

**NATO MILMED COE
QUALITY ASSURANCE POLICY**



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SUBJECT: NATO MILMED COE Quality Assurance Policy

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REFERENCES:

- A. MC 326/4 NATO PRINCIPLES AND POLICIES OF MEDICAL SUPPORT
- B. MC 458/3 NATO's EDUCATION AND TRAINING POLICY
- C. BI-SC75-2, EDUCATION AND TRAINING DIRECTIVE, 02 OCTOBER 2013
- D. Bi-SC 75-7, EDUCATION AND INDIVIDUAL TRAINING DIRECTIVE (E&ITD), 10 SEPTEMBER 2015
- E. 7000/TXX-0077/TT-10661/Ser:SH/JMED/LS/14- 306403, NATO MEDICAL SUPPORT STRATEGIC TRAINING PLAN (STP), 27 MAY 2015
- F. 5000/TSC TTX 0420/TT-140149/Ser:NU 0588, MEDICAL SUPPORT TRAINING REQUIREMENTS ANALYSIS (TRA) FINAL REPORT
- G. MILMED COE TRAINING BRANCH STANDARD OPERATING PROCEDURES MANUAL, April 2016

INTRODUCTION

The purpose of this document is to describe the MILMED COE's Quality Assurance Policy and Strategy. It is applicable for courses, conference and workshops conducted by the MILMED COE, as well as the external training and support that is provided in the COE's role as the appointed Department Head (DH) for the Medical Support discipline in NATO. This manual is MILMED COE's property, has no classification and is for official use only.

1. Background

1.1 As defined by NATO, a Centre of Excellence is a nationally or multi-nationally sponsored entity, which offers recognized expertise and experience to the benefit of the Alliance, especially in support of transformation. The MILMED COE is a multinational institution, working towards the goals of NATO in the field of military medical interoperability. Our projects enable the NATO forces to utilize the latest

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medical standards, methods, best practices and technologies in order to enhance interoperability on the battlefield creating effective medical support within a changing environment. The Centre is composed of 4 medical branches: Deployment Health Surveillance Capability (DHSC) – a satellite branch located in Munich, Germany; Interoperability, Lessons Learned and Training.

1.2 While the determination of NATO's training requirements will remain the responsibility of Allied Command Operations (ACO), Allied Command Transformation (ACT), NATO's responsible Strategic Command for training, will liaise with the MILMED COE, as DH, to ensure that courses' content meets the operational requirement through the use of internal and external evaluation.

1.3 The MILMED COE is committed to provide the best quality education and training, conferences and workshops using processes and procedures that will continuously improve the quality of all courses, external training support and exercises, conferences, and workshops.

1.4 MILMED COE Vision

Committed to the health of our forces

1.5 MILMED COE Mission

MILMED COE develops and implements projects to empower superior and effective medical support services across NATO, during missions abroad and in their home countries.

1.6. MILMED Strategic Goals

Excellence as an Information Knowledge Management Hub in the field of military medicine, including military medical LL

Excellence in Force Health Protection Coordination with an emphasis on health surveillance

Excellence as the Military Medical Evaluation Centre

Excellence in the Department Head Function for the Medical Support Discipline

Excellence in Doctrine and Policy development in order to increase Interoperability

Excellence in Military Medical Training (Individual and Collective)

Excellence in supporting the NATO Command Structure at all levels

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2. Overview of the QA Policy

The NATO Military Medicine Centre of Excellence (MILMED COE) is a multi-national, NATO accredited organization, dedicated to serve the continuous development and transformation of the Alliance with expertise and experience in military health care. The MILMED COE operates an ISO 9001 (2008) compliant quality management (QM) system with the commitment to ensure its continuous improvement in line with the mission and activities of the Centre. Our QMS, ISO 9001/2008, requires and has obtained certification, which is periodically assessed and renewed. The most recent assessment and accreditation occurred in November 2015. The MILMED COE is in the process of upgrading to the new ISO 9001-2015 standard with a planned assessment in October 2016.

