caveats): Criteria for conducting assessments and collecting student feedback are generally defined in official documents or questionnaire structures. However, there's a recurring need for:

> More Specific/Harmonized Review Criteria: A desire to develop or refine institution-wide, consistent, and more specific criteria for evaluating the assessment system itself (PTE, SZTE).
>
> Better Alignment/Understanding: Ensuring that all involved parties understand and apply these criteria uniformly, and that they cover the full scope of QA, not just feedback (SZTE).

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Feedback system rules documented in publicly available "Student Feedback on Teaching Work" document. Student Feedback Subcommittee pre-approves questionnaires. Faculty has processes ensuring feedback on assessment methods. Limited detail on specific review criteria or systematic review structure.

University of Pécs:

Unified institutional system linked to curriculum content review process. Major gap: Need to develop institutional-level review criteria for assessment system aligned with learning outcomes. Assessment methodology development (from 3.1) should be supported by effectiveness analyses. No clear evidence that review criteria are defined or widely known.

Semmelweis University:

Assessment policy and quality assurance clearly defined in University Organizational and Operational Regulations (Study and Examination Regulations). Regulations contain provisions on assessment methods, grading, grade improvement/repetition rules, and special provisions for block-system exams (years 4-6). Educational Committee annually reviews course syllabi and formative/summative assessments. OMHV Committee supervises system, reports to Dean and Faculty Council. Recommendation: Need questionnaire focused on evaluating overall assessment system and new methods in three curriculum modules.

University of Szeged:

Assessment policy defined and published in Faculty Study Regulations (part of institutional regulations) and University of Szeged's "Student Teaching Evaluation Regulation". Questionnaires exclude evaluations below lower quartile threshold. Implementation of improvements monitored in subsequent evaluation periods. Limitation: Self-evaluation report described only student feedback system, not general or faculty-level quality assurance processes.

Recommendation: Questionnaire content should be regularly reviewed to reflect training and assessment quality.

Comprehensive response:

Strengths: All institutions have assessment policies defined in official regulations (Study/Examination Regulations), and some form of review process exists through feedback systems and committees.

Weaknesses: Review criteria are poorly defined and communicated - institutional-level systematic review criteria are either lacking (PTE explicitly needs development) or not described (SZAOK acknowledged omitting general quality assurance processes), and there's limited evidence that review criteria are known to all assessment participants.

Standard 3.2 QUALITY ASSURANCE OF ASSESSMENT – Prompt 9

Based on Chapter 3.2, Quality assurance of assessment, summarize the findings related to the following evaluation criterion: The medical training institution regularly collects feedback on assessment procedures and feeds this back to the relevant stakeholders. Provide a brief summary for each criterion.

Natural Intelligence Response

University of Debrecen:

The department heads inform the instructors about the results of the feedback, discuss them with their colleagues, and notify the faculty management about any measures to be taken. The aggregated feedback results are publicly available on the Student Feedback Subcommittee's website.

University of Pécs:

No information.

Semmelweis University:

The action plans drawn up by the institutes on the basis of student feedback (OMHV) should be evaluated at least annually in terms of their implementation and the efforts made in the given areas of education. This evaluation could be published in a transparent manner together with the next action plan.

University of Szeged:

Mass data processing also takes place, during which the average scores achieved by study groups for each subject are presented. The Education Committee, members of the Faculty Council, students, and other faculty members receive the aggregated data, which is also published in the Faculty Newsletter. Departmental responses must be published in electronic form on the website of the faculty or the relevant department/clinic.

Comprehensive response:

The faculties publish the results of performance evaluations, but students receive less information about the related action plans and their implementation.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Structured Feedback System: The institution has a formal feedback system for assessment procedures, regulated by the "Regulations for Student Feedback on Teaching Work," which is publicly available.

Student Participation: Students provide feedback on subjects and lecturers via questionnaires in the Neptun system, once per semester. These questionnaires are pre-approved by the Students' Feedback Subcommittee.

Evaluation and Distribution: The collected feedback is sent to the dean and the president of the Students' Feedback Subcommittee for evaluation. Results are shared with department heads and subcommittee representatives.

Internal Communication: Department heads inform academic staff about the feedback, discuss results internally, and notify faculty management of any actions taken.

Public Disclosure: Summarized feedback results are published on the Subcommittee's website, making them accessible to the university community.

Actionable Improvements: Feedback is used to improve educational quality, such as modifying course content or optimizing lecture venues and timing. Student requests are considered in these improvements.

External Stakeholder Input: Feedback from external partners (e.g., foreign training sites) is also considered when developing new courses or curricula.

University of Pécs:

1. Regular collection of exam-related feedback

Students can submit feedback on exams for one month after the exam period via the institutional Feedback System, ensuring regular and structured feedback on assessment procedures.

2. Examination performance data monitored continuously

Organisational units (departments, institutes) track exam performance indicators, providing ongoing internal feedback about assessment effectiveness.

3. Feedback made available to responsible stakeholders

Both student exam feedback and performance data are accessible to heads of organisational units, enabling them to review and adjust assessment practices.

4. Lack of institution-level integration of feedback

Although feedback is collected, the institution does not yet conduct joint, institution-wide analysis of performance indicators and student evaluations, limiting comprehensive feedback dissemination beyond unit level.

5. Identified need to improve feedback use

The chapter recommends further development of combined analysis processes and stronger institution-wide guidance so that collected feedback can be more effectively fed back to all relevant stakeholders.

Semmelweis University:

Student Feedback System: Students can submit feedback on exams through a formal system, available for a month after the exam period, starting 24 hours after each exam.

Stakeholder Access: The feedback collected from students is made available to heads of organisational units (departments, institutes), ensuring that those responsible for assessment procedures receive direct input from students.

Integration into Quality Assurance: Student feedback is incorporated into the institution's quality assurance processes, supporting the review and improvement of assessment methods and procedures.

Recommendations for Enhancement: The chapter recommends further development of joint analysis of assessment performance indicators and student feedback, and encourages the formulation of recommendations for educational leaders based on this feedback.

University of Szeged:

Regular Collection of Feedback

Systematic Feedback Collection: The faculty has a structured, faculty-wide feedback system in place. Student feedback on assessment procedures is collected regularly, mainly through anonymous questionnaires (NEPTUN, CooSpace, GoogleForm) after each semester for compulsory subjects, practices, and seminars.

Additional Feedback Channels: There are further opportunities for feedback, such as annual voting for "Best Instructor/Internship Leader/Institute of the Year" and an online problem/complaint submission system.

Feedback to Stakeholders

Distribution of Results: Compiled feedback data are submitted to the Dean, Faculty management, and department heads. Consolidated results are also shared with the Education Committee, Faculty Council, and students. Key findings are published in the Faculty Newsletter, ensuring transparency.

Action on Feedback: The realization of recommended improvements based on feedback is monitored and considered in subsequent evaluations of instructors and departments.

Recommendations for Improvement: The committee recommends further enhancing feedback representativity, implementing rapid feedback systems (e.g., QR codes), and requiring structured, published departmental responses to feedback.

Comprehensive response:

Regular Feedback Collection: All institutions systematically collect student feedback on assessment procedures, primarily through digital platforms.

Transparent Communication: Feedback results are shared with relevant stakeholders, including faculty management, department heads, academic staff, and students.

Actionable Use of Feedback: Feedback is used to inform improvements in assessment methods, procedures, and educational content.

Multi-level Involvement: The process involves multiple levels of the institution, ensuring broad participation and accountability.

Recommendations for Enhancement: Institutions are encouraged to further develop feedback analysis, improve representativity, and document responses and improvements.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Evidence of collection: Semesterly student questionnaires on subjects/lecturers via Neptun, pre-approved by the Students' Feedback Subcommittee. Stakeholder feedback loop: Results sent to dean, Subcommittee president, department heads; department heads brief academic.

University of Pécs:

Evidence of collection: Exam performance indicators tracked by departments/institutes; student post-exam feedback collected for one month after exams. Coverage and timing: Feedback window opens 24 hours post-exam; data available to heads of organisational units. Aggregation and analysis: No institution-level synthesis.

Semmelweis University:

Mechanisms to collect feedback: OMHV surveys in Neptun each semester/block; QR code instant lecture feedback; end-of-block reviews (years 4–5); pilot feedback on written Moodle exams.

Scope and languages: OMHV covers subjects, practicals, and examinations; available in Hungarian/English/German; lower response rates in English/German programmes.

Governance and process: OMHV run by OFMSZK; procedures codified in OOR Part III.8; reviewed by Faculty OMHV Committee; annual Education Committee review of syllabi and assessments.

Use of results: Annual feedback on assessment methods; results posted on OFMSZK Moodle; departmental action plans uploaded internally and submitted to Dean's Office; demonstrated changes (updated MCQs, exam question bank, Moodle Tests).

University of Szeged:

Compliance summary: Feedback on assessment is collected each semester and fed back to leadership, departments, committees, and students; used in staff evaluations and triggers actions. Evidence of practice: NEPTUN-based surveys (plus CooSpace/Google Forms); online complaint system handled.

Comprehensive response:

Common Patterns Across All Institutions:

Student Feedback as Primary Source: All institutions predominantly rely on student feedback (via questionnaires, surveys, or dedicated systems) as the main mechanism for collecting information on assessment procedures and overall study requirements.

Regular Collection: Feedback collection is a regular, scheduled activity, occurring on a semesterly, annual, or per-course/exam basis.

Multi-Level Dissemination: Feedback is systematically provided to various levels of stakeholders, including:

Department Heads/Academic Staff: For direct review and action at the teaching unit level.

Faculty/University Management: For oversight, broader evaluation, and strategic decision-making.

Public/University Citizens: Summarized feedback is often made publicly available (e.g., on websites, newsletters) for transparency.

Action-Oriented Feedback Loop: The collected feedback is explicitly intended to inform discussions, lead to modifications, initiate action plans, and ultimately improve the quality and effectiveness of assessment methods and study requirements.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Collection: Semester-based feedback via Neptun using pre-approved questionnaires; external partner feedback also collected.

Distribution: Data forwarded to Dean and Subcommittee chair; results shared with department heads and Subcommittee representatives; department heads inform instructors and discuss with staff; aggregated results publicly available on Subcommittee website.

University of Pécs:

Collection: Students can provide exam feedback 24 hours post-exam for one month; exam performance indicators tracked by departments/institutes.

Distribution: Feedback available to organizational unit leaders.

Gap: No institutional-level collection or synthesis; comprehensive joint analysis and recommendations to educational unit leaders need development.

Semmelweis University:

Collection: OMHV system collects annual feedback via Neptun on courses, practical training, and exams; QR-code immediate feedback after lectures; end-of-block evaluations for years 4-5.

Distribution: Results available on OFMSZK Moodle page for all university members; action plans uploaded to department internal websites and submitted to Dean's Office; OMHV Committee reports to Dean and Faculty Council.

Gap: Regular feedback on exams/tests still in pilot phase - needs encouragement for routine collection.

University of Szeged:

Collection: Semester-based NEPTUN feedback (also CooSpace, GoogleForm); annual awards voting; online complaint system.

Distribution: Aggregated data (Excel) submitted to Dean and Faculty leadership; relevant portions to all department heads; Educational Committee, Faculty Council, students receive aggregated data; published in Faculty Newsletter.

Challenge: Low participation rate (<25%); incentives (points, priority enrollment) used to improve engagement.

Gap: Need structured mandatory departmental responses (action plans) published electronically.

Comprehensive response:

Strengths: All institutions regularly collect feedback (semester-based or annual) via established systems (Neptun/OMHV) and distribute results to key stakeholders (Deans, department heads, committees), with some making aggregated data publicly available.

Weaknesses: Feedback collection is often incomplete (especially exam-specific feedback underdeveloped), institutional-level synthesis is lacking (PTE has no central collection), participation rates are low, and systematic structured responses/action plans from departments are not mandatory or transparently published.

Standard 3.2 QUALITY ASSURANCE OF ASSESSMENT – Prompt 10

Based on Chapter 3.2 Quality assurance of assessment, summarize the findings related to the following assessment criteria: sSpecific interventions and improvements are made based on feedback received on the assessment processes. Summarize briefly for each criterion!

Natural Intelligence Response

University of Debrecen:

Based on feedback, modifications may be made and further improvements may be implemented in relation to the quality of education.

University of Pécs:

No information.

Semmelweis University:

The Education Committee reviews the subject syllabi and the formative and summative assessments (tests, quizzes, and exams) included therein on an annual basis and may make recommendations regarding the balance between formative and summative assessments, the optimization of the number of exams, and additional forms of assessment. It uses feedback and responses to assessments (exams) to improve the quality of education, address student

needs and issues, further develop institutional action plans, and introduce new methods and tools.

