Accreditation Expert Group Report on Higher Education Programme

One Step Medical Doctor Programme

Tbilisi State Medical University

20-22 April, 2021

Report Submission Date

Tbilisi

HEI's Information Profile[1]

Name of Institution Indicating its Organizational Legal Form	LEPL Tbilisi State Medical University
HEI's Identification Code	211328703
Type of Institution	The University

Higher Education Programme Information Profile

Name of the Programme	Educational Programme of Medical Doctor
Level of Education	One-Cycle Higher Education Programme
Qualification Granted[2]	Medical Doctor
Detailed field and Code	0912
Indication of relevant secondary education subject/subjects/group of subjects (In case of Integrated teacher Bachelor's and Master's programme and Teacher training programme)	
Language of Instruction	Georgian
Number of ECTS Credits	360
Programme Status (Authorized/ Accredited/Conditionally Accredited/New/Internationally accredited) indicating the relevant decision (Number, Date)	Accredited #121, 21.10.2011

Expert Panel Members

Chair (Name, Surname, University/organization/Country)	Dean Parmelee, M.D. Wright State University USA

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[1] In case of joint programme, please indicate the HEIs that carry out the programme. If the joint programme is carried out in collaboration with the foreign HEI, indicating ID Number and Organizational-legal form is not obligatory

[2] If the programme is carried out in collaboration with the foreign HEI and the formulation of the qualification granted after the completion of the programme is different, the qualification is indicated according to the respective university

Member (Name, Surname, University/organization/Country)	Irine Pkhakadze Akaki Tsereteli State University Georgia
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Accreditation Report Executive Summary

- **General information on the education programme**

In 1930, the Georgian State Medical Institute was opened, which in 1992 received the status of an autonomous university and was established as the Tbilisi State Medical University. As of February 2021, it has 3137 enrolled students, 547 staff across all supporting and teaching levels, with 282 academic staff. Over the past five years, its faculty have published 1691 articles in local journals and 1648 in international journals. Following the last accreditation, the program undertook a revision of curriculum focused on a new set of learning outcomes with the structure and delivery to be changed to ensure student achievement of learning outcomes. The program articulates four stages for its curriculum with each providing a foundation for the next. A hallmark of the revision has been to integrate content, blending basic biomedical science with clinical application and outcomes lead to achievement of competencies for the practice of medicine.

- **Brief overview of the accreditation site-visit**

The Self-Evaluation Report and associated documents were sent to the expert panel on 30 March 2021. The panel met for a planning session (virtually) on 16 April 2021, and the visit took place on 20, 21, 22 of April 2021. Four of the panel members were present in the Republic, one (Chair) attended virtually. The two medical schools at TSMU were reviewed and site visited by the same team over the three-day period, with university leadership overseeing the two schools, faculty that are 'shared' by the two schools, and other staff also 'shared' being part of the interviewing process.

Day 1: Administrative leadership of the University, overseeing the two medical schools were interviewed, followed by interviews with the respective Self-Evaluation Teams for each of the schools. Both Heads of Programs were also interviewed, separately on this first day. Expert panelists 'on the ground' in Tbilisi had the opportunity to visit facilities that serve the schools.

Day 2: Focused upon meetings with the Academic Staff of the USMD program and of the Georgian program, the Invited Staff for each, and with Employer representatives.

Day 3: Focused upon meetings with students and graduates of each program separately, leadership of the QA Department for the University, Stakeholders for both programs. A final and brief summation of findings was presented to University and Program leadership.

- **Summary of education programme's compliance with the standards**

The program is in compliance with all regulations and standards based on review of facilities, documents, interviews with broad representation of leadership, students, graduates, faculty and stakeholders.