The quality management system aims to:

- ensure the effective operation of MILMED COE as expected, and to guarantee the fulfillment of its mission and responsibilities defined in the MOU
- support the system oriented management of MILMED COE taking account of process identification, improvement, traceability and security
- support the operation and development of processes by the continuous monitoring at MILMED COE.

The management commitment:

- determines the quality objectives of MILMED COE and actions to achieve them
- checks the operational processes of MILMED COE, and monitors their performance
- supports staff members attendance in trainings
- attempts continuous improvement of the infrastructure
- provides suppliers selection and periodic evaluation in order to ensure the smooth operation of MILMED COE.

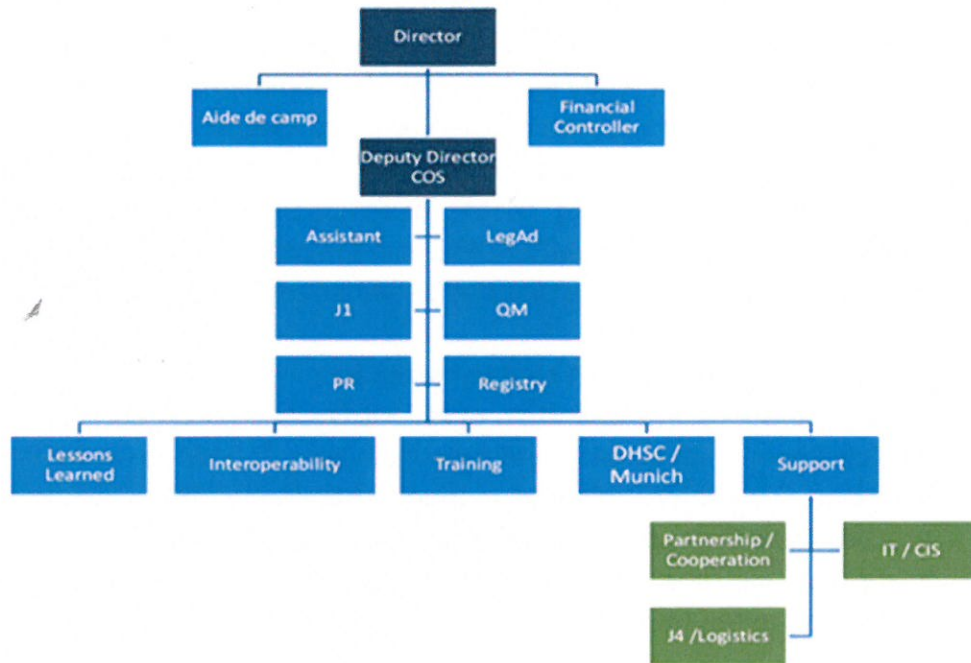
MILMED COE intends to meet its mission by promoting quality consciousness and continuous improvement of the quality management system.

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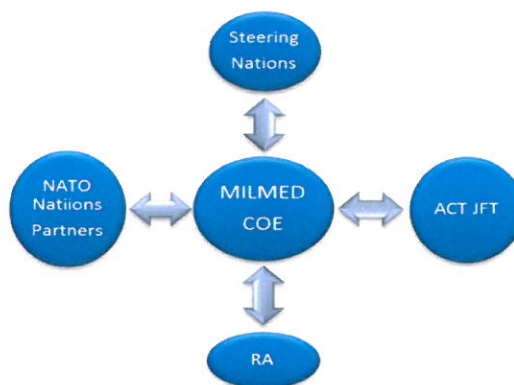


3. Quality Management System.

a. Organization.



MILMED COE Org Chart



MILMED COE Relationships

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b. Roles and Responsibilities.