University of Szeged:

The relevant sections are sent to all department heads. The implementation of the recommended improvements will be taken into account in the evaluation of teachers during the next evaluation period. There were numerous examples of changes in the conduct of exams based on student feedback. A structured departmental response (action plan) to student feedback should be required on a regular (annual) basis.

Comprehensive response:

All faculties respond to the results of performance evaluations. However, there are differences in how this is linked to the quality assurance system and interpreted.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Feedback from students is systematically collected through OMHV surveys, QR code-based instant feedback, and block-end evaluations.

The Faculty uses this feedback to improve teaching quality, assessment methods, and departmental action plans.

Concrete examples of interventions include: Regular updates to multiple-choice questions and question banks for comprehensive exams. Introduction of new assessment tools, such as Moodle Tests. Adjustments to teaching and examination methods based on student suggestions.

The effectiveness of these interventions is reviewed annually, and action plans are updated and published internally.

University of Pécs:

1. Local-level monitoring enables adjustments

Examination performance indicators are monitored at the unit (department/institute) level, allowing these units to make their own adjustments based on observed assessment outcomes.

2. Student exam feedback provides input for potential improvements

The Feedback System gives students the opportunity to comment on exams after the exam period, offering information that can be used by units to improve assessment methods and practices.

3. Heads of units receive feedback for decision-making

Department and institute leaders have access to both performance data and student feedback, enabling them to initiate local interventions in assessment procedures.

4. Institution-level improvement mechanisms not yet fully developed

While data and feedback exist, the institution does not yet conduct joint institution-wide analysis, which means that systematic, institution-level improvements in assessment are still limited.

5. Identified need for institution-wide recommendations

The chapter explicitly recommends developing institution-wide guidance and improvement measures based on combined analysis of assessment performance and student evaluations.

6. Review criteria need strengthening to support improvements

Divergent learning outcomes across subjects hinder the creation of standard institutional review criteria, which limits the ability to make coherent, institution-wide improvements to assessment processes.

Semmelweis University:

Joint Analysis for Improvement: The chapter highlights the need to further develop the joint analysis of assessment performance indicators and student feedback, which can lead to targeted recommendations for heads of organisational units. This process supports the identification of areas needing intervention.

Formulation of Recommendations: Based on the analysis of feedback and performance data, recommendations are formulated for educational leaders (heads of organisational units) to guide improvements in assessment processes.

Continuous Development: The integration of feedback into the quality assurance system is intended to support the ongoing development and refinement of assessment methods and criteria at both the unit and institutional levels.

Potential for Institution-wide Criteria Revision: The findings suggest that review criteria for the assessment system can be developed at the institutional level, ensuring alignment with learning outcomes and supporting systematic improvements based on feedback.

University of Szeged:

Implementation of Changes: The faculty has made concrete changes in response to student feedback. For example, there were cases where examination conduct was modified, and even the suspension of an examiner occurred following student complaints.

Monitoring of Improvements: In subsequent assessment periods, the realization of recommended improvements is tracked and considered during instructor evaluations.

Incentives for Feedback Participation: To address low student participation in feedback, the faculty introduced incentives such as awarding points and priority admission to limited-subject courses for students who complete feedback questionnaires.

Recommendations for Further Action: The visiting committee recommends establishing rapid feedback systems (e.g., QR codes), regularly revising feedback questionnaires, and requiring structured, published departmental action plans in response to feedback.

Comprehensive response:

Feedback-Driven Improvements: All institutions use student feedback to inform and implement specific interventions and improvements in assessment processes.

Multi-level Action: Feedback is reviewed at multiple levels (faculty management, department heads, committees), and actions are taken accordingly.

Transparency and Communication: Improvements and changes based on feedback are communicated to relevant stakeholders.

Continuous Development: There is an ongoing process of reviewing feedback and making targeted improvements to assessment methods, procedures, and educational content.

Recommendations for Enhancement: Institutions are encouraged to further systematize the process, ensure regular departmental responses, and transparently publish improvements.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Feedback from student questionnaires is used to modify and improve education quality (e.g., expanding content of practical courses). Organizational aspects (venues, timing of lectures) are adjusted in response to student requests. Feedback from external partners (e.g., foreign training sites) is considered when developing new courses and designing curricula.

University of Pécs:

Feedback Mechanism: Student feedback on exams is gathered and made available to heads of organizational units.

Interventions and Improvements: The chapter identifies a need for the "joint analysis" of performance indicators and student evaluations to be "further developed", and for "recommendations to be formulated" based on this for organizational units.

It also suggests that analyses can "support the development of the evaluation methodology" and the "creation of institution-wide recommendations for the revision of the evaluation criteria."

This indicates that a systematic process for specific interventions and improvements based directly on feedback is an area for development and formulation of future recommendations, rather than an explicitly stated current and routinely implemented practice.

Semmelweis University:

Assessment Method Adjustment: OMHV student feedback directly shapes assessment method definitions. Lecturer-Level Improvements: QR code feedback helps individual lecturers enhance their sessions.

Specific Evaluation Updates: Examples include updated multiple-choice questions, new exam question banks, and Moodle Tests.

Departmental Action Plans: Departments implement specific action plans based on OMHV feedback.

System Integration (Recommendation): Recommend integrating a comprehensive assessment system evaluation questionnaire into Neptun.

Pilot for Exam Feedback: Regular feedback on exams and midterms (e.g., Moodle questionnaires) is in a pilot development phase.

University of Szeged:

Specific Interventions: The Faculty acts on student feedback, exemplified by suspending an examiner in response to complaints.

Review of Feedback Practices: Feedback data is compiled and submitted for analysis, leading to actionable insights for improvement.

Recognition Awards: Awards for top instructors based on student votes motivate faculty to enhance teaching quality.

Feedback Channels: An online complaint system facilitates timely responses to student concerns.

Data-Driven Improvements: Analyzed feedback leads to informed changes in educational practices and assessments.

Encouragement of Active Participation: Incentives for feedback submission boost student engagement in evaluation processes.

These findings highlight the Faculty's commitment to using student feedback for ongoing improvements in assessment practices.

Comprehensive response:

Common Patterns Across All Institutions:

Explicit Intent for Action: All institutions state or imply that feedback is collected with the purpose of driving improvements and interventions in assessment and study requirements.

Varying Levels of Specificity in Reporting: While Debrecen, Semmelweis, and SZTE provide concrete examples of interventions (e.g., curriculum adjustments, examiner changes, updated question banks), PTE more broadly identifies the need to develop processes for formulating recommendations and revisions based on feedback.

Action Plans and Recommendations as Tools: The translation of feedback into interventions often involves formal action plans or the formulation of recommendations to relevant organizational units.

Target Areas for Intervention: Improvements frequently target pedagogical aspects (lectures, course content), assessment tools (question banks, exam types), and logistical aspects (timings, venues).

Responsiveness to Direct Student Input: Strong student feedback, especially complaints, can lead to significant and direct interventions, even at the level of individual examiner conduct.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Evidence of interventions: Modifications made to teaching quality (e.g., expanding practical course content); student requests addressed (optimizing lecture locations/schedules); external partner feedback incorporated into new course development and curriculum design.

Confirmation: Collected data used for improving teaching quality, developing academic requirements, and considering student needs/expectations.

University of Pécs:

Limited evidence: Document focuses on need for development rather than existing interventions.

Gap: Comprehensive analysis needed to formulate recommendations for educational unit leaders; effectiveness analyses should support assessment methodology development (from 3.1).

No specific examples of interventions provided.

Semmelweis University:

Evidence of interventions: Improvements demonstrated at Physiology Department (regularly updated multiple-choice questions, question bank for comprehensive exams, Moodle tests) and Biochemistry Department. Educational Committee can recommend balance between formative/summative assessments and optimization of exam numbers.

Examples: New methods and tools introduced; institutional action plans developed and improved based on student needs and problems.

Gap: Action plans should be annually evaluated for implementation and published transparently with next action plan.

University of Szeged:

Strong evidence: Multiple examples of exam procedure changes based on student feedback; examiner suspension in response to student complaints (positively evaluated by students); implementation of recommended improvements monitored in subsequent evaluation periods.

System responsiveness: Online complaint system handled by Dean's Quality Assurance Representative; easy communication with faculty administration praised by students.

Gap: Need structured annual departmental responses (action plans) published electronically.

Comprehensive response:

Strengths: Most institutions (SOE, DE, SZAOK) show concrete evidence of improvements based on feedback, including changes to exam procedures, course content, teaching methods, and addressing student complaints.

Weaknesses: Interventions are often ad-hoc rather than systematic; lack of mandatory structured action plans with transparent publication and annual evaluation of implementation (recommended for SOE and SZAOK); PTE shows minimal evidence of feedback-driven interventions.

Standard 7 QUALITY ASSURANCE – Prompt 11

Based

Natural Intelligence Response

University of Debrecen:

Quality assurance system implemented.

University of Pécs:

Quality assurance system implemented.

Semmelweis University:

The internal quality assurance system of the Faculty of General Medicine is an integral part of the University's quality assurance system. The Faculty's quality assurance (QA) system is designed in accordance with and follows the University's quality assurance system. The University's quality assurance system is set out in Section I.5 of the institution's Organizational and Operational Regulations and is also defined in the Integrated Management System Manual, which is available to all organizational units on the institution's intranet.

It is recommended to develop and implement a program/manual for quality assurance at the educational program level, including its regular review and development. It is recommended to separate the faculty-level quality policy from the institutional policy and make it available on the website in English and German as a key document for quality management.

University of Szeged:

The University operates an integrated, multi-level quality assurance system that functions at the level of the University, the Faculty, and the departments. The Faculty's quality assurance system was established in November 2022.

Comprehensive response:

The degree of implementation of the quality assurance system varies between faculties, particularly in terms of links to and specification of the institutional quality assurance system.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Structural Integration: The Faculty's internal QA system is an integral part of the University's QA system, designed to develop, maintain, and improve the quality of teaching, student experience, research, and community services.

Organizational Structure: The Faculty has its own management, committees, and groups with clearly defined responsibilities. Committee composition is determined by the Faculty Council, and their responsibilities are set out in publicly available rules of procedure. The Faculty's organizational chart is published on its website.

Alignment with University QA: The Faculty's QA system is designed in accordance with, and follows, the University's QA system. University-level QA strategy, policy, and procedures are accessible online. The University's QA system is detailed in the Rules of Organisation and

Operation and the Integrated Management System Manual, available to all organizational units.

Standards and Policies: The University operates an integrated quality management system based on ISO 9001, and also considers ISO 50001, ISO 14001, MEES, ESG 2015, and WFME BME 2020 standards. Efforts are ongoing to harmonize these standards at the institutional level, with some work still needed to fully integrate WFME standards.

Faculty-Level QA Activities: The Faculty Accreditation Committee is responsible for developing and operating the QA system at the faculty level, under the Dean's direction. QA-related documents and regulations are available on the Faculty website, mostly in Hungarian.

Reporting and Review: The Faculty prepares annual reports evaluating educational processes and goal achievement. Departments also produce annual management reports on quality objectives. Faculty meetings are held each semester to discuss educational improvements.

Stakeholder Involvement: Stakeholders—including students, alumni, and teaching hospitals—are actively involved in QA activities. Students are represented in the Faculty Council and provide feedback through surveys and questionnaires, which are used to improve education and clinical training. Teaching hospitals meet with the Dean twice a year to discuss and provide feedback.

Recommendations for Improvement: Develop a dedicated QA handbook for the Faculty, regularly reviewed and improved. Separate the faculty-level QA policy from the institutional policy and make it available in English and German. Further harmonize WFME standards with ISO and ESG systems for a more rationalized integrated QA system.

University of Pécs:

1. Embedded in an institution-wide ISO 9001:2015 system

The medical school operates within the institution's ISO-based quality management system, including regular internal and external audits, ensuring formal alignment with the institutional QA framework.

2. Institution-level quality documents form the overarching framework

The school's QA activities are guided by institutional documents—such as the 2018 quality policy and the institutional development plan—which set the context but need updating to better integrate the medical school's specific QA needs.

3. QA system includes ESG 2015 compliance checks

The medical school is part of an institutional QA system that evaluates compliance with ESG 2015 standards, though deeper understanding and operationalization of these standards are still needed.

4. The PotePillars strategy is institution-wide but not yet operationalized locally

Although the medical school falls under the institution's PotePillars strategic programme, the strategy has not been translated into actionable, unit-level QA tasks, limiting its integration into the school's QA operations.

5. QA Handbook annexes not aligned with updated institutional expectations

The institutional QA Handbook (including annexes relevant to ESG, WFME-MAB, and PotePillars) has not yet been updated, meaning the medical school's QA activities are not fully connected to the institution's newer strategic and standards-based directions.