- **Summary of Recommendations**

- **Summary of Suggestions**

- **Summary of best practices (If Applicable)**

- **In case of accredited programme, summary of significant accomplishments and/or progress (If Applicable)**

Compliance of the Programme with Accreditation Standards

1. **Educational programme objectives, learning outcomes and their compliance with the programme**

   A programme has clearly established objectives and learning outcomes, which are logically connected to each other. Programme objectives are consistent with the mission, objectives and strategic plan of the institution. Programme learning outcomes are assessed on a regular basis in order to improve the programme

1.1 Programme Objectives
Programme objectives define the set of knowledge, skills and competences the programme aims to develop in graduate students. They also illustrate the contribution to the development of the field and the society
Descriptive summary and analysis of compliance with standard requirements The program, origins of which can be traced as far as in 1930, has undergone many changes. In the past few years, it has devoted much attention and resources to redesigning its curriculum to better address the needs of the Republic, employers, and current medical education trends. A driving force for change began with the identification of ten objectives which are consistent and complementary to the institution's mission, objectives, and strategic plan. They are representative of meaningful objectives for the education of a physician. Furthermore, the program has articulated a detailed list of thirteen learning outcomes/competencies that link to the objectives, also highly relevant to the education of a physician. The program curriculum specifies its teaching and learning strategies consistent with student-centered education, and its assessment methods are designed to ensure that its learners can meet all learning outcomes. The development of its learning outcomes and competencies has been informed by careful attention to the needs of the labor market in the Republic, identified by employer stakeholders.
Evidences/indicators Self-Evaluation report. Program description document. University Strategic Plan, Objectives, Mission from website. Interviews with leadership, faculty students, staff, graduates, stakeholders such as employers, and the Self-Evaluation Team.
Recommendations: o   Proposal(s), which should be considered by the institution to comply with requirements of the standards
Suggestions for programme development: o   Non-binding suggestions for programme development

Best Practices (if applicable):
o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress
o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation
o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard ☒ Complies with requirements ☐ Substantially complies with requirements ☐ Partially complies with requirements ☐ Does not comply with requirements

1.2 Programme Learning Outcomes
➢ Programme learning outcomes describe knowledge, skills, and/or the sense of responsibility and autonomy, students gain upon completion of the programme; ➢ Programme learning outcomes assessment cycle consists of defining, collecting and analysing data; ➢ Programme learning outcomes assessment results are utilized for the improvement of the programme.
Descriptive summary and analysis of compliance with standard requirements
The program Learning Outcomes, identified with a set of thirteen competencies, explicitly characterize the knowledge, skills, and levels of autonomous decision-making that the graduates must have by conclusion of the program. The Learning Outcomes are consistent with the appropriate level of education according to the National Qualifications Framework (NQF). "Professionalism" is one of them and its stated values are consistent with international norms for physician education, along with practical skills which are desired by the employer stakeholders. The curriculum revision, commenced following the last accreditation, included and still involves a broad spectrum of stakeholders, both internal and external to the institution. The methods or strategies for program learners to achieve the objectives are embedded in the curriculum. Assessments occur frequently throughout, at both formative and summative points, and students receive feedback on progress. The data/information on academic performance and overall progress in the curriculum are monitored by the instructional faculty as well as the responsible leadership, quality assurance teams, and committees. There

is a process for this monitoring to guide changes in the curriculum for improvement.

Evidences/indicators

Self-Evaluation report, focus on outcomes of graduates and attrition rates; assessment processes; QA feedback loops to address deficiencies and redundancies.
Program description document, focus on outcomes, attrition, assessment paradigms and practices.
University Strategic Plan, Objectives, Mission from website.

Interviews with leadership, faculty students, staff, graduates, employer stakeholders.

Recommendations:

- o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

- o Non-binding suggestions for programme development

Best Practices (if applicable):

Newly implemented pilot for EPAs in the senior year as preparation for post-graduate learning in the clinical settings.
Use of OSCEs, OSPEs, Workplace-Based Assessment, Mini-CEX.

In case of accredited programme, significant accomplishments and/or progress

- o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

  o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

  ☒ Complies with requirements

  ☐ Substantially complies with requirements

  ☐ Partially complies with requirements

  ☐ Does not comply with requirements

Programme's Compliance with Standard

Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
Educational programme objectives, learning outcomes and their compliance with the programme	✓			

2. Teaching methodology and organization, adequate evaluation of programme mastering

Programme admission preconditions, programme structure, content, teaching and learning methods, and student assessment ensure the achievement of programme objectives and intended learning outcomes.