- Director, MILMED COE- responsible for the application of the Quality Assurance Program of the COE.
- Deputy Director and Chief of Staff (COS) – coordinates the QA policy among the Branches, presents reports to the Director for final approval and action.
- Quality Manager - the management representative of the Quality Management System and responsible for system implementation and its effective functioning, improving of quality consciousness, managing Quality Management System related projects, and reporting to the management.
 - Produce an annual QA report with support of Department Head and the Branch Chiefs.
- Medical Support Department Head (DH) Representative – serves as the QA manager and responsible to the Director for the development and implementation of the QA program.
 - With the QM, co-produce the annual QA report
 - Staffing external course accreditation IAW DH function
 - Coordinate and prepare the Annual Discipline Conference with the Requirements Authority (RA),
 - Produce the Discipline Alignment Plan
 - Execution and compliance to QA processes of external courses
 - Monitoring Course Control Documents (CCD) of external courses per Reference D.
 - Ensuring efficient use of resources are allocated in the execution of the DH function.
- Chief-Training Branch – responsible for
 - Developing and conducting Academic Staff Orientation and Training
 - Execution and compliance to QA processes within COE courses
 - Assist with annual QA report
 - Staffing internal course introduction and enhancement
 - Monitor the timely production of Post Course Reviews (PCR) and providing guidance of actions upon their completion
 - Conduct periodic curriculum review for internal courses
 - Monitoring the proficiency of the Course Director with regard to Course Control Documents (CCD) and/or the production of new documents IAW COE approved formats and tools.

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- Annual monitoring of internal Course Director instructional proficiency
 - Annual audit of internal courses
 - Preparing annual education and training plan for the Director and COE instructors
 - Revising Training Branch job descriptions, as needed.
 - Ensuring efficient use of resources are allocated to COE courses.
- Course Director (CD) – responsible to the Training Branch Chief for:
- Maintaining course relevance by monitoring developments in the discipline and engaging the community of interest to include the Office of Primary Responsibility Action Officer (OPR AO), RA and DH
 - Creating and maintaining CCD for assigned courses
 - Planning and preparing assigned courses
 - Enabling a conducive learning environment and monitoring the welfare of students during course facilitation
 - Executing assigned courses.
- Course Administrator (CA) – responsible to the CD for:
- Preparing and conducting course in IAW the Training Branch SOP
 - Coordinating the visits of guest lecturers and speakers assigned to the course
 - Provide daily security, safety and administrative updates to students and instructors (when required).
 - Assisting the CD in all matters related to the courses
- Course Registration (CR) – responsible for:
- Manage and monitor the course manning selection criteria
- Course Support (CS) – The Support Branch provides necessary and timely support to the conduct of all internal courses, conference and workshops, per the involved branch and Support Branch SOP.
- Manage and track event request forms
 - Transportation of students and speakers per CD request
 - Produce and manage name tags/cards
 - Catering, etc.

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4. Implementation Strategy.

4.1 The quality assurance (QA) program, established here as a MILMED COE Policy, is available in electronic version on the MILMED COE SharePoint. It is available to all MILMED COE personnel, and is a part of the MILMED COE's QM program. The QA program serves to instil confidence in the delivery of mission-related activities and the Program of Work by providing direction and review of the QA process, products and deliverables. The QA program applies to staff members (including external lecturers/guest speakers) of the COE involved in the design, and/or delivery of conferences, workshops, education and training, as well as exercises and evaluation. The program is applicable to all COE events, resident courses, mobile training teams (MTT), and advanced distributed learning (ADL) activities.

The QA program follows the following principles:

- **Systems Approach**-E&T programs are based on established requirements in the Medical Support discipline in order to ensure that coordinated solutions are relevant and delivered in the most effective and efficient manner. Policies, processes and resources are interconnected components and, therefore, leverage feedback from ongoing activities.
- **Compliance**-All E&T solutions will be developed and delivered according to requirements and based on current and relevant NATO doctrine and Best Practices (i.e. STANAGs, Lessons Identified/Learned)
- **Accountability** to stakeholders (i.e. NATO nations and partners, Steering Nations, students, etc.). Personnel responsible for implementation of the COE QA program are identified and are obliged to explain and report on their programs.
- **Measurability**-all courses and programs will be evaluated against established and measurable learning and/or training objectives.
- **Transparency** - learning and training processes and procedures are established using a collaborative/team approach. Relevant policies, documents, Lessons Identified/Learned (including best practices) will be available on Medical Lessons Learned Portal. Additional portals are being developed as part of Share Point 2013 and will include a Training Portal, Information Knowledge Management (IKM) and support other Communities of Interest.