6. Central QA unit supports but currently focuses on micro-level tasks

The Quality Management and Institution Development Department serves as the central institutional QA unit and supports the medical school, but currently performs operational rather than strategic QA functions, limiting the depth of integration.

7. PDCA implementation exists institution-wide but varies in depth

PDCA cycles formally operate across the institution, including the medical school, but the level of development and consistency varies, showing only partial integration of continuous improvement processes.

8. Stakeholder involvement defined institution-wide but not clearly integrated locally

Stakeholders are identified at the institutional level, but the medical school's specific roles, expectations, and stakeholder influence are not clearly defined, limiting coherent integration of local stakeholder engagement into the institutional QA system.

Semmelweis University:

Integration and Structure

Integral Part of University QA: The Faculty's internal quality assurance system is an integral part of the University's overall QA system, designed to develop, maintain, and improve the quality of teaching, student experience, research, and community services.

Organizational Structure: The Faculty has its own management, committees, and groups with clearly defined responsibilities. Committee composition is determined by the Faculty Council, based on the Dean's recommendation, and responsibilities are set out in publicly available rules.

Alignment with University QA:The Faculty's QA system is designed in accordance with and follows the University's QA system, strategy, and policies. Most QA documents and regulations are accessible on the University's website.

Policy and Documentation: The University's quality policy is relevant at the Faculty level, but the Faculty does not have a separate quality policy. The University's policy is available online, mainly in Hungarian, and it is recommended to make it accessible in English and German for international students.

Standards and Harmonization: The institution operates an integrated quality management system based on ISO 9001, and considers other standards (ISO 50001, ISO 14001, MEES, ESG 2015, WFME BME 2020). Efforts are ongoing to harmonize ISO and ESG standards and link them to WFME standards.

Processes and Reporting

Annual and Semester Reporting: The Faculty prepares annual reports evaluating educational processes and achievements. Departments produce annual management reports on quality objectives. Faculty meetings are held each semester for sharing ideas on educational improvement.

Stakeholder Involvement: Stakeholders (students, alumni, teaching hospitals) are actively involved in QA activities. Students are represented in the Faculty Council and participate in decision-making. Feedback is collected via surveys and questionnaires, and used for continuous improvement.

Teaching Hospital Collaboration: Contracts with teaching hospitals are renewed every five years based on QA controls. Hospital representatives meet the Dean twice a year to discuss and provide feedback, contributing to teaching program improvement.

Recommendations

QA Handbook: It is recommended to develop a comprehensive QA handbook at the program level, including regular review and improvement processes.

Separate Faculty QA Policy: The Faculty should develop and publish its own QA policy, distinct from the institutional policy, and make it available in English and German.

System Harmonization: Further harmonization of WFME, ISO, and ESG standards is advised to rationalize and optimize the integrated QA system.

University of Szeged:

1. Integration with Institutional Quality Assurance

The university has developed an integrated, multi-level Quality Assurance System (QAS) that operates at the university, faculty, and department levels. The medical school's quality assurance organization is part of this system, aligning its activities with national and international standards (e.g., Hungarian Accreditation Committee, ESG guidelines) and the university's strategic documents.

2. Organizational Structure and Responsibilities

At the university level, the Rector and Chancellor are jointly responsible for quality assurance, coordinated by the Director General of Strategy and Development and supervised by the Quality Development Committee (QDC). At the faculty (medical school) level, the Quality Assurance Board (QDC at the faculty) monitors teaching and research. Its

chairperson and members are appointed by the dean. At the department level, quality assurance tasks are handled by a dedicated unit or a designated person responsible for quality.

3. Processes and Communication

The medical school's QAS was established in November 2022 and is still in its early stages, with annual reviews planned. Quality objectives at the faculty level currently focus on teaching and research, with specific indicators and responsibilities assigned to vice-deans and the head of the registrar's office. Results and indicators are published by the faculty and communicated to department heads.

4. Alignment and Recommendations

The system is designed to comply with both internal and external standards and is guided by the university's Quality Policy Statement, Quality Objectives, and Institutional Development Plan. Recommendations include expanding the QAS to cover more areas (e.g., staff competence, learning resources), systematically measuring opinions of lecturers, graduates, and employers, and aligning standards with international frameworks (e.g., WFME).

Comprehensive response:

Integration with Institutional System: The medical school's quality assurance organization is consistently integrated into the institution's overall quality assurance system, often following ISO 9001:2015 standards.

Alignment of Policies and Procedures: Faculty-level quality assurance policies, objectives, and processes are aligned with institutional strategy and standards.

Multi-level Structure: Quality assurance is managed at multiple levels (university, faculty, department), with clear roles and responsibilities.

Central Coordination and Oversight: Central institutional bodies (departments, committees) provide coordination, support, and oversight for faculty-level quality assurance.

Transparency and Accessibility: Quality assurance documents and processes are generally made publicly available, supporting transparency.

Continuous Improvement: There is an ongoing process of updating, reviewing, and harmonizing faculty and institutional quality assurance systems.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Embedding in institutional QA

Faculty QA is based on the University of Debrecen's Quality Policy and Quality Assurance Manual and follows ISO 9001:2015, in cooperation with the Clinical Centre.

Faculty QA organization

A Faculty Quality Assurance Board (Dean, Vice Deans, Head of Students' Union, Head of Dean's Office) operates within this university framework, meets twice a year, and sets annual QA goals.

A quality system manager ensures conformity with the university QA Manual; the Head of the Dean's Office monitors QA task implementation. A Feed-back Subcommittee with staff and student members supports QA work.

Documentation and alignment

QA documents are publicly available, but different and outdated versions (especially in English) show incomplete alignment with the institutional QA system and need updating.

Practical integration and clarity

QA processes exist but their practical link to the overall QA system and the mission/strategy of the Faculty is not clearly demonstrated. Roles and responsibilities in QA are partly unclear, despite good stakeholder involvement, especially of students.

University of Pécs:

Institutional Framework: The medical school's QA operates under the institution's ISO 9001:2015 compliant system, with central QA unit support (though often micro-focused).

Strategic Alignment Gaps: The institutional PotePillars strategy is not fully broken down for educational units, and the QA Manual lacks updates reflecting this or medical education standards (WFME-MAB).

System Limitations: The ISO 9001:2015 model is seen as administratively limiting for educational programs, and a deeper institutional understanding of ESG 2015 and other relevant standards is needed.

Stakeholder Integration: While stakeholders are identified institutionally, their specific influence and integration into processes (including for the medical school) are not clearly defined.

Semmelweis University:

Integral and Aligned: The Faculty's QA system is an "integral part" of and "follows" the University's QA system.

Shared Policies/Standards: It operates under the University's QA strategy and policies, integrating with its ISO-based management system, including efforts to harmonize with other standards (e.g., ESG, WFME).

Decentralized Implementation: While central QA oversight exists at the university level, the Faculty manages its own QA development via its Accreditation Committee.

University of Szeged:

Integrated Multi-Level System: The medical school's QA system is part of an integrated, university-wide QAS operating at University, Faculty, and department levels.

University-Level Oversight: The University Rector/Chancellor lead QA, coordinated by the Director General of Strategy and Development, and supervised by the University's Quality Development Committee (QDC).

Faculty (Medical School) Integration: The Medical Faculty has its own "Quality Assurance Board" (its QDC equivalent), with members appointed by the Dean, responsible for monitoring teaching and research. This Faculty QAS is a recent addition (Nov 2022) to the overall system.

Departmental Engagement: Departments within the medical school have dedicated QA units or personnel to handle local QA tasks, ensuring broad integration.

Alignment: The medical school's QA activities align with the University's adherence to national and international higher education standards.

Comprehensive response:

Common Patterns Across All Institutions:

Integral Component: All medical schools are described as being an integral or compliant part of their respective university's overarching quality assurance system.

Hierarchical Structure: QA systems operate on multiple levels (university, faculty, department), with specific bodies (boards, committees, departments, or individuals) assigned QA responsibilities within the medical school.

Adherence to University Frameworks: The medical school's QA activities are generally guided by the university's central Quality Policy, Quality Assurance Manual, or strategic development plans, often built on ISO 9001:2015 standards.

Defined Roles and Responsibilities: Within each medical school, specific leadership roles (Dean, Vice Deans) and committees (QA Boards/Committees) are responsible for managing and overseeing the faculty-level QA.

Challenges in Specificity and Maturity: While the structural integration is present, some institutions highlight challenges in clearly defining the strategic role of the medical school's QA, ensuring complete alignment of all related documents, or having a fully mature and operational faculty-specific QA system.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Integration: Faculty QA managed by leadership in cooperation with Clinical Center, following University's Quality Policy/Manual (ISO 9001:2015).

Structure: QA Committee (meets twice yearly) supported by Feedback Subcommittee; Dean's Office head supervises execution.

Problems: Documentation versions inconsistent (Hungarian vs. English, different editions); roles/responsibilities unclear; needs better alignment with Faculty mission/strategy.

University of Pécs:

Integration: Medical school QA part of ISO 9001:2015 institutional system with Quality Management and Institutional Development Department as central unit.

Problem: ISO application as administrative model limits strategic capacity - results in micro-management tasks rather than strategic ones. 34-member Quality Development Committee role needs reconsideration. PotePillars strategy not operationalized; unclear how QA supports implementation.

Semmelweis University:

Integration: Faculty QA is integral part of University system, following University strategy/policies.

Structure: Senate coordinates at university level; Faculty Accreditation Committee operates Faculty system. Integrated system based on ISO 9001 plus ISO 50001, ISO 14001, MEES, ESG 2015, WFME BME 2020.

Problems: Documents only in Hungarian; no separate Faculty quality policy; WFME standards integration still in progress.

University of Szeged:

Integration: Multi-level system (University-Faculty-Department) recently established to meet MAB, Ministry, and ESG standards.

Structure: University: Rector/Chancellor responsible, Strategic Director coordinates, QDC supervises. Faculty: QA Committee monitors education/research. Department: QA units/designated persons handle operations.

Status: Faculty system established November 2022, just beginning. Documents newly created, no updates yet. Procedures don't appear long-established; systems currently under review/modernization.

Comprehensive response:

Strengths: Formal integration into institutional systems; multi-level structures; student involvement.

Weaknesses: Documentation outdated/Hungarian-only; ISO systems don't effectively support educational QA; unclear roles; WFME alignment incomplete; newer systems still maturing.

Standard 7 QUALITY ASSURANCE – Prompt 12

Based on Chapter 7, The quality assurance system of the medical school, summarize the findings related to the following questions: How does the medical school develop its quality objectives? How does it monitor their fulfillment? Summarize briefly for each point!

Natural Intelligence Response

University of Debrecen:

Each year, the committee sets quality assurance goals for the faculty. The quality assurance system must be consistent with the mission and strategy of the medical faculty.

University of Pécs:

The development plan is a document containing detailed indicators, but its approach focuses primarily on financing. Typically, institutions do not set independent quality objectives separate from the institutional development plan, together with indicators – nor is this the case here.

Semmelweis University:

The publicly available Institutional Development Plan, which contains the University's mission and vision, describes in detail the strategic goals set for the period 2021–2024. At the university level, quality assurance tasks are determined by the Senate and coordinated by the Quality Development Committee.

University of Szeged:

The Faculty's quality objectives currently cover two areas: education and research, with a view to improving the quality of studies and developing basic and clinical research. The Vice Dean for Education, the Vice Dean for Academic Affairs, and the Head of the Office of Academic Affairs are responsible for each area.

Comprehensive response:

There are also differences between the faculties in terms of the specificity of minimum targets. This is evident in terms of their evidence base (data basis) and level of documentation.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

The Faculty develops its quality objectives as part of its internal quality assurance system, which is aligned with the University's overall QA strategy and standards. Quality objectives are set at both the faculty and department levels, with input from faculty management, committees, and stakeholders (including students, alumni, and teaching hospitals). The objectives are defined in publicly available documents, such as the Faculty Organisation and Operation Regulations and annual management reports.

Monitoring Fulfillment of Quality Objectives

The Faculty prepares annual reports evaluating the achievement of educational processes and quality objectives. Departments produce annual management reports that include results related to the set quality objectives. Regular faculty meetings (held each semester) provide opportunities for faculty members to discuss progress and share ideas for improvement. Stakeholder feedback (from students, alumni, and teaching hospitals) is collected through surveys, questionnaires, and meetings, and is used to monitor and further improve fulfillment of quality objectives. Contracts with teaching hospitals are renewed every five years based on the Faculty's quality control system, and biannual meetings are held to discuss and review educational quality."

University of Pécs:

1. Quality objectives are tied to institutional-level documents

The medical school's quality objecties are derived from the institution's ISO 9001:2015 quality management system, the 2018 institutional quality policy, and the three-year institutional development plan, which contains detailed indicators.