2.1 Programme Admission Preconditions
Higher education institution has relevant, transparent, fair, public and accessible programme admission preconditions
Descriptive summary and analysis of compliance with standard requirements Review of submitted documents and publically accessible sites confirms that the program adheres to the regulations set by the government and the TSMU administration. It is transparent. Taking the Unified National Examination is the key for Georgia citizens and the program has increased its acceptable minimum scores for the various subjects over the past several years as competition for spots has increased. For non-citizens, the program follows the regulations as noted above. In addition, the program has evaluated the academic performance of matriculants relative to their admissions profile data and this has helped set thresholds for scores to assure that admitted students are prepared to succeed in the program. The prerequisites for receiving the educational program are relevant and transparent and available to all interested sides, the characteristics of the educational program are available on the University website: www.tsmu.edu.ge. The University provides access to the information for students from the social network page of the University, through regular participation of TSMU in local and international exhibitions of educational programmes, organizing open door days and other orientation meetings.

The significantly increased threshold improves the level of knowledge of enrolled students and provided with the selection of a student with relevant knowledge and skills in the programme. For example, in 2012, the entrance exam scores were at 35%+1 but with a steady increase through the years the scores are at 65%+1 in 2016-2017 and for the 2017-2018 year they rose to 70% for the science subjects of chemistry, physics, biology, and mathematics. Since 2012-2013 academic year, the number of students enrolled with 100% grant has been increasing from 18.44% and in recent years this number has steadily exceeded 40%.

Evidences/indicators

- Self-Evaluation report.
- Program description document.
- Information from institution/program website.
- Interviews with leadership, faculty staff.
- Law of Georgia on Higher Education; rules and regulations of TSMU for student mobility, analysis of credits for internal mobility.

Recommendations:

o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

o Non-binding suggestions for programme development

Best Practices (if applicable):

o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

☒ Complies with requirements

☐ Substantially complies with requirements

☐ Partially complies with requirements

☐ Does not comply with requirements

2.2 Educational Programme Structure and Content

Programme is designed according to HEI's methodology for planning, designing and developing of educational programmes. Programme content takes programme admission preconditions and programme learning outcomes into account. Programme structure is consistent and logical. Programme content and structure ensure the achievement of programme learning outcomes. Qualification to be granted is consistent with programme content and learning outcomes

Descriptive summary and analysis of compliance with standard requirements

The program's design for a medical doctor education has evolved with the changing times and needs of the Republic. It has used its quality assurance processes and committee structure to identify needed changes, based on evidence of student performance as well as feedback data from all stakeholders. The duration of the program is six years, or twelve semesters, for 360 ECTS (327 mandatory, 33 electives). The sequence of the semesters, years, and modules within is rational and progressive – meaning the students learn necessary content and ways of thinking in a stepwise fashion, building their knowledge and competencies.

The six years (12 semesters) are sequenced as: 1 – four semesters of the foundations of natural science, the humanities, and biomedical sciences; 2 – two semesters of a preclinical phase of integrated content; 3 – four semesters of clinical clerkship postings; 4 – two semesters of more advanced clinical learning and electives in a range of specialties or research endeavors. The Self-Evaluation report details, with examples, how changes are made within the curriculum and its pedagogy – following both the university's guidelines and the programs leadership and committee empowerments. The university's Quality Assurance service provides the program with continuous information on student outcomes, the leadership is attuned to critical details and challenges, and there is a high priority to respond to student, graduate, and employer commentary in its quest for all students to achieve the learning outcomes of the program.

The educational program Medical Doctor is integrated with attention to horizontal and vertical dimensions, organized by modular teaching, and courses are sequenced appropriately. Programme structure is consistent and logical, the content of the Program links back to admission requirements with the reasonable expectation of success for matriculants. Structure and content of the program are congruent with the learning outcomes and competencies detailed.

According to the requirements of the Sectoral Benchmarks: 10 credits (ECTS) are devoted to the development of scientific skills (Academic writing, Fundamentals of Scientific Research, Evidence-Based Medicine, Epidemiology), Program considers obligatory 10 credits (ECTS) for clinical skills in a clinical skills laboratory.

The educational programme is accompanied by a curriculum and syllabi for the relevant teaching courses/modules. The learning outcomes of the educational programme are described by sectoral and general competencies and correspond to the qualifications framework of the higher education and the Sector-Benchmarks.