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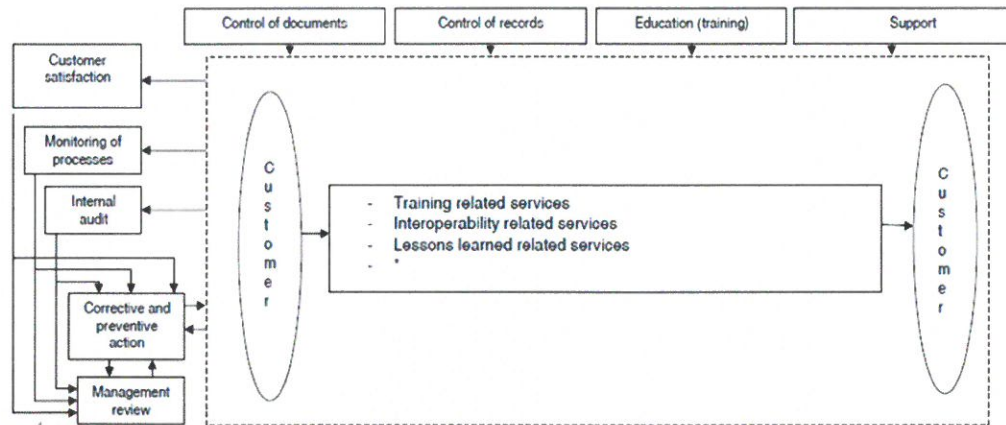


Figure 1 Quality Management System

4.2 Quality Process

Quality processes, as used by this institution, pertain to two different concepts: Quality Control (QC) and Quality Assurance (QA):

- QC aims to identify deficiencies in the final product. Quality control, therefore, is a reactive process. The goal of QC is to identify weaknesses after a product is developed and before it is released.
- QA aims to prevent deficiencies with a focus on the process used to develop the product. It is a proactive quality process. The goal of QA is to improve development and test processes so that deficiencies do not arise when the product is being developed.

Quality principles refer to MILMED COE processes, personnel and to the training material.

MILMED COE processes have been organized in the basic documents which are in this QA Policy and the related MILMED COE Standard Operational Procedures. They are revised periodically in an internal evaluation process, annually scheduled by the Directorate.

MILMED COE personnel, instructors, staff, admin, military and civilians are selected on the base of Peacetime Establishment (PE) job descriptions and are formally evaluated by their direct superior according to national and NATO standards.

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The following matrix identifies the Education and Training (E&T) processes carried out by the MILMED COE that must adhere to Quality Assurance and Control. It also identifies tasks and responsibilities by different actors.

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PROCESS	DIR	DH	QM	Branch Chief	Course Director/ Event Action Officer	Staff Support
QA Policy and Strategy Management Review	Approve	Co-Lead	Lead	Support		Support
Measure and assessment	Establish Process		Evaluation of the quality of the training/event. Measure of performance of Instructors/Speakers and students	Lead	Assist	Support
Analysis	Review	Assist	Lead Identify performance deficiencies for every series of courses	Identify performance deficiencies for every internal course iteration	After Action Report for DIR review	Support
Curriculum Design	Approve ¹	Identify training solutions and design training (Lead:external courses)	Supervise SAT model	Identify training solutions and design training (Lead internal courses)	Assist TRB with TNA and curriculum design	
Curriculum Development	Approve	Lead (External course) draft and monitor update	Supervise SAT model and standards for course documentation	Lead (internal courses)	Assist TRB Course control documents	Assist with formats and templates
Curriculum Implementation	Verify	Lead for external courses	Supervise	Lead for internal courses	Conduct	Assist

¹ According to Bi-SC 75-7 E&IT Directive, DH leads and approves the TNA. Curriculum Analysis, design, implementation and evaluation are phases of the TNA. Within the COE, DIR approves and TRB Chief leads the process

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PROCESS	DIR	DH	QM	Branch Chief	Course Director/ Event Action Officer	Staff Support
Internal QA on instructional processes	Establish the process	Assist	Conduct	Assist	Assist	
Accreditation and curriculum evaluation	Verify and endorse	Apply for external courses; assist with internal courses	Assist	Apply for internal courses	Assist	Support
Student Evaluation process	Establish the process	Verify	Assist and supervise	Verify	Lead	Assist with data collection