2. Quality objectives are not independently defined

The institution (and thus the medical school) does not set standalone quality objectives separate from the institutional development plan, limiting the school's ability to formulate its own targeted quality goals.

3. Alignment with strategic programme (PotePillars) still under-developed

Although the leadership introduced the institution-wide PotePillars strategy, it has not yet been broken down into actionable projects or unit-level objectives, meaning the medical school's quality goals are not yet fully aligned with the strategy.

4. Quality objectives require updating to reflect external standards

The school's QA documentation (Quality Assurance Handbook Annexes) has not been updated in line with ESG 2015, WFME-MAB standards, and PotePillars—indicating that the development of quality objectives is not fully current or standards-aligned.

Monitoring of Quality Objectives

5. ISO framework ensures formal monitoring processes

The ISO 9001:2015 system requires annual internal and external audits, providing a formal structure for monitoring the school's quality objectives and compliance.

6. PDCA cycles operate, but unevenly

The institution formally applies the PDCA cycle, offering a mechanism for monitoring and revising quality objectives, but the depth and consistency of PDCA implementation are uneven, reducing the effectiveness of monitoring at the medical school.

7. Central QA unit supports monitoring but operates at micro-level

The Quality Management and Institution Development Department provides operational support for monitoring quality-related activities, but its role is often micromanagement-focused rather than strategic, limiting systematic monitoring of broader objectives.

8. Lack of clarity on stakeholder roles in monitoring

Although stakeholders are identified, it is not clearly defined how they contribute to monitoring quality objectives, nor how the school integrates stakeholder expectations into oversight processes.

Semmelweis University:

"Development of Quality Objectives

Alignment with University QA System: The Faculty's quality objectives are developed as an integral part of the University's overall quality assurance system, ensuring consistency with institutional strategy, policy, and standards.

Faculty Committees and Governance: The Faculty has its own management, committees, and groups (with responsibilities defined by the Faculty Council and Dean) that participate in setting quality objectives.

Reference to Standards: The development of objectives takes into account multiple standards (ISO 9001, ISO 50001, ISO 14001, MEES, ESG 2015, WFME BME 2020), and efforts are made to harmonize these frameworks.

Stakeholder Involvement: Stakeholders such as students, alumni, and teaching hospitals are actively involved in the development of quality assurance activities and objectives.

Monitoring of Quality Objectives Fulfillment

Annual and Departmental Reporting: The Faculty prepares an annual report evaluating educational processes and the achievement of quality objectives. Departments also produce annual management reports on their quality goals.

Regular Faculty Meetings: Faculty meetings are held each semester, providing a forum for sharing ideas and discussing improvements in education.

Feedback Collection: Feedback from students, alumni, and teaching hospitals is collected through surveys, questionnaires, and regular meetings. This feedback is used to monitor and improve the fulfillment of quality objectives.

Dean's Oversight: The Dean receives all feedback submitted and oversees the implementation of improvements based on this input.

External Partner Collaboration: Contracts with teaching hospitals are renewed every five years, and hospital representatives meet the Dean twice a year to discuss and provide feedback on educational quality.

University of Szeged:

How the Medical School Develops Its Quality Objectives

The quality objectives are developed in alignment with national and international higher education standards (e.g., Hungarian Accreditation Committee, ESG guidelines) and the university's internal strategic documents (Quality Policy Statement, Quality Objectives, Institutional Development Plan). The objectives are set at both the university and faculty (medical school) levels, with input from leadership such as the Vice-Dean for Educational Affairs, Vice-Dean for Scientific Affairs, and the Head of the Registrar's Office. The objectives currently focus on two main areas: teaching (improving the quality of studies) and research (developing basic and clinical research). The Faculty's QAS (Quality Assurance System) was established in November 2022, and many related documents and objectives have just been created.

How the Medical School Monitors Fulfillment of Quality Objectives

Monitoring is conducted through an integrated, multi-level QAS operating at university, faculty, and department levels. For teaching, fulfillment is monitored primarily by measuring student satisfaction through surveys, with indicators linked to teaching and electronic data transmission for courses. For research, monitoring uses two main indicators: the number of publications in basic and clinical research, and the impact factor/classification of those publications. Results and indicators are published by the faculty and communicated to department heads. Annual reviews of the QAS are planned to assess progress and update objectives as needed. At the university level, additional monitoring includes centrally

implemented surveys such as the Graduate Career Tracking system, with data analyzed to support decision-making.

Comprehensive response:

Alignment with Institutional Strategy: Quality objectives are developed in alignment with university-level strategic plans, quality policies, and (often) ISO 9001:2015 standards.

Defined Roles and Responsibilities: Dedicated quality assurance bodies or committees at the faculty level are responsible for setting and reviewing objectives.

Regular Monitoring and Review: Progress is monitored through regular meetings, annual reports, and audits. The PDCA cycle or similar continuous improvement frameworks are commonly used.

Stakeholder Involvement: Feedback from students, staff, and sometimes external partners is incorporated into both the development and monitoring of quality objectives.

Continuous Improvement: There is an ongoing process of reviewing, updating, and harmonizing objectives to ensure they remain relevant and actionable.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Development of quality objectives

The Faculty's Quality Assurance Board, operating within the university QA framework (Quality Policy, QA Manual, ISO 9001:2015), defines the faculty's quality assurance goals every year. The Board works in cooperation with the Clinical Centre and is supported by the Feedback Subcommittee (staff and student representatives).

Monitoring of fulfillment

Implementation of QA-related tasks is monitored by the Head of the Dean's Office. The quality system manager checks that the Faculty's QA system complies with the University's QA Manual. QA results are shared with stakeholders, though the practical link between QA processes and the Faculty's mission/strategy is described as insufficiently explicit.

University of Pécs:

Development of Quality Objectives:

No independent objectives: The medical school (as part of the institution) lacks its own distinct quality objectives, which are instead implicitly linked to a broader, financially-focused development plan. Model limitations: Current objectives are constrained by an administrative ISO 9001:2015 application.

Recommendation:

"Defining quality objectives" is identified as a necessary improvement.

Monitoring Fulfillment: Focus on finance: The institutional development plan's indicators primarily monitor financial aspects, not specific quality objective fulfillment.

Inconsistent PDCA: While the PDCA cycle is formally used, its application for monitoring is "not homogeneous" across all processes.

Needed for education: Specific PDCA-based procedures are recommended for developing and monitoring educational programs.

Semmelweis University:

How the medical school develops its quality objectives:

University Strategic Plan: Quality objectives are primarily derived from the University's "Institutional Development Plan," which outlines strategic objectives (e.g., 2021-2024), including its mission and vision. The Faculty's QA system is integral to and follows these university-level strategic goals.

How it monitors their fulfillment:

Annual Faculty Reports: The Faculty prepares annual reports evaluating educational processes and goals achieved in the previous year. Departmental Management Reports: Each department produces annual management reports that include the results of set quality objectives.

Stakeholder Feedback:

Students: Opinions and proposals are collected via surveys and questionnaires; they are also represented in the Faculty Council and all feedback reaches the Dean.

Teaching Hospitals: Representatives meet with the Dean twice a year to discuss and provide feedback on education; contracts are renewed every five years based on the Faculty's quality control system.

Faculty Meetings: Semi-annual faculty meetings are held where members can share ideas for educational improvement.

University of Szeged:

Quality Objectives Development:

Focuses on improving teaching/studies quality and developing basic/clinical research. Guided by university-level QAS, national/international standards, and internal strategic documents.

Monitoring Fulfillment:

Teaching: Monitored solely through student opinion surveys; Vice-Dean for Educational Affairs and Head of Registrar's Office are responsible.

Research: Monitored by publication count, impact factor, and classification; Vice-Dean for Scientific Affairs is responsible.

Overall QAS review is planned annually.

Monitoring systems are new/under modernization at the Faculty level.

Comprehensive response:

University of Pécs:

Development of Quality Objectives: Objectives are typically not set independently but are derived from the institutional development plan, which includes detailed indicators. The strategic program "PotePillars" also exists.

Monitoring Fulfillment: Fulfillment is monitored through the detailed indicators within the institutional development plan and compliance testing with ESG 2015 standards. Regular annual external and internal audits are conducted. However, PotePillars is noted as not yet broken down into actionable projects for specific units, indicating a gap in operational monitoring.

University of Debrecen:

Development of Quality Objectives: The Faculty's Quality Assurance Board, which includes key faculty leadership, "defines the faculty goals regarding quality assurance every year." These goals are aligned with the University's Quality Policy and Assurance Manual.

Monitoring Fulfillment: Implementation of quality assurance tasks within the Faculty is monitored by the Head of the Dean's Office. The quality system manager ensures compliance with university specifications. Results of QA activities are shared with stakeholders.

Semmelweis University:

Development of Quality Objectives: Strategic objectives are detailed in the University's publicly available Institutional Development Plan (which includes the University's mission and vision). The faculty does not have its own quality policy but follows the institutional-level one. QA-related tasks are determined by the Senate and coordinated by the Quality Improvement Board at the university level.

Monitoring Fulfillment: The Faculty prepares an annual report evaluating educational processes and ""goals achieved"" in the previous year. Departmental annual management reports are produced, including results of set quality objectives. Student opinions and proposals are collected via surveys and questionnaires, and these results are used to improve education and training.

University of Szeged:

Development of Quality Objectives: Quality objectives cover teaching and research, aimed at improving the quality of studies and developing research. They are guided by the University's Quality Policy Statement, Quality Objectives, and the Institutional Development Plan. The Quality Assurance Board at the medical faculty monitors teaching and research.

Monitoring Fulfillment: For teaching, fulfillment is ""implemented solely by measuring student opinion (surveys)."" Indicators from student satisfaction surveys are linked to teaching. For research, indicators like the number of publications and impact factors are developed, published, and communicated. The Faculty's QA system, being new, plans annual reviews for monitoring.

Common Patterns Across All Institutions:

Institutional Alignment: Quality objectives at the medical school level are consistently derived from, guided by, or aligned with the broader university's strategic plans, development plans, and central quality policies.

Formalized Goal Setting: Specific bodies or committees (e.g., Faculty QA Board, University Senate, QDC) are involved in formally defining or endorsing these quality objectives.

Regular Reporting and Evaluation: All institutions employ regular (annual or semesterly) reporting and evaluation cycles at faculty and/or departmental levels to assess progress towards objectives.

Reliance on Indicators: Monitoring often relies on specific indicators, whether they are explicitly detailed in development plans (PTE), derived from student feedback (all), or related to research output (SZTE, Semmelweis).

Student Feedback as a Key Monitoring Tool: Student surveys and feedback mechanisms are a universally adopted and crucial method for gathering data relevant to the fulfillment of quality objectives, especially in teaching.

Leadership Oversight: Faculty leadership (Deans, Vice Deans, QA managers) play a direct role in monitoring implementation and ensuring compliance with quality objectives.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Development: Faculty Quality Assurance Committee (Dean, vice-deans, Student Government president, Dean's Office head) meets twice annually and determines Faculty's annual quality objectives.

Monitoring: Committee makes decisions; Feedback Subcommittee supports work. Dean's Office head supervises task execution; QA system leader ensures compliance with University QA Manual.

Documentation: Based on University's Quality Policy and QA Manual following ISO 9001:2015. Annual faculty reports prepared; department-level annual management reports include results of set quality objectives.

University of Pécs:

Development: Independent quality policy document from 2018 (needs updating per 1.1). Three-year institutional development plan with detailed indicators, but primarily focuses on financing. Institution does not define separate quality objectives independent of development plan with indicators.

Monitoring: Regular external and internal ISO audits conducted. PDCA cycle formally occurs at institutional process level but development level of individual elements not homogeneous.

Gap: Quality objectives, methods, and interventions limited due to ISO 9001:2015 administrative model application. Manual not suitable for developing PDCA-based procedures for educational programs.

Semmelweis University:

Development: Based on University's Institutional Development Plan (2021-2024) containing mission, vision, and strategic goals. Senate defines QA tasks at university level; Quality Development Committee coordinates.

Monitoring: Faculty prepares annual report evaluating educational processes and previous year's goals. Department-level annual management reports include quality objective results. Semi-annual faculty meetings where members share ideas on educational development. Teaching hospital contracts renewed every five years based on quality control system.

Gap: No separate faculty-level quality policy (institutional policy applies). Need to harmonize WFME standards with ISO and ESG systems.

University of Szeged:

Development: Faculty quality objectives currently cover two areas only: (1) Education - improving study quality; (2) Research - developing basic/clinical research. Vice-deans for education/research and Study Office head responsible. Guided by Quality Policy Statement, Quality Objectives, Quality Development Standards, and Institutional Development Plan (2021-2024). Monitoring - Education: Only measured through student opinion surveys. Indicators: student satisfaction surveys linked to teaching; electronic data transfer discipline indicators linked to courses.