Evidences/indicators

- Program description document.
- Self-Evaluation report.
- Syllabi, curriculum map.
- Interviews with Head of Program, leadership of university, faculty, staff, students, graduates, employers.

Recommendations:

o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

Add a listing of elective courses that are offered according to the semester in the program structure; this will provide students with additional information.

Best Practices (if applicable):

o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

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☐ Partially complies with requirements

☐ Does not comply with requirements

2.3. Course

➤ Student learning outcomes of each compulsory course/subject/module/concentration are in line with programme learning outcomes; Moreover, each course content and number of credits correspond to course learning outcomes;

➤ Teaching materials listed in syllabi are based on the core achievements in the field and ensure the achievement of intended programme learning outcomes.

Descriptive summary and analysis of compliance with standard requirements

Each course/clerkship was reviewed by members of the Accreditation Expert Panel. Each course syllabi includes course content, ECTS credit count, student workload, prerequisites, teaching methods, objectives and learning outcomes, assessment criteria, content consistent with learning outcomes, resources. The learning outcomes are largely measurable and consistent and reflective of the program learning outcomes. Readings and other teaching materials or resources required or recommended are often numerous, but largely represent notable sources.

The mandatory and additional teaching materials are listed in syllabi, study material is updated according to the current issues and ensures the achievement of learning outcomes. It is noted that within some of the modules, the course syllabi are presented separately, which makes it difficult for integration for content as well as assessment.

In some cases the modules are indicated in the program, however the syllabi of the courses included in these modules are presented separately and not in the integration, Consequently the teaching and assessment of these courses are also not integrated, thus therefore it is suggested to ensure this compliance.

Evidences/indicators

- Course/clerkship syllabi.
- Program description document.
- Curriculum map.
- Interviews with faculty, students, graduates.

Recommendations:

o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

o The syllabi formatting for courses and clerkships will be enhanced if the learning outcomes were reduced in number and coded to the program objectives. This will facilitate curriculum mapping which also allows assessments to be linked/coded to learning outcomes – this permits easier identification of gaps or over emphasis in the assessments of content mastery.

o The syllabi would benefit from a trimming of learning materials & resources, highlighting the ones that the faculty determine are most accurate and relevant for the particular course or clerkship; also, the content from these sources should be the information from which the assessments are derived.

o All modules should reflect the integration of content and assessment, and in some cases within the documentation there are courses outside of the modules that are relevant.

Placing all relevant syllabi within the related module is suggested.

Best Practices (if applicable):
o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress
o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation
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☒ Complies with requirements
☐ Substantially complies with requirements
☐ Partially complies with requirements
☐ Does not comply with requirements

2.4 The Development of practical, scientific/research/creative/performance and transferable skills
Programme ensures the development of students' practical, scientific/research/creative/performance and transferable skills and/or their involvement in research projects, in accordance with the programme learning outcomes
Descriptive summary and analysis of compliance with standard requirements   The program has a robust set of learning activities for practical skills --- all the way from how to build a history from the beginning with the patient to performing the more common procedures expected by graduation. This all falls under "Clinical Skills," and the program uses the University's Clinical Skills and Multidisciplinary Simulations Center extensively for the teaching as well as assessments (OSCEs & OSPEs). This practical skills focus begins, as it should, during the pre-clinical stages, and includes supervision and evaluation by qualified faculty. The teaching of anatomy has a blend of radiology along with book and animal cadaver learning (Anatomic table) and is even integrated into the Surgery module in the final year.   Fundamentals of research skills are started in the first year with Academic Writing, credit time for learning a foreign language including English. Bioethics and scientific research are introduced in the second year. During the third year (SVII, SVIII) public health,

epidemiology, and biostatistics are incorporated. In addition, the program supports a number of auxiliary learning opportunities such as journal clubs and symposia. The organization of the clerkships is such that a student builds on skills learned at the bedside in one year (Surgery I) and further develops in Surgery II & III, for example.

The University and program promote and supports student involvement in scientific research projects and contributing to current societal/population needs. For instance, a great many students have participated in assisting with management of the pandemic, assisting the public health endeavor. In the past, they have also participated in community action work related to Hepatitis C, measles vaccinations, and other charitable events and projects to serve the community. In interviews with students and graduates, they report program/university support for their research, presentation of research at regional and international venues.