5. Quality Assurance Review Cycle.

The QA management review (QAMR) is the self-assessment process to update this QA policy, identify new and on-going shortfalls and to identify best practices. The QAMR will be carried out annually, in January, or as scheduled by the director. The QM—with the support of the DH and Involved Branch(es)—is responsible for the planning, execution and evaluation of the review. It involves a formal analysis of the management system—how this policy is implemented—with the aim of identifying the need for changes, strengths and weaknesses. The results of the QAMR shall include decisions on measures concerning improvements to current products and services, as well as the need for resources. These results may also affect this QA policy and any annexes that would have to be changed, accordingly.

As general guidelines, the following topics should be covered in the QAMR:

- Results of SWOT analysis
- Results from audits and inspections and previous management reviews.
- Results of previous corrective or preventive measures.
- Results of courses review and series of courses review.
- Influences and changes of circumstances that may affect the QA management system (e.g. human resources, HOTO of QA responsibilities, personnel rotation program based on national regulations, etc.)

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- Resource requirements,
- Internal and external communication.

The QAMR will be scheduled and included in the annual QA plan and will be attended by the:

- MILMED COE Director and DDir/Chief of Staff,
- DH
- Branch Chiefs,
- Financial Controller,
- QM,
- Others, as invited by the Director

5.1 Additional Remarks

Primarily, internal reviews of the courses, conference and workshops are for the MILMED COE and will be carried out by the Involved Branch. External reviews will be conducted by SMEs from the Medical Support Community of Interest and will be organized by the Department Head in conjunction with the Requirements Authority (RA) to ensure that operational requirements are continuously covered, transparent, and aligned with NATO's Strategic Guidance (Ref D, Bi-SC 75-7, 10 SEP 2015)

The RA, MILMED COE Steering Committee (SC), and Medical Support Community of Interest will be routinely informed of all course enhancements and adjustments. This will be coordinated through routine coordination with the RA, SC meetings, Military Medical Training Working Group (MMT WG), the Annual Discipline Conference, and reported in the Discipline Alignment Plan.

5.2 Collective Training and Exercises

Within means and capabilities, the MILMED COE in its DH function will support collective, NATO-led training with SMEs and/or other Med Sup- E&T specific advice at exercises and pre-deployment training events. This support will be based on the regular prioritization of the planned NATO exercises organized by ACT and ACO.

Where the need exists and when the DH has the capacity, the DH supports the NATO Officers Conducting the Exercise (OCEs) in the planning and conduct of collective training and exercises.

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The MILMED COE will continue to support the Vigorous Warrior (VW) Exercise series. This exercise series is the only multinational NATO exercise that focuses purely on medical issues, VW Exercise is a one-of-a-kind event that currently closes a considerable gap in NATO's medical exercise structure and offers a unique opportunity for the medical subject matter experts to exercise a modular multinational military medical support system.

6. Quality Assurance Supporting Elements and Resources.

6.1 Definition and Delivery of Instruction: Course Creation and Approval (TRB SOP)

6.1.1. The MILMED COE courses are created in response to NATO requirements based on a Training Requirements Analysis (TRA) report (see Reference F) or an opportunity where a defined target audience is required to acquire, or enhance, their knowledge, skills, or attitudes for the performance of tasks, especially during missions abroad.

6.1.2 Courses will be specified by learning objectives derived from a Training Needs Analysis (TNA) conducted in accordance with Reference C. When there is no TNA specifying the need for a course, the requirement for the creation of the course must be coordinated with the DH and specified in the Course Control Documents (CCD) per Reference D.

6.1.3 CCD's consist of three distinct documents: Course Control Form, Course Proposal, Programme of Classes. CCDs will be produced with sufficient and necessary information in order to achieve the following outcomes:

- To provide a description of the course in sufficient detail and serve as a written agreement between the owner of the requirement (RA or DH) and the COE;
- To provide guidance to instructional staff in the design and development of lessons and associated learning activities;
- To provide students with an outline of the course objectives, teaching points, instructional and assessment methods to be used in the conduct of the course.