Monitoring - Research: Two indicators: (i) number of publications; (ii) impact factor and classification of publications. Documents published and communicated to department heads. Status: Faculty QA system established November 2022, just starting operation. Many documents newly created, no updates yet. Annual review planned. Procedures don't appear long-established; systems currently under review or modernization.

Comprehensive response:

Strengths: Most institutions have formal structures for setting objectives (committees, annual planning); monitoring through reports, audits, and surveys.

Weaknesses: Quality objectives often limited in scope (SZAOK only education/research; PTE no independent objectives); monitoring primarily through student surveys rather than comprehensive indicators; newer systems lack maturity (SZAOK); ISO-based approaches may not effectively support educational program QA (PTE); WFME alignment incomplete across institutions.

Standard 7 QUALITY ASSURANCE – Prompt 13

Based on Chapter 7, The Quality Assurance System of the Medical School, summarize the findings related to the following statement: the medical school has a basic quality assurance document that defines quality concepts and quality objectives consistent with the training program and mission statement. Summarize briefly for each point!

Natural Intelligence Response

University of Debrecen:

In accordance with the requirements of ISO 9001:2015. It is recommended that the Quality Assurance Manual comply with WFME (World Federation for Medical Education) standards in the future.

University of Pécs:

The institutional quality assurance system includes an assessment of compliance with ESG 2015 standards, but a deeper understanding of the standards requires further development. The current management of the institution has formulated a strategic program called PotePillars.

The concept of the ISO system and the limitations arising from it may not effectively support the implementation of the PotePillars strategy, the interpretation and application of the ESG2015 and MAB-WFME standards, or the achievement of the objectives set out in each pillar.

Semmelweis University:

The system is based on the ISO 9001 standard, but also takes into account the ISO 50001, ISO 14001, MEES, ESG 2015, and WFME BME 2020 standards. The University has strived to harmonize ISO and ESG standards, but the connection to WFME standards is still in progress.

It is recommended to harmonize WFME standards with ISO and ESG systems and to explore differences and overlaps in order to streamline the operation of the integrated system.

University of Szeged:

It is recommended that a more comprehensive and structured quality assurance system be introduced, covering four areas of education: the curriculum, the competencies of teachers, learning resources, and the environment and needs of students (see Recommendation 4.2 for the latter).

It is recommended that the Quality Development Standards be harmonized with the WFME standards in the future.

Comprehensive response:

The integration of different training and organizational quality assurance standards into an integrated system at different levels of development in each faculty. The harmonization of ISO, WFME, and ESG 2015, and the creation of institution-specific conversion keys for each standard, are particularly problematic.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

The Faculty has a foundational quality assurance document that defines quality concepts and objectives. These quality objectives are consistent with the training program and the mission statement of the Faculty. The document is part of the Faculty's internal quality assurance system, which is integrated with the University's overall QA system. The Faculty Organisation and Operation Regulations, along with relevant annexes, contain the definitions and objectives and are publicly available on the Faculty website. The quality assurance system is designed to maintain and improve the standards of teaching, student learning experiences, research, and community service, in line with the Faculty's mission. The University's quality policy is also relevant at the Faculty level and is accessible online, although mostly in Hungarian.

University of Pécs:

1. Existence of a basic quality assurance document

The institution (including the medical school) has an independent quality policy document, dated 2018, which forms the foundation of its quality assurance system.

2. Document requires updating for alignment

The chapter states that this quality policy document needs updating to reflect current institutional strategies and expectations, indicating that its alignment with the training program and mission statement is not fully current.

3. Quality objectives are embedded in institutional-level planning

Quality objectives are largely derived from the institutional development plan, which contains detailed indicators but focuses mostly on funding, not on educational quality—suggesting incomplete alignment with the medical school's training program.

4. Lack of clearly defined, training-program-specific quality objectives

The evaluation notes that the institution typically does not set independent quality objectives outside the development plan, which means that explicit quality objectives linked directly to the medical school's training program and mission are not fully articulated.

5. QA Handbook not aligned with updated standards

The Quality Assurance Handbook annexes have not been updated to integrate the PotePillars strategy, ESG 2015, or WFME-MAB standards, meaning the QA documentation is not yet fully aligned with current program-level requirements.

6. Unclear definition of quality concepts and their implementation

The chapter highlights that the institution has not yet clarified what it means by "qualitative implementation" of the PotePillars strategy or what specific role the QA organization plays, implying that quality concepts are not yet clearly defined or operationalized.

Semmelweis University:

Integrated QA System: The Faculty's internal quality assurance system is an integral part of the University's QA system and is designed to develop, maintain, and improve the quality and standards of teaching, learning, research, and community service.

Documentation and Accessibility: The Faculty's organizational chart, committee responsibilities, and rules of procedure are publicly available. Most QA-related documents are accessible on the Faculty and University websites, though primarily in Hungarian.

Alignment with Mission and Training Program: The QA system is designed in accordance with the University's strategy, policy, and procedures, ensuring that quality concepts and objectives are consistent with the training program and mission statement.

Reference to Standards: The QA system is based on ISO 9001 and considers other standards (ISO 50001, ISO 14001, MEES, ESG 2015, WFME BME 2020), supporting alignment with both institutional and educational objectives.

Recommendation for Improvement: It is recommended to develop a comprehensive Quality Assurance Handbook at the program level, which would clearly define all quality concepts, objectives, and processes, and make it accessible in multiple languages.

University of Szeged:

Existence of Core Documents: The medical school has established foundational quality assurance documents, including the Quality Policy Statement, Quality Objectives, and Standards for Quality Improvement. These are guided by the Institutional Development Plan.

Definition of Quality Concepts and Objectives: These documents define the core quality concepts and objectives for the faculty, ensuring clarity and consistency in quality assurance practices.

Alignment with Training Program and Mission Statement: The quality objectives are developed to be consistent with both the training program and the mission statement of the medical school, focusing on improving teaching and research quality.

Compliance with Standards: The documents and objectives are designed to comply with national and international higher education standards (e.g., Hungarian Accreditation Committee, ESG guidelines).

Communication and Publication: The quality assurance documents and objectives are published by the faculty and communicated to department heads, ensuring transparency and awareness among stakeholders.

Comprehensive response:

University of Pécs:

Findings

Operates an ISO 9001:2015-based quality management system with a standalone quality policy (2018). Quality objectives exist but are not independently set from the institutional development plan and focus mostly on funding, not education. Quality assurance handbook annexes have not yet been updated to reflect new strategic directions (PotePillars), ESG 2015, or WFME–MAB standards. ISO-based system constrains the development of educational, PDCA-based quality processes. Quality objectives and procedures are therefore partially aligned, but not fully consistent, with the mission and educational strategy.

Overall: A QA document exists but is outdated, not aligned with recent mission-related strategic documents, and insufficiently tailored to educational quality.

University of Debrecen:

Findings

QA is managed through the University's ISO 9001:2015 system, which includes a Quality Policy and Quality Assurance Manual. Faculty's mission statement aligns with the Quality Policy and is used to guide QA processes. However, documents are inconsistently updated across languages (Hungarian versions newer than English). Practical linkage between mission statement and QA system is not always explicit. Some roles and responsibilities within QA are unclear.

Overall: A functioning QA documentation system exists and is mission-consistent, but requires improved coherence, clarity of roles, and updated documentation.

Semmelweis University:

Findings

Integrated QA system following multiple standards (ISO 9001, 50001, 14001, MEES, ESG 2015; partially WFME). Faculty does not have its own quality policy; relies on the University's institutional QA policy (Hungarian only). QA activities are regulated in the Rules of Organisation and Operation and Integrated Management System Manual. Mission/strategy links exist but are indirect; QA documents are not faculty-specific.

Overall: QA documentation system exists and is aligned with the University's mission, but the Faculty lacks its own QA policy and English/German versions.

University of Szeged:

Findings

The Faculty has a newly established multilevel QA system (created in 2022), aligned with university-level quality documents (Quality Policy, Quality Objectives, Standards for Quality Improvement). University-level policies are the real backbone; faculty-specific QA documentation is new and not yet fully implemented or updated. Faculty quality objectives focus on two areas (teaching, research), but educational QA is measured almost exclusively via student surveys. System updates and structured processes (e.g., regular review, stakeholder involvement) are still under development.

Overall: A QA documentation system exists but is new, incomplete, and not yet fully consistent with mission-aligned educational QA expectations.

Cross-Institutional Common Patterns:

Across all four Hungarian medical schools, several clear patterns emerge:

1. All institutions have some form of basic QA documentation (quality policy, QA manual, etc.). Usually established at university level and based on ISO 9001:2015. Faculty-level QA documents often rely heavily on institutional-level policies.

2. Alignment with mission statements exists in principle—but not fully in practice. Mission statements are referenced as foundations.

However, institutions often: lack updated QA documents reflecting recent mission revisions (e.g., PTE), or rely on general statements rather than specific, actionable quality objectives.

3. QA documents are often outdated or inconsistently updated. Language differences (DE, SE). Delayed updates to reflect new strategies (PTE). Newly created but not yet tested systems (SZTE).

4. Faculty-specific QA objectives are insufficiently defined. Objectives are: too general, not directly linked to programme-level quality assurance, or overly focused on institutional financial/administrative goals rather than educational quality.

5. Weak translation of mission/strategy into operational QA processes. All institutions struggle to create a clear, traceable link between: mission, quality objectives, educational programme QA.

ISO systems support administrative compliance but not educational quality cycles.

6. Stakeholder involvement is inconsistently integrated and poorly documented. Students or external partners are mentioned but the actual mechanisms of involvement are unclear or variable.

Short Overall Synthesis

Across all institutions, QA documents do exist and broadly align with mission statements, but they are often outdated, too general, insufficiently faculty-specific, and not adequately connected to educational programme-level quality assurance. The reliance on ISO systems limits educational QA specificity, and stakeholder involvement is uneven.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Existence of basic QA document

The faculty's QA system is based on the University of Debrecen's Quality Policy and Quality Assurance Manual, which define quality principles and procedures.

Definition of quality concepts and objectives

The Quality Assurance Board sets faculty QA goals annually within this university QA framework.

Consistency with training program and mission

The manual is based on the university's mission and strategy, but for the medical school the link between QA system and its own mission/strategy is not clearly demonstrated. It is

recommended that the faculty QA system and QA Manual be brought into explicit compliance with the faculty's mission, strategy, and WFME standards.

University of Pécs:

Basic QA Document: The institution has an ISO 9001:2015 compliant system and a quality policy, but the main QA Manual is outdated, lacks key strategic/standard integration (PotePillars, ESG, WFME), and is unsuitable for educational processes.

Defines Quality Concepts: The "quality implementation" of the PotePillars strategy is unclear, and the current ISO system's limitations hinder understanding and applying relevant educational standards.

Quality Objectives Consistent: Independent quality objectives are generally absent (linked to a financial plan). Existing objectives are limited by administrative ISO application, indicating a need for clearly defined and strategically aligned quality objectives. (rövidített)"

Semmelweis University:

Absence of Dedicated Faculty Document: The medical school does not have its own specific quality policy document.

Reliance on University Policy: It relies on the institutional-level quality policy and the University's ""Institutional Development Plan"" (which includes the mission, vision, and strategic objectives) for defining quality concepts and objectives. These are stated as "relevant at the Faculty level."

Consistency with Training/Mission: While the Faculty's QA system aims to develop quality consistent with its mission, the foundational definitions for quality concepts and objectives stem from these broader university documents.

Accessibility Concern: The University's quality policy is currently available only in Hungarian, hindering accessibility for international students.

Recommendation: A specific recommendation is to develop a separate, faculty-level QA policy and make it available in English and German.

University of Szeged:

Basic Quality Assurance Document: The medical school's QAS (established Nov 2022) operates within the University's comprehensive QAS, which is guided by a Quality Policy Statement, Quality Objectives, and Institutional Development Plan.

Defines Quality Concepts: The University's QAS aligns with national (HAC, Ministry) and international (ESG) higher education quality standards.

Consistent with Training Program and Mission Statement: The medical school's quality objectives explicitly aim to improve "quality of studies" and develop "basic and clinical research," directly supporting its training program and mission.

Comprehensive response:

Common Patterns Across All Institutions:

Existence of Foundational Documents: All medical schools operate within a framework of foundational QA documents, whether specific to the faculty or derived from the overarching university system. These typically include Quality Policies, Manuals, and Institutional Development Plans.

Alignment with Mission Statement: There is an explicit or implicit aim for these QA documents, and the quality concepts/objectives within them, to be consistent with the institution's mission statement and training program.