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Evidences/indicators

Program description document.
Course and clerkship syllabi.
Self-Evaluation report.
Interviews of faculty, students, graduates.
Tours of Clinical Skills and Simulation facilities, hospitals, clinics.

Recommendations:

o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

o Non-binding suggestions for programme development

Best Practices (if applicable):

o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

☒ Complies with requirements

☐ Substantially complies with requirements

☐ Partially complies with requirements

☐ Does not comply with requirements

2.5 Teaching and learning methods

Program is implemented using student centered teaching and learning (SCL) methods. Teaching and learning methods correspond to the level of education, course content, student learning outcomes and ensure their achievement

Descriptive summary and analysis of compliance with standard requirements

The transition over the past few years to a more integrated & modular curriculum rather than discipline-based one is laudable and is on-going. The program's introduction and embrace of student-centered approaches are certainly consistent with this standard and decidedly the best-practice for the education of a physician. The course content, in particular at the clinical training sites, corresponds well to the teaching and learning methods described, such as bedside instruction, use of mannequins in the Simulation Center, standardized patients in the Clinical Skills Center. Graduates from before the beginning of the curricular changes note their envy for how the current students are learning. Current students comment positively on the integration of subject areas, combined with different classroom teaching strategies of, e.g. anatomy + radiology + surgery.

Consistent with requirements of the Sectoral Benchmark for modern strategies of teaching and learning in medical education, the program is using 'flipped classroom' approaches instead of lectures, PBL, CBL, small group discussions, role playing, standarized patients, bedside teaching and assessment (Mini-CEX), and recently they have piloted using Entrusted Professional Activities (EPAs). Furthermore, they offer individual study planning for students with special educational or situational needs, consistent with the Rule of Elaboration of a Student Individual Curriculum. The documents do not specify how their PBL or CBL are conducted or what exactly they mean by 'flipped classroom.' There is a wide spectrum of practices for PBL and CBL as well as the 'flipped classroom,' and the program could provide students and faculty with clarity on how their non-lecture strategies are designed and delivered.

Although the program description information indicates the many sites for clinical training, this information is largely missing from the syllabi, along with information (for students and faculty) on what the time commitments are at the sites during a particular clerkship.

Evidences/indicators

Program description document.
Self-Evaluation report.
Interviews with student, graduate, faculty.
Syllabi materials.

Recommendations:

Suggestions for programme development:

Provide specificity on what is meant by 'flipped classroom,' how the program conducts its PBL and CBL or other non-lecture strategies for the classroom.

- Each syllabus would be strengthened if it specified the number of hours that students spend in a particular teaching-learning session, i.e., number of hours of lecture, PBL, CBL, clinical skills training. Doing so will enable the faculty and leadership to benchmark goals for increasing the student-centered learning strategies over time.

Add to clerkship syllabi specific information on the sites where the students are to engage in their learning, whether it is an ambulatory or inpatient setting, and the approximate amount of time (40-50 hours/week? On-call/overnight expectations?).

- In the syllabi for clerkships, specify conditions (i.e., case of bacterial pneumonia, acute bowel obstruction) that are expected to be seen and evaluated during a particular rotation; reference a case-log system through which clerkship director/preceptor can validate and provide the student an alternate learning experience for those conditions not seen/evaluated. Cases or conditions should be representative of the most common in the Country and those that can pose a critical care situation.

- In the program description document, define and give specific examples of "Interactive lectures." The 'flipped classroom' phrase is associated with one or another specific teaching/learning strategy, i.e., Team-Based Learning, Peer Instruction, Think-Pair-Share. "Lectures" that are interspersed with questions and answers are still 'lectures,' a largely passive strategy with negligible learning outcomes, and do not represent 'flipped classroom.'
- The Self-Evaluation report notes that there is higher attrition during the preclinical years, but it assumes that this represents some students who may have realized that they were not suited for the profession. It may also be that the teaching methods for this period are not as fully student-centered as they could be; other programs have found that by transforming the preclinical phase into more active/engaged learning there is reduced attrition. We suggest exploration of ways to increase the active learning and reduce lecture time.