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6.1.4 Upon completion of the CCDs by the CD and further approval of the TRB Chief for internal courses, the DH will ensure final QA on the CCDs. External dissemination to the RA and community of interest will follow, in order to certify that the course, as delineated in the CCDs, meets the customer requirements. Once these steps are completed, the MILMED COE Director will approve the course and present it for approval of the COE SC. Following approval of the SC, the course will be added to the COE annual Programme of Work (POW) and the TRB Chief will include the course in the COE course catalogue and amend the NATO ETOC and PCM in ePrime, accordingly.

6.2 Conduct of Courses- the conduct of courses is the primary responsibility of the Training Branch in close collaboration with the RA and DH.

6.2.1 CDs must ensure the courses are executed IAW TNA and approved CCDs.

6.2.2 The course schedule shall reflect the LOs, teaching points, main references, methods and timings described in the CCDs.

6.2.3 The conduct of the course shall, unless dictated by exceptional circumstances, be executed IAW the course schedule.

6.2.4 The CD will ensure that qualified and experienced instructors are provided, well in advance, with the Programme of Classes, schedule and available lessons and materials necessary to prepare for their instructional assignment.

6.2.5 CDs are responsible for the orderly, effective and efficient conduct of their assigned course and are expected to monitor the performance of internal and external instructors for both the content and instructional technique. Feedback shall be provided on individual lessons, as required, or on the overall performance at the end of contribution for that iteration. Exceptional performance shall be reported up the chain of command to the TRB Chief for appropriate action.

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6.3 Formal Monitoring and Evaluation of the MILMED COE Instructors- the COE personnel performing instructional duties will be formally monitored to ensure continuous improvement of planning, preparation and conduct of lessons IAW best practices and the Lessons Learned (LL) process.

6.3.1 Monitoring of instructors will be performed by the TRB Chief or CD, with support from QM..

6.3.2 Instructional monitoring sessions will be programmed ahead of time and executed using a standard monitoring form.

6.3.3. Instructors will be debriefed accordingly and a record of the sessions will be stored within the TRB.

6.3.4 All TRB personnel are subject to the periodic evaluation by their supervisors IAW with national and NATO standards, at least once a year. The MILMED COE J1 is responsible for coordinating and managing the evaluation of records.

6.4 Student Assessment – Student assessment is an essential component of the QA program, as it provides vital information on both the achievement of learning objectives by students and critical feedback on the course design and conduct. Student assessments may be executed in a variety of forms, both formally and informally. This section of the QA SOP is intended to institutionalize and reinforce existing practices.

6.4.1 On-going observation of the student progress, through purposeful and formative evaluation activities, such as question and answer periods at the end of a lesson, quizzes, or syndicate work shall all be included in courses hosted by the COE.

6.4.2 Based on observations collected during formative evaluation events, students will be provided with group or individual feedback. Additionally, students experiencing greater difficulty will be provided with dedicated feedback and remedial assistance.

6.4.3 Students will be presented with a course graduation certificate, acknowledging successful completion of the course. Under exceptional circumstances, when it has been determined (through observation and documentation) that a student has failed to achieve the majority of the

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learning objectives, a student will be presented with a certificate of attendance. The documentation of such cases shall be retained in course files.

6.5 Post Course Review (PCR)– the PCR process is the primary means to systematically collect feedback during COE hosted courses. It focuses on gathering information pertaining to the conduct of the courses, including but not limited to the course objectives, methodology, instructional quality, time allocation and administrative and logistic support. The analysed data is the main input to continuous improvement of courses at the COE.

6.5.1 The CD will administer the student comment form designed to collect feedback on instructional and support issues for each iteration of every COE course. Comment forms will be collected and analysed in conjunction with feedback from speakers and the RA and DH.

6.5.2 The CD will produce a PCR report that summarizes the Course Aim and description of participants and list of instructional staff. Salient feedback, both quantitative and qualitative will be generated. A short description of activities that require improvement, as well as those that should be sustained, will be presented. Recommendations and action plans will be specified for implementation into the next iterations,...