ISO Certification as a Standard: Many institutions mention operating their QA systems in accordance with the ISO 9001:2015 standard, indicating a structured approach to defining quality.

Challenges with Specificity and Operationalization: A common theme is the struggle to translate high-level QA concepts and objectives into clearly actionable, faculty-specific procedures that directly address the nuances of the medical training program. This often leads to recommendations for more detailed development, better alignment of sub-documents, or clearer definitions of how quality is implemented at the faculty level.

Public Accessibility: QA-related documents are generally intended to be publicly available, though accessibility issues (e.g., language versions, outdated documents) are sometimes noted.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Documents: University Quality Policy and Quality Assurance Manual (ISO 9001:2015 compliant). Faculty operates based on these institutional documents.

Availability: QA documents publicly available on university website, in Hungarian and English.

Problem: Version inconsistency - Hungarian version (15th edition, Dec 2021), but Faculty website shows 13th edition; English version is 8th edition (2017). QA Committee determines annual quality objectives.

Gap: Need for QA system to be aligned with Faculty mission and strategy. Future Manual should comply with WFME standards.

University of Pécs:

Documents: Independent quality policy document (dated 2018, needs updating per 1.1); three-year institutional development plan with detailed indicators; Quality Assurance Manual.

Alignment: Development plan primarily focuses on financing rather than quality concepts. Institution does not define separate quality objectives independent of development plan.

Gap: Quality Assurance Manual appendices not yet updated with PotePillars strategy, ESG 2015 compliance results, or WFME-MAB medical education standards. Requires deeper elaboration of PotePillars content at organizational level and deeper interpretation of standards.

Semmelweis University:

Documents: University's Organizational and Operational Regulations (Part I.5) defines QA system; Integrated Management System Manual; Institutional Development Plan (2021-2024) contains mission, vision, and strategic goals. Faculty Organizational and Operational Regulations and appendices available on Faculty website. No separate Faculty quality policy: Institutional-level quality policy applies at Faculty level, but only available in Hungarian on website. Integration: Integrated quality management system based on ISO 9001, considering ISO 50001, ISO 14001, MEES, ESG 2015, and WFME BME 2020 standards. University harmonized ISO and ESG standards, but WFME standards connection still in progress. Gap: Need to develop and implement program/manual for educational program-level QA including regular review and development. Should separate Faculty-level quality policy from institutional policy and make available in English and German as key QA document.

University of Szeged:

Documents: Quality Policy Statement, Quality Objectives, Quality Development Standards, and Institutional Development Plan (2021-2024) guide QA activities. Aims to comply with MAB criteria, Ministry guidelines, and ESG standards.

Faculty system status: Established November 2022, just beginning operation. Many documents newly created, no updates yet.

Quality objectives: Currently limited to two areas only - education and research. Education measured only through student surveys; research through publication numbers and impact factors.

Gap: Need to harmonize Quality Development Standards with WFME standards in future. Requires more comprehensive and structured QA system covering four educational areas:

study program, instructor competencies, learning resources, and student environment/needs.

Comprehensive response:

Strengths: All institutions have formal QA documentation (policies, manuals, regulations); reference to institutional mission/strategy; ISO-based frameworks.

Weaknesses: WFME standards not yet fully integrated into QA documents (all institutions); documentation often outdated or inconsistent versions (DE, PTE); quality objectives limited in scope or not independently defined (PTE, SZAOK); documents often only in Hungarian, limiting international student access (SOE, DE); newer systems lack maturity and comprehensive coverage (SZAOK).

Standard 7 QUALITY ASSURANCE – Prompt 14

Based on Chapter 7, The quality assurance system of the medical school, summarize the findings related to the following statements: the medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program. The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent. Summarize briefly for each statement!

Natural Intelligence Response

University of Debrecen:

The head of the Dean's Office supervises the implementation of internal quality assurance tasks, while the head of the quality management system ensures that the Faculty's quality assurance system complies with the requirements set out in the University's Quality Assurance Manual.

University of Pécs:

At the institutional process level, the PDCA cycle formally occurs and repeats regularly in the institution's operations, but the level of development of certain elements is not homogeneous.

Semmelweis University:

This is a system in which internal quality assurance mechanisms operate at the level of the educational program in order to maintain and improve quality. Each year, the faculty prepares a report evaluating the educational processes and the goals achieved in the previous year. At the departmental level, annual management reports are prepared, which include the

results of the quality objectives set. A faculty meeting is organized every semester, where faculty members can share their ideas on the development of education.

University of Szeged:

The University conducts several surveys to achieve its goals. At the university level, the Graduate Career Tracking System operates centrally. The data is then analyzed to support decision-making. At the faculty level, these procedures do not appear to have a long history, and the systems (e.g., the administrative staff evaluation system or the Student Evaluation of Teaching Regulations) are currently under review or modernization.

Comprehensive response:

PDCA awareness can be found in the faculty, but organizational units and hierarchical levels are involved in implementation differently in certain faculties.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

1. The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program. The Faculty has a dedicated quality assurance (QA) organization, including management, committees, and groups with clearly defined responsibilities. The QA system operates continuously to monitor and improve teaching, student learning experiences, research, and community services. Annual reports at both faculty and department levels evaluate educational processes and achievement of quality objectives. Regular faculty meetings and stakeholder involvement (students, alumni, teaching hospitals) ensure ongoing evaluation and improvement of all supporting processes.

2. The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent. QA processes are governed by publicly available regulations and documents, such as the Faculty Organisation and Operation Regulations. The responsibilities and procedures of QA committees are documented and accessible. Most QA-related documents are available on the Faculty website (primarily in Hungarian). Results of QA processes, including annual reports and action plans, are shared internally and discussed in faculty meetings, ensuring transparency.

University of Pécs:

1. The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes supporting students and faculty.

Operates within an ISO 9001:2015-based institutional QA framework: The medical school functions inside the institution's ISO-certified quality management system, which includes

regular internal and external audits, ensuring oversight of processes affecting students and faculty.

A central QA unit supports process monitoring: The Quality Management and Institution Development Department supports monitoring and evaluating processes that affect the educational experience of students and faculty.

QA activities occur, but often at a micro-management rather than strategic level: Although monitoring takes place, QA efforts currently focus more on operational tasks than on systematic, strategic evaluation of all processes supporting teaching and learning.

PDCA cycles exist but are inconsistently developed: The institution applies the PDCA cycle formally, but the depth of its implementation is uneven, meaning not all processes supporting students and faculty are monitored with equal rigor.

Need for more explicit definition of QA roles: It is not yet clearly defined what specific role the QA organization plays in supporting the implementation of the training program.

2. The quality assurance processes of the medical school are regulated, documented, and transparent.

Existence of institutional QA policy and system documentation: The medical school uses the institution's quality policy document (2018) and Quality Assurance Handbook as its regulatory framework.

Documentation exists but is outdated and not fully aligned: Key QA documents have not been updated in line with the PotePillars strategy, ESG 2015, and WFME-MAB standards, limiting the clarity and relevance of documented QA regulation.

Transparency of QA results is limited by incomplete updates: Although QA processes are formally documented, the lack of updated annexes and criteria reduces the transparency and usability of the results for stakeholders.

Stakeholders are identified but involvement is unclear: Stakeholder groups are defined, but the QA system does not clearly document how stakeholders influence processes, which affects transparency of QA decision-making.

Recommendations emphasize strengthening documentation and transparency: The report calls for improved documentation, clearer QA roles, and more transparent PDCA-based procedures to ensure regulated and visible QA processes.

Semmelweis University:

1. The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program.

Quality Assurance Organization: The Faculty has its own management, committees, and groups with clearly defined responsibilities for quality assurance. These structures are determined by the Faculty Council and Dean, and their roles are publicly documented.

Regular Monitoring and Evaluation: The Faculty's QA system is an integral part of the University's QA system and is designed to regularly monitor and improve teaching, student learning experiences, research, and community services. Annual reports and semesterly faculty meetings are held to evaluate educational processes and achievements. Departments also produce annual management reports on quality objectives.

Stakeholder Involvement: Students, alumni, and teaching hospitals are actively involved in QA activities. Feedback is collected through surveys and meetings, and the Dean receives all submitted feedback.

2. The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent.

Regulation and Documentation: The QA system is regulated by publicly available rules of procedure, organizational charts, and committee responsibilities. Most QA-related documents are accessible on the Faculty and University websites, though primarily in Hungarian.

Transparency of Results: Annual and departmental reports, as well as feedback from stakeholders, are used to evaluate and improve processes. The Faculty's organizational structure and QA procedures are published online, ensuring transparency.

Recommendations for Further Transparency: It is recommended to develop a comprehensive QA handbook and to make key QA documents available in English and German for broader accessibility.

University of Szeged:

1. The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program.

The medical school has established a dedicated quality assurance organization as part of an integrated, multi-level Quality Assurance System (QAS) operating at university, faculty, and department levels. The Quality Assurance Board at the faculty level is responsible for monitoring teaching and research, with specific roles assigned to vice-deans and department heads. The QAS covers processes that support both students (e.g., teaching quality, learning resources, student satisfaction surveys) and faculty (e.g., staff competence, research output). Regular monitoring and annual reviews are planned to evaluate the effectiveness of these processes and ensure continuous improvement.

2. The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent.

The quality assurance processes are formally regulated and defined in official documents such as the Quality Policy Statement, Quality Objectives, and Standards for Quality Improvement. All processes and responsibilities are documented and guided by the Institutional Development Plan and compliance with national and international standards. Results and indicators from quality assurance activities (e.g., student surveys, research metrics) are published by the faculty and communicated to department heads. Transparency is ensured by sharing outcomes with relevant stakeholders and making key results publicly available.

Comprehensive response:

Dedicated QA Organization: Each medical school has a dedicated quality assurance organization or committee responsible for regular monitoring and evaluation of all processes supporting students and faculty.

Regulated and Documented Processes: QA processes are regulated by institutional policies (often ISO 9001:2015), documented in official manuals or policies, and regularly updated.

Transparency: Results of QA processes are shared with relevant stakeholders (faculty, staff, students), supporting transparency and accountability.

Continuous Review: Regular audits, meetings, and reports ensure ongoing evaluation and improvement.

Multi-level Structure: QA is managed at multiple levels (university, faculty, department), with clear roles and responsibilities."

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

QA organization monitors and evaluates processes

A Faculty Quality Assurance Board (Dean, Vice Deans, Head of Students' Union, Head of Dean's Office), supported by a quality system manager and the Feed-back Subcommittee, formally oversees QA and sets annual QA goals.

The Head of the Dean's Office monitors implementation of QA tasks, but during the visit the practical, systematic monitoring of all student- and staff-supporting processes and the exact roles/responsibilities were not clearly demonstrated.

Regulation, documentation, and transparency

QA is based on the university's Quality Policy and Quality Assurance Manual (ISO 9001:2015); QA documents are publicly available on the website, but versions are partly outdated and inconsistent, especially in English.

QA results are shared with stakeholders and students are actively involved, yet the link to the overall QA system and strategy is only partially explicit, so regulation and transparency need clearer, updated documentation.

University of Pécs:

1. The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program.

A central QA department exists, shows progress in supporting processes and experience, but often micro-manages, lacks strategic oversight, and monitoring/evaluation consistency is not homogeneous, requiring organizational rethinking.

2. The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent.

Processes are regulated (ISO compliant, audited), but core documentation (QA Manual) is outdated, lacks crucial strategic/educational standard integration, and is unsuitable for educational PDCA. Transparency of results is limited by undefined stakeholder influence and unclear data integration. (rövidített)"

Semmelweis University:

1. The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program.

QA Organization: The Faculty has a defined QA structure, including management, committees (e.g., Accreditation Committee), and published responsibilities.

Monitoring/Evaluation: Achieved through annual faculty/department reports, semi-annual faculty meetings, student surveys, bi-annual feedback from teaching hospitals, and 5-year contract renewals.

Support: Students are actively involved via feedback and Council representation, and faculty participate in improvement discussions.

2. The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent.

Regulated/Documented: Processes align with the University's published QA system, rules, regulations, and Integrated Management System (ISO, ESG, WFME standards). The Faculty has its own published operational regulations and annual reports.

Transparency: Organizational structures and university-level QA documents are publicly accessible. Active stakeholder involvement promotes transparency.

Limitation: Many QA documents and the University's quality policy are only in Hungarian, reducing transparency for international stakeholders.

University of Szeged:

Statement 1: The medical school maintains a quality assurance organization that regularly monitors and evaluates all processes that support both students and faculty in the implementation of the training program.
The Medical Faculty's Quality Assurance Board (QAB) and departmental QA personnel annually monitor teaching and research processes, directly supporting students and faculty in the training program.
Statement 2: The quality assurance processes of the medical school are regulated, documented, and the results of the quality assurance processes are transparent.
QA processes are regulated by national/international standards and university-level documents, with new faculty-specific documentation. Results, such as research indicators, are published and communicated, and surveys are analyzed for decision-making.

Comprehensive response:

Common Patterns Across All Institutions:

Formal QA Structures and Documentation: All institutions possess a dedicated QA organization and have formal documents (policies, manuals, regulations) that regulate their QA processes, often adhering to ISO 9001:2015 standards.

Intent for Monitoring and Evaluation: There is a clear intent to regularly monitor and evaluate processes related to the training program, inherently supporting students and faculty. This often involves audits, annual reports, and review by various committees.

Aim for Transparency: Institutions generally state that QA-related documents are publicly available, indicating an aspiration for transparency in their processes and results.

Challenges with Operationalization, Consistency, and Full Transparency:

Strategic-Operational Gap: A recurring issue is the difficulty in fully translating high-level strategic QA goals into concrete, actionable, and effectively monitored projects at the operational level that directly benefit students and faculty.

Documentation Alignment & Currency: Inconsistencies between different QA documents (e.g., quality policy vs. strategic plans, language versions) and outdated documents are common concerns that hinder clarity and transparency.

Limited Transparency for All Stakeholders: While documents may be ""publicly available,"" language barriers or inconsistent online presence can limit transparency for international students and other stakeholders.

Maturity of the System: For newer or evolving QA systems, the full embedding, consistent application, and demonstrable transparency of documented processes are ongoing challenges.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Faculty QA system led by faculty leadership in cooperation with Clinical Center. Quality Assurance Committee (dean, deputies, student government president, office head) meets twice yearly. Feedback Subcommittee supports the committee with teacher and student representatives from all programs. QA implementation supervised by Dean's Office head; however, roles and responsibilities of QA participants are not entirely clear. QA documents publicly available on university website.

Quality Assurance Manual available in Hungarian and English, but versions are inconsistent (Hungarian: 15th edition from Dec 2021; faculty website: 13th edition; English: 8th edition from 2017). QA processes shown during site visit were ad-hoc; closer connection to QA system was less clear. Need to ensure up-to-date information accessible to both Hungarian and international stakeholders.

University of Pécs:

Has a Quality Management and Institutional Development Department with dedicated budget that supports the QA system. Currently operates at micromanagement level rather than strategic level. PDCA cycles formally occur at institutional process level, but development levels are not homogeneous.

The 34-member Quality Development Committee's consultative role needs reconsideration. Operates ISO 9001:2015 compliant quality management system with regular internal and external audits. Has independent quality policy (dated 2018, needs updating). Quality Assurance Manual annexes not yet updated with PotePillars strategy, ESG 2015 compliance results, or WFME-MAB standards.

Stakeholder groups identified but their influence and institutional expectations unclear.

Semmelweis University:

Internal QA system is integral part of university system with clearly defined responsibilities for leadership, committees, departments, and groups. Faculty Accreditation Committee responsible for establishing and operating the QA system at faculty level. Stakeholders (students, alumni, teaching hospitals) actively participate in QA activities.

Teaching hospital contracts renewed every 5 years based on quality control system. University strategy, policies, procedures, and most QA documents accessible on university website. QA system defined in Organizational and Operational Regulations (Part I.5) and Integrated Management System Manual. Most QA-related documents available only in Hungarian. Quality policy (fundamental QA document) available only in Hungarian, though majority of students are international.

Faculty prepares annual reports evaluating educational processes and previous year's goals.

University of Szeged:

Recently began developing the QA system with integrated, multi-level structure (university, faculty, department levels). Faculty-level QA Committee (called Quality Assurance Body) established November 2022, just beginning operations. Quality measurement currently limited to student surveys for education; lacks systematic measurement of teacher, alumni, and employer feedback.

Procedures appear recent without long track record. QA activities guided by Quality Policy Statement, Quality Goals, Quality Development Standards, and Institutional Development Plan (2021-2024). Many documents only recently prepared with no updates yet; annual review planned. Quality goals currently cover only two areas: education and research.

Students should be better informed about survey results.

Comprehensive response:

Strengths: ISO 9001:2015 Compliance: All operate quality management systems with regular audits. Student Involvement: Active student participation in QA through committees and surveys. Multi-level Structure: Established QA systems at university, faculty, and department levels. External Stakeholder Engagement: Teaching hospitals and partners participate in QA activities.

Weaknesses: WFME Standards Gap: None have fully integrated WFME standards - all need alignment. Language Accessibility: Inadequate English/German documentation despite international student populations. Limited Measurements: Over-reliance on student surveys; lack systematic teacher, alumni, and employer feedback. Strategy Disconnect: QA systems not clearly aligned with institutional missions and strategies. Outdated

Documentation: Inconsistent or outdated QA document versions. Unclear Roles: Ambiguous responsibilities of QA participants and units.

Standard 7 QUALITY ASSURANCE – Prompt 15

Based on Chapter 7, The quality assurance system of the medical school, briefly summarize the findings related to the following question: briefly introduce the people responsible for the quality assurance system at the medical school.

Natural Intelligence Response

University of Debrecen:

The quality assurance system of the Faculty of Medicine is managed by the faculty leadership in cooperation with the Clinical Center, based on the Quality Policy and Quality Assurance Manual of the University of Debrecen, in accordance with the requirements of the ISO 9001:2015 standard.

The work of the committee is supported by the Feedback Subcommittee, in which teachers and students representing all disciplines participate.

During the on-site visit, examples of quality assurance processes were presented on an ad hoc basis, but the closer connection to the quality assurance system was less clear at the faculty; it would have been useful to get a more detailed picture of how quality assurance processes work in practice.

University of Pécs:

The Quality Management and Institutional Development Department: the Department performs micro-management tasks rather than strategic ones.

There is a clear need to rethink quality assurance and quality management tasks in the planning, implementation, and control system and to establish an appropriate organization to facilitate this.

Semmelweis University:

The faculty has its own management, committees, departments, and groups, whose areas of responsibility are clearly defined. The composition of the faculty committees is determined by the Faculty Council based on the Dean's proposal. The tasks of the committees are set out in their publicly available rules of procedure. The organizational chart of the faculty can be found on the faculty website.

University of Szeged:

The University has recently begun to supplement the Faculty's existing quality assurance system and to further develop it on the basis of standards and strategic documents. The University's goal is to establish a Quality Assurance System (QAS) that complies with the following national and international higher education standards and internal strategic

documents: the criteria set by the Hungarian Accreditation Committee, the guidelines of the Ministry of Culture and Innovation, and the European Higher Education Area Quality Assurance Standards and Guidelines (ESG).

Comprehensive response:

Those responsible for quality assurance activities in the faculties are identifiable, have defined areas of responsibility, and follow the institutional hierarchy, which may reduce the efficiency of solving minor problems requiring quick reactions in the case of decision thresholds.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

People Responsible for Quality Assurance

Faculty Management: Oversees the development and operation of the quality assurance system.

Faculty Accreditation Committee: Carries out quality assurance tasks as defined by the Dean and is responsible for the development and operation of the faculty-level QA system.

Dean: Provides direction for quality assurance activities and receives all feedback submitted by stakeholders.

Faculty Council: Determines the composition of faculty committees and is involved in decision-making related to quality assurance.

Stakeholders: Students, alumni, and representatives of teaching hospitals actively participate in the development and implementation of quality assurance activities.

University of Pécs:

People Responsible for the QA System – Summary

1. Quality Management and Institution Development Department

This is the central unit responsible for operating the institution's (and thus the medical school's) quality assurance system. It has its own allocated budget and provides substantial support for QA processes. The department has achieved significant progress in improving processes and experiences for students and faculty, although it currently performs mostly micro-management tasks rather than strategic QA leadership.

2. Quality Improvement Committee (34 members)

The institution has a 34-member Quality Improvement Committee functioning as a consultative QA body. Its role is recognized but is also identified as needing reconsideration, likely due to unclear responsibilities or limited strategic impact.

3. Institutional Leadership

The leadership (e.g., rectorate/deans) contributes indirectly through the creation of overarching frameworks such as the PotePillars strategy, even though the role of QA in implementing this strategy is not yet clearly defined.

Semmelweis University:

Faculty Management and Committees: The Faculty has its own management, committees, departments, and groups with clearly defined responsibilities for quality assurance. The composition of these committees is determined by the Faculty Council, based on the Dean's recommendation.

Faculty Council: The Faculty Council plays a key role in defining committee membership and overseeing quality assurance structures.

Dean: The Dean is responsible for defining the tasks of the Faculty Accreditation Committee and receives all feedback related to quality assurance.

Faculty Accreditation Committee: This committee is specifically tasked with developing and operating the quality assurance system at the faculty level, as defined by the Dean.

Quality Improvement Board (University level): At the university level, the Quality Improvement Board coordinates quality assurance activities, with tasks determined by the Senate.

University of Szeged:

At University Level: The Rector and the Chancellor are jointly responsible for quality assurance. The Director General of Strategy and Development coordinates the integrated quality assurance system and leads its operation, supported by the Quality Development Committee (QDC).

At Faculty (Medical School) Level: The Quality Assurance Board (QDC at the faculty) is responsible for monitoring teaching and research. The chairperson and members of the Quality Assurance Board are appointed by the Dean of the faculty. The Vice-Dean for Educational Affairs oversees quality objectives related to teaching. The Vice-Dean for Scientific Affairs is responsible for research-related quality objectives. The Head of the Registrar's Office is responsible for administrative aspects of quality assurance.

At Department Level: Each department has either a dedicated quality assurance unit or a designated person responsible for quality assurance tasks.

Comprehensive response:

Dedicated QA Committees/Boards: Each medical school has a formal committee or board responsible for quality assurance, often including the Dean, Vice Deans, and other key leaders.

Central Coordination: There is a central unit or designated leader (department or manager) overseeing the implementation and compliance of the QA system.

Faculty and Departmental Involvement: Responsibilities are distributed across faculty leadership and, in some cases, departmental representatives or designated QA officers.

Defined Roles and Procedures: The composition and duties of those responsible for QA are formally documented in institutional or faculty regulations.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Dean, Vice Dean for Educational Affairs, Vice Dean for Scientific Affairs, Vice Dean for Specialization and Further Education, Head of the Students' Union, Head of the Dean's Office.

The Head of the Dean's Office: monitors implementation of QA tasks within the Faculty.

The quality system manager: ensures the Faculty QA system complies with the University's Quality Assurance Manual.

The Feed-back Subcommittee (staff and student representatives from all majors): supports the QA Board's work.

University of Pécs:

The Department of Quality Management and Institutional Development (DQMID): This is described as the central unit of the institution's quality management system, providing significant support. The Quality Development Committee: A 34-member consultative body, whose role is noted as needing reconsideration. While the chapter focuses on the institutional QA system covering the medical school, it does not explicitly name specific individuals or departments within the medical school itself as solely responsible, instead pointing to these overarching institutional bodies.

Semmelweis University:

Faculty Accreditation Committee: This committee is directly responsible for the development and operation of the quality assurance system at the faculty level, with tasks defined by the Dean.

Dean: Holds a central leadership role, defining tasks for the Accreditation Committee, receiving all submitted feedback, and engaging with external stakeholders like teaching hospitals for feedback.

Faculty Council: Determines the composition of faculty committees, including those involved in QA, and includes student representation in decision-making.

Faculty Management/Leadership: Prepares annual reports evaluating educational processes and goals.

Department Management: Produces annual reports detailing quality objectives and their fulfillment at the departmental level.

Faculty Members: Contribute to QA by sharing ideas for educational improvement at semi-annual faculty meetings.

University of Szeged:

Faculty Level: Quality Assurance Board (QAB): This is the Medical Faculty's specific QDC (Quality Development Committee). Its chairperson and members are appointed by the Dean.

Dean: Appoints the QAB chairperson and members. Vice-Dean for Educational Affairs: Responsible for quality objectives related to teaching. Vice-Dean for Scientific Affairs: Responsible for quality objectives related to research. Head of the Registrar's Office: Responsible for quality objectives related to teaching.

Departmental Level:

Quality Assurance Unit: A dedicated unit within each department responsible for QA tasks. Person Responsible for Quality: In departments without a dedicated unit, this individual performs QA tasks.

Comprehensive response:

Common Patterns Across All Institutions:

Senior Faculty Leadership: The Dean and various Vice Deans are consistently involved and hold significant responsibility for overseeing quality assurance at the faculty level.

Dedicated QA Bodies: All institutions feature specific committees or boards (e.g., Quality Assurance Board, Quality Improvement Committee, Accreditation Committee) explicitly tasked with QA functions.

Student Involvement: Students, often through their unions or as committee members, are recognized participants in the QA system, particularly in feedback mechanisms.

Administrative/Operational Support: Specific roles or departmental units (e.g., Head of Dean's Office, Quality System Manager, departmental QA units) are responsible for the operational implementation and monitoring of QA processes.

Tiered Responsibility: QA responsibilities are distributed across multiple levels, from university-wide oversight down to faculty and departmental execution, ensuring a comprehensive approach.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Quality Assurance Committee led by: Dean, Deputy Dean for Educational Affairs, Deputy Dean for Scientific Affairs, Deputy Dean for Vocational and Postgraduate Training, Student Government President, Dean's Office Head.

Dean's Office Head: Supervises QA task implementation.

Quality Management System Leader: Ensures compliance with University QA Manual.

Feedback Subcommittee: Teachers and students from all programs.

University of Pécs:

Quality Management and Institutional Development Department: Central unit with dedicated budget, responsible for QA system operations.

Quality Development Committee: 34-member consultative body.

Note: Specific leadership roles not detailed in the document.

Semmelweis University:

University level: Senate defines QA tasks; Quality Development Committee coordinates.

Faculty level: Faculty Accreditation Committee responsible for establishing and operating QA system, performing tasks defined by Dean.

Dean: Receives all feedback; meets biannually with teaching hospital representatives.

Note: Clear organizational structure with defined responsibilities for leadership, committees, departments, and groups.

University of Szeged:

University level: Rector and Chancellor jointly responsible; Strategic and Development Director serves as system leader; Quality Development Committee (QDC) provides oversight.

Faculty level: Quality Assurance Committee (Quality Assurance Body), with chair and members appointed by dean.

Faculty leadership: Deputy Dean for Educational Affairs, Deputy Dean for Scientific Affairs, and Head of Student Office responsible for specific areas.

Department level: QA units or designated quality officers.

Comprehensive response:

Similarities:

Committee-based QA structure at all institutions, Dean and deputy deans (education/research) centrally involved, Student representatives included in QA committees, Multi-level responsibility (university, faculty, department), Designated coordinator/unit for QA operations.

Key Difference: Role clarity varies: SE and SZTE have well-defined responsibilities; PTE and DE report ambiguity.

Standard 7 QUALITY ASSURANCE – Prompt 16

Based on Chapter 7, The quality assurance system of the medical school, briefly summarize the findings related to the following statement: describe how stakeholders (external and internal) participate in the quality assurance activities of the medical school.

Natural Intelligence Response

University of Debrecen:

The role and responsibilities of certain participants in the quality assurance bodies are not entirely clear. The results of quality assurance activities are shared with stakeholders, and members of the visiting committee highly appreciated the involvement of students in the faculty's quality assurance bodies (e.g., as committee members) and their active role in various faculty processes.

University of Pécs:

The identification of partners, external and internal stakeholders has been completed in the quality assurance system specifications according to stakeholder groups. However, it is not defined how each stakeholder influences the Institution, nor what expectations the Institution places on them.

Semmelweis University:

During the interviews, the visiting committee found that stakeholders — such as students, alumni and teaching hospitals — actively participate in the development and implementation of the Faculty's quality assurance activities. Contracts with the teaching hospitals are renewed by the Faculty every five years based on the quality control system. (feedback regarding educational processes).

University of Szeged:

A system must be introduced for the systematic and regular measurement and analysis of the opinions of instructors, graduates and employers. As part of staff development,

systematic training should be implemented in the key areas of quality assurance for teaching and administrative personnel.

Comprehensive response:

There is a segmentation of the faculties' external and internal partners; however, they have not been comprehensively identified or categorized with respect to their impact on the faculty.

Artificial Intelligence (COPILOT) Response

University of Debrecen:

Stakeholder Participation in Quality Assurance

Internal Stakeholders: Faculty management, committees, and the Faculty Council are directly involved in developing, operating, and overseeing the quality assurance system. Academic staff participate in regular faculty meetings to discuss educational improvements. Students are represented in the Faculty Council and contribute feedback through surveys and questionnaires, which are used to improve education and clinical training.

External Stakeholders: Alumni and teaching hospitals are actively involved in quality assurance activities. Representatives of teaching hospitals meet with the Dean twice a year to discuss and provide feedback on educational matters, contributing to the improvement of the teaching program.

Feedback Mechanisms: Stakeholder opinions and proposals are collected through various feedback channels and are used to further develop and implement quality assurance activities.

University of Pécs:

Stakeholder Participation in QA – Summary

1. Stakeholders are formally identified in the QA system

The institution (and thus the medical school) defines internal and external stakeholder groups within its quality assurance system specifications.

2. Participation is not clearly defined

Although stakeholder categories exist, the QA system does not specify how each stakeholder group influences the institution, nor what expectations the institution has toward them.

3. Collection of stakeholder input is inconsistent

The medical school’s processes for gathering information or data from stakeholders are described as non-homogeneous, indicating uneven or inconsistent involvement in QA activities.

4. External stakeholder involvement is limited and sometimes symbolic

External participation is often limited to formal roles, such as including a member of an external professional medical organization on final examination committees—though current rules only allow external examiners from twin university faculties, reducing broader stakeholder engagement.

5. Active involvement is overstated in some cases

The report highlights that labeling such committee participation as "active stakeholder involvement" may be misleading, as true engagement in QA processes (e.g., co-design, review, evaluation) is not clearly demonstrated.

6. Limited clarity on stakeholder roles in institutional processes

Apart from needs assessments for external stakeholders, the chapter notes that it is unclear how stakeholders are involved in broader QA and institutional processes, implying a gap between expectations and actual participation.

Semmelweis University:

Internal Stakeholders: Students are actively involved in quality assurance through representation in the Faculty Council and participation in decision-making processes. Faculty members contribute via committees, regular faculty meetings, and feedback mechanisms. Alumni also participate in quality assurance activities.

External Stakeholders: Teaching hospitals are engaged through formal contracts, which are renewed every five years based on quality control criteria. Representatives of teaching hospitals meet the Dean twice a year to discuss and provide feedback on educational matters, contributing to the improvement of the teaching program.

Feedback Mechanisms: Feedback from students, alumni, and teaching hospitals is collected through surveys, questionnaires, and regular meetings. The results are used to further improve education and clinical training, and all feedback is received by the Dean.

University of Szeged:

Internal Stakeholders: Faculty leadership (Dean, Vice-Deans, Head of Registrar's Office) are actively involved in developing and implementing quality assurance objectives and processes. The Quality Assurance Board (QDC at the faculty) includes members appointed from within the faculty. Department-level quality assurance units or designated persons participate in monitoring and evaluating processes. Faculty members and students contribute through surveys and feedback mechanisms, which inform quality improvement.

External Stakeholders: The quality assurance system is designed to comply with national and international standards, involving external bodies such as the Hungarian Accreditation Committee and following guidelines from the Ministry of Culture and Innovation and the

ESG (European Higher Education Area). Recommendations highlight the importance of systematically measuring and analyzing the opinions of graduates and employers, suggesting future expansion of external stakeholder involvement.

Communication and Transparency: Results and indicators from quality assurance activities are published and communicated to department heads and other stakeholders, ensuring transparency and engagement.

Comprehensive response:

Broad Internal Involvement: Internal stakeholders—management, academic staff, students, and representative bodies—are actively involved in QA activities, often through committees and consultations.

Student Participation: Students play an active role in QA processes, including committee membership and feedback mechanisms.

External Stakeholder Engagement: External partners are recognized as important, but their involvement is often less structured or clearly documented compared to internal stakeholders.

Recommendations for Improvement: Institutions are encouraged to clarify, document, and expand the involvement of both internal and external stakeholders, ensuring regular and meaningful participation in QA activities.

Artificial Intelligence (ChatGTP-5) Response

University of Debrecen:

Internal stakeholders: Faculty leadership (Dean, Vice Deans, Head of Dean's Office) participate through the Quality Assurance Board. Students are directly involved via the Head of the Students' Union on the QA Board and through the Feed-back Subcommittee (staff and student representatives from all majors). QA results are shared with internal stakeholders, who take part in follow-up actions.

External stakeholders: The quality assurance system is managed in cooperation with the Clinical Centre as an external institutional partner. QA documents and information are publicly available on the university website (Hungarian and English), allowing external stakeholders access to QA-related information.

University of Pécs:

Identification: Internal and external stakeholders are identified within the quality assurance system's specifications.

Influence and Expectations: How individual stakeholders influence the institution and what their specific expectations are is not defined.

Participation and Data Collection: Information and data collection from stakeholders is not uniform, and how external stakeholders are involved in institutional processes (beyond surveying their needs) is unclear.

Example of Participation: "Active stakeholder participation" includes members from external professional medical organizations on final exam committees, although current regulations limit external committee members to other sister university faculties.

Semmelweis University:

Internal Stakeholders:

Students: They are actively involved, represented in the Faculty Council (participating in decision-making), and their opinions/proposals are collected via surveys/questionnaires, with results used for educational and clinical training improvement. The Dean receives all their feedback.

Faculty Members: They contribute ideas for educational improvement at semi-annual faculty meetings.

External Stakeholders:

Alumni: Are ""actively involved"" in the development and implementation of QA activities.

Teaching Hospitals: Their contracts are renewed based on the Faculty's quality control system, and their representatives meet with the Dean twice a year to discuss and provide feedback on education, thus contributing to program improvement.

University of Szeged:

External Stakeholders:

Standards Bodies: Influence QA via adherence to criteria (HAC, Ministry, ESG).

Graduates/Employers: Currently limited direct involvement; recommended for future systematic surveys.

Internal Stakeholders:

Students: Participate via opinion surveys (sole method for teaching quality monitoring).

Faculty Leadership (Dean, Vice-Deans, Registrar's Head): Responsible for appointing QA members and leading specific quality objective areas.

Quality Assurance Personnel (QAB, Dept. Units/Individuals): Monitor processes and handle local QA tasks.

Heads of Departments: Receive communication on research quality indicators.

Comprehensive response:

Common Patterns Across All Institutions:

Internal Stakeholder Involvement (Students and Academic Staff): This is consistently present and often explicit. Students participate through formal representation on boards/committees and widely used feedback/survey mechanisms. Academic staff are involved in feedback processes and QA committees.

Feedback as a Key Participation Mechanism: For both internal and external stakeholders, providing feedback (via surveys, interviews, or formal channels) is a primary mode of participation in QA activities.

Varying Degrees of External Stakeholder Engagement: While external stakeholders (alumni, employers, professional organizations, teaching hospitals) are acknowledged as important, their active, systematic participation in ongoing QA activities (beyond receiving information or providing general feedback) is less consistently defined or documented across all institutions. For some, it's more of a recommendation for future development.

Areas for Improvement in Definition and Documentation: There's a recurring theme that the influence, expectations, and specific mechanisms of stakeholder involvement, particularly for external partners, need to be better defined, operationalized, and documented.

Artificial Intelligence (CLAUDE – SONNET 4.5) Response

University of Debrecen:

Students: Involved as committee members and active participants in various faculty processes. QA activity results shared with stakeholders. Student involvement highly appreciated by site visit- committee. Limited detail on other stakeholder participation mechanisms.

University of Pécs:

External and internal stakeholders identified in QA system specifications by stakeholder groups. However, how stakeholders influence the institution and institutional expectations toward them are undefined. Information and data collection from stakeholders is not uniform. Beyond surveying external stakeholders' needs, unclear how they are involved in institutional processes.

Example of "active stakeholder participation": external professional medical organization member on final exam committee who may later employ graduates. Current rules only require inviting external committee members from sister university faculties.

Semmelweis University:

Students: Represented in Faculty Council, participate in decision-making; feedback collected via surveys/questionnaires used for education and clinical training improvement; Dean receives all feedback.

Alumni: Actively participate in QA activities.

Teaching hospitals: Representatives meet with Dean twice yearly to discuss and provide feedback on education; contracts renewed every 5 years based on quality control system.

Site visit confirmed stakeholders actively participate in developing and implementing QA activities.

University of Szeged:

Quality measurement limited to student surveys for education. No systematic measurement of teacher, alumni, and employer feedback. Department heads receive and communicate QA documents.

Recommendation: Introduce system for systematic and regular measurement/analysis of teacher, alumni, and employer opinions.

Comprehensive response:

Strengths: All institutions involve students through surveys, committee membership, and feedback mechanisms. Teaching hospitals engaged through contracts and consultations.

Weaknesses: Systematic engagement of teachers, alumni, and employers underdeveloped at most institutions (except SE). Unclear mechanisms for how external stakeholder feedback influences institutional processes. Limited diversity in external stakeholder participation beyond teaching hospital.