Best Practices (if applicable):

In case of accredited programme, significant accomplishments and/or progress

Evaluation

☒ Complies with requirements

☐ Substantially complies with requirements

☐ Partially complies with requirements

☐ Does not comply with requirements

2.6. Student Evaluation

Student evaluation is conducted in accordance with established procedures. It is transparent and complies with existing legislation

Descriptive summary and analysis of compliance with standard requirements

The program scrupulously attends to the governmental regulations for evaluation of achievement. There is congruence for the elements of credit assignment and hours for completion of learning components, linked to learning outcomes. In general, each course/clerkship has a midterm exam and final summative examination, with criteria for taking the final exam based on points earned during the timeframe of the instruction. There are standards for the assignment of grades, e.g., A, B, C, D, E and two types of non-passing marks, e.g., FX and F. There is a transparent process for retaking an exam. The program has implemented a pilot process for evaluating students using the Entrusted Professional Activities (EPAs) for the more senior students. All clinical students are evaluated in the clinical settings with Mini-CEX, and direct observation of practical skills. There is now an examination center where exams are administered by computer with grading and feedback occurring quickly for the student. The program has evaluated its examination question quality and performance measures to adjust question difficulty and weed out exam questions that may have been passed from year to year.

Student assessment is based on the following principles: feasibility, reliability, validity and transparency. The programme evaluation system is multi-component and provides evaluation of the objectives and learning outcomes of each course. The rubrics for each component and scores are graded in the syllabus, The syllabus is available to a student, criteria of student assessment are relevant. The program utilizes the Objectively Structured Practical Exam (OSPE) and the Objective Structured Clinical Exam (OSCE). To improve academic performance, the student has the opportunity, to consult professors for additional guidance.

In the syllabi of the integrated modules the assessment of a student is defined with a 100 grade point system, exam tests are integrated, but ongoing student academic activity is evaluated at a high frequency, often 24, 28 or 34 times during the course; based on verbal inquiry and situational tasks, the student can earn 0.25 points, 0,5 points, 0,75 points and maximum of 1 point, that cannot be flexible.

Evidences/indicators

○ Component evidences/indicators including relevant documents and interview results	

Recommendations:

    ○ Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

- Rather than have faculty create new questions every year for exams, we suggest making exam questions secure. Summative exams are not meant to give feedback or be educative but rather they are auditive and for assessment.
- We suggest reducing the frequency of individual assessment in the clinical subjects.

Best Practices (if applicable):

    ○ Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

    ○ Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

    ○ Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

      ☒ Complies with requirements

      ☐ Substantially complies with requirements

      ☐ Partially complies with requirements

      ☐ Does not comply with requirements

Programme's Compliance with Standard

Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
Teaching methodology and organization, adequate evaluation of programme mastering	✓			

3. Student achievements and individual work with them

HEI creates student-centered environment by providing students with relevant services; programme staff ensures students' familiarity with the named services, organizes various events and fosters students' involvement in local and/or international projects

3.1 Student support services
Students receive appropriate consultations and support regarding the planning of learning process, improvement of academic achievement, employment and professional development
Descriptive summary and analysis of compliance with standard requirements   The program has attended to several structures that provide curriculum planning and academic advising services for students with extenuating or special needs circumstances. In addition, academic faculty have a 2 hour per week obligation, if needed, to provide consultation to students. The Head of Program is available to assist any student who requests assistance with study/curricular planning. The Accreditation Committee asked students about the availability of mental health services and these too are available, quickly if needed.   There is the *Student and Alumni Relations Service* under the vice-Rector that provides career counseling and makes connections with potential employers, many of whom are alumni. This Service has provided students with internship programs in the summers to learn research or clinic skills via links with alumni and employers. It also works with the International Affairs office to promote student exchange and international internships or similar summer opportunities outside the Republic. The program supports a great many student organizations that provide both social connections between students but also open-up opportunities to learn about different specialties or avenues of future employment; this sort of activity also supports the development of professionalism in the students since there are also many opportunities within these organizations for leadership.   Students from particularly vulnerable backgrounds (defined in Self-Evaluation report) are provided a set of services including financial assistance.
Evidences/indicators   Self-Evaluation report document.   Program description document.

Recommendations:

- o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

- o Non-binding suggestions for programme development

Best Practices (if applicable):

- o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

- o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

☒ Complies with requirements

☐ Substantially complies with requirements

☐ Partially complies with requirements

☐ Does not comply with requirements

3.2 Master's and Doctoral Student supervision
Master's and Doctoral students have qualified thesis supervisors
Descriptive summary and analysis of compliance with standard requirements o Describe, analyze and evaluate programme's compliance with the standard component requirements based on the information collected through programme Self-evaluation Report, relevant enclosed documents and Site Visit; the analysis has to reflect problematic issues (if applicable)
Evidences/indicators o Component evidences/indicators including relevant documents and interview results
Recommendations:

	o Proposal(s), which should be considered by the institution to comply with requirements of the standards
Suggestions for programme development:	
	o Non-binding suggestions for programme development
Best Practices (if applicable):	
	o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes
In case of accredited programme, significant accomplishments and/or progress	
	o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)
Evaluation	
	o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard ☐ Complies with requirements ☐ Substantially complies with requirements ☐ Partially complies with requirements ☐ Does not comply with requirements

Programme's Compliance with Standard

Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
Student achievements and individual work with them	✓			

4. Providing teaching resources

Programme human, material, information and financial resources ensure programme sustainability, its effective and efficient functioning, and achievement of intended objectives

4.1 Human Resources

- ➤ Programme staff consists of qualified people who have necessary competences in order to help students achieve programme learning outcomes;
- ➤ The number and workload of programme academic/scientific and invited staff ensures the sustainable running of the educational process and also, proper execution of their research/creative/performance activities and other assigned duties. Balance between academic and invited staff ensures programme sustainability;
- ➤ The Head of the Programme possesses necessary knowledge and experience required for programme elaboration. He/she is personally involved in programme implementation;
- ➤ Programme students are provided with an adequate number of administrative and support staff of appropriate competence

Descriptive summary and analysis of compliance with standard requirements

Program has 282 academic/scientific staff, 265 invited personnel, and 206 administrative and support staff; over 90% of the academic/scientific staff are involved in the education program. For the 2019/2020 academic year, 65 of the academic/scientific staff involved in the implementation of the program were Professors, 109 - Associate Professors, and 120 - Assistant Professors. The ratio of the number of academic/scientific staff to the number of students was 0.09; the ratio of academic and invited staff to the number of students - 0.2, or 5.6 students per 1 staff member. All positions are filled according to the fairness rules of the university for the selection and hiring of personnel. The academic productivity of the faculty over the past five years includes over 2000 articles published in both regional and international journals (Self-Evaluation Report, not verified).

Workload designation for academic/invited staff and the individual workload rate are regulated by the decisions of the TSMU Academic and Representative Councils. There are guidelines for the hours of contact (teaching) work that is set according to academic rank. The Self-Evaluation report states that there is a "Rule for Determining the Student Quotas" and "Methodology for Determining the Academic, Scientific and Invited Staff according to the Programmes," both of which have been used to assure that there are adequate numbers of faculty for the size of the student body. Survey data has been collected and analyzed reflecting the levels of satisfaction with the workload, research time allotment, space allocation for research, and this information is being addressed by the university for human resource improvement.

The Head of Program has a distinguished career as an educator, researcher, and leader. She has had experience with international medical education, curriculum development, and in the Committee interviews (group and individual) she was very familiar with all aspects of the program, clear on her vision of its future, and open to addressing any challenges.
  - o

Evidences/indicators

Self-Evaluation report.
Program description document.
Interviews with Head of Program, other leadership, students, faculty, staff, students, graduates, employers.
Review of personnel files of staff, credentials of academic and invited faculty

Recommendations:
o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:
o Non-binding suggestions for programme development

Best Practices (if applicable):
o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress
o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation
o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard
☒ Complies with requirements
☐ Substantially complies with requirements
☐ Partially complies with requirements
☐ Does not comply with requirements

4.2 Professional development of academic, scientific and invited staff
➢ HEI conducts the evaluation of programme academic, scientific and invited staff and analysis evaluation results on a regular basis;   ➢ HEI fosters professional development of the academic, scientific and invited staff. Moreover, it fosters their scientific and research work
Descriptive summary and analysis of compliance with standard requirements   The University Quality Assurance Service collects survey data from students and administrative staff on the academic and invited staff for their course and teaching quality/effectiveness. This data is reviewed by heads of respective departments and the Quality Assurance service as well as Faculty Dean and Faculty Council. There is reference in the Self-Evaluation report to a 'Rule of Evaluation of Academic and Invited Staff" that is to be implemented 2019-2020, but not further explanation. Scientific productivity is also

evaluated.

The Self-Evaluation Report document and interviews with academic and invited faculty confirm that the institution and program use their feedback regularly to plan professional development programming and supports their endeavors in research (grant funding, purchasing of equipment and supplies, animals) and presentations of scientific findings at conferences both regional and international. They also note that there have been opportunities for faculty exchange internationally, e.g., *Erasumus+*.

The Self-Evaluation report and faculty interviews indicate university support for research and promulgation of findings through support for travel and other expenses to present their works.

The Department of Medical Education opened the Academic Development Center in 2012 to further the instructional skills of faculty in the medical education domain, including use of the OSCE, assessment methodology.

Evidences/indicators

Self-Evaluation Report document.

Program description document.

Recommendations:

- o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

- o Non-binding suggestions for programme development

Best Practices (if applicable):

- o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

- o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

⊠ Complies with requirements

☐ Substantially complies with requirements

☐ Partially complies with requirements

☐ Does not comply with requirements

4.3 Material Resources

Programme is provided by necessary infrastructure and technical equipment required for achieving programme learning outcomes

Descriptive summary and analysis of compliance with standard requirements

The Accreditation Review team visited many of the facilities referenced in the Self-Evaluation Report: library, hospitals & clinics (the University owns three clinics and has memoranda of agreement with others in the region) laboratories for teaching and research - considered safe, classrooms, administrative offices, student spaces. The simulation center, clinical skills training, classrooms, and clinical care sites were toured and found to be adequate for the number of students and staff and with appropriate equipment as needed – of note, these facilities are shared with other Medical Doctor programmes run on the faculty.

IT support for communication and instruction appears more than adequate.

The library for TSMU provides extensive resources, and collections of printed material as well as electronic databases that are current. It has a focus on informational support for all teaching and research activities of the faculty and students. The Library Provision regulates the library activities. In the 2016-2020 academic years, GEL 241,000 worth of literature was purchased for the American MD Program, including the latest GEL 169,650 worth of textbooks were purchased in 2020.

o

Evidences/indicators

Library website.

Interviews with students, graduates, faculty on adequacy and safety of facilities, infrastructure support for instruction, research, administration.

Recommendations:

o   Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

o   Non-binding suggestions for programme development

Best Practices (if applicable):

o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress
o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation
o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard ☒ Complies with requirements ☐ Substantially complies with requirements ☐ Partially complies with requirements ☐ Does not comply with requirements

4.4 Programme/faculty/school budget and programme financial sustainability
The allocation of financial resources stipulated in programme/faculty/school budget is economically feasible and corresponds to programme needs.

Descriptive summary and analysis of compliance with standard requirements
The budget of the program is presented in the Self-Evaluation Report document and indicates the 2019 total of 7 449 800 GEL, where principal source is educational activities. The document further indicates that scholarships are paid through funds from the state budget, and that should there be a shortfall, there would be support from the HEI, though that seems likely based on the historical trajectory of revenues/expenses. The university budget is diversified and consists of both its revenues and funds allocated from the state budget. Own sources of income are as follows: 1. Income received from the tuition fees; 2. Income from the scientific research grants; 3. Own income allowed by the law. 4. Scientific activities. 5. Medical activities 6. Other economic activities

Evidences/indicators
Self-Evaluation Report document.

Interview with Head of Program.
Recommendations: o   Proposal(s), which should be considered by the institution to comply with requirements of the standards
Suggestions for programme development: o   Non-binding suggestions for programme development
Best Practices (if applicable):   o   Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes
In case of accredited programme, significant accomplishments and/or progress   o   Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation
 	
o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard
 	
   ☒ Complies with requirements
 	
   ☐ Substantially complies with requirements
 	
   ☐ Partially complies with requirements
 	
   ☐ Does not comply with requirements

Programme's Compliance with Standard

Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
Providing teaching resources	✓			