6.6 Annual Course Audit – Every MILMED COE course will be subject to an annual audit. The audit will be performed by the TRB Chief and/or the CD as part of a systematic, programmed approach aimed at ensuring courses are managed in accordance with the MILMED COE QA policy. The audit will consist of:

6.6.1 A TNA review;

6.6.2 A review of the CCDs;

6.6.3 A review of the course schedule to verify alignment with CCD;

6.6.4 A review of previous year PCRs to verify implementation of recommendations;

6.6.5 Monitoring of sufficient number of lectures and/or syndicate work to evaluate the conduct of the course;

6.6.6 A record of the above actions

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6.6.7 A debriefing to CDs based on the findings of the audit.

6.7 Curriculum Review Board (CRB) – a CRB seeks to optimize the integrated use of academic resources based on course demand, as well as ensuring the emerging concepts and doctrines are incorporated into the MILMED COE curriculum, when desirable and feasible.

6.7.1 A CRB will be conducted once a year prior to the Annual Discipline Conference in order to review the training requirements. Members of the CRB will be appointed by the MILMED COE Director.

6.7.2 TRB Chief will brief the CRB on course relevance based on Medical Support STP (Reference E) and the TRA (Reference F), discuss how the course supports current and/or emerging doctrine, policies and directives. External engagement of the the course will be evidenced by the presence of the RA and/or DH.

6.7.3 Course interest, based on student bids and attendance, will be assessed during PCR, annual audit, and CRB. Additionally, the Training Branch Course Battle Rhythm identifies the time-frame for which student seats must be filled. Finally, the Training Branch will conduct an annual long-term survey to gauge benefit and future need of each course.

6.7.4 The sustainability of the course will be analysed based on past revenue versus expenditure.

6.7.5 At the conclusion of the CRB, the COE Director/COS may direct the TRB Chief to:

- Maintain status quo for the course
- Request additional information prior to decision
- Initiate actions for creation of a new course
- Implement quantitative changes to the number of students per iterations per year, or both
- Implement qualitative changes to course content, methodology, instructional composition, etc.
- Suspend the course
- Cancel the course

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6.8 System of Record- the MILMED COE Training Portal (under development), as part of the COE Sharepoint website, will be the system of record for the COE QA core processes including CCDs, PCR, and the CRB. As such, it will provide academic staff with a Knowledge Base (KB), enabling personnel to generate, organize, retrieve, store and dispose of associated data and information. The system will facilitate the auditing of the QA processes and products by QM, TRB Chief, CD as well as support decision-making by the MILMED COE Director.

7. Quality Assurance – System Evaluation and Key Indicators

7.1 The QA Policy, Strategy and associated core processes described herein shall be evaluated annually by the CRB, co-chaired by the QM/DH and facilitated by the Involved Branch Chief.. Core membership will consist of the QA representative, and anyone deemed appropriate by the Directorate to include at least one member of each branch at the MILMED COE. Performance measurement will focus on the performance indicators described below:

7.1.1 Number of students trained in COE courses or number of attendees at a conference

7.1.2. Number of MILMED COE courses, conferences, and workshops

7.1.3 Variance between expected audience quality and quality of enrolled students/attendees

7.1.4 Number of nations in attendance at MILMED COE events

7.1.5 Number of HQ's represented at MILMED COE events

7.1.6 Number of other institutions (COE's, Ptec's, industries, etc) represented at MILMED COE events

7.1.7 Number of ADL courses

7.1.8 Number of students trained with ADL courses

7.1.7 Number of students/authorized users utilizing the Training Portal

7.1.9 Number of Mobile Training Teams (MTTs)

7.1.10 Number of students served by the MTT

7.1.11 Participant satisfaction based on:

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Learning objectives

Difficulty of the level of material

Value of event in their current/future job

Appropriateness of the time allocated to the event

Would recommend this event to others

7.1.12 % of course with updated CCDs

7.1.13 % of PCRs produced/iterations conducted

7.1.14 % of CDs/instructors monitored for the year

7.1.15 % of courses audited for the year

7.1.16 % of CRB conducted for the year

7.1.17 Number of custodian doctrines meetig the timeline requirements

7.2 Findings and recommendations will be incorporated in the annual report produced by QM. Files will be mainted electronically for a minimum of 5 years.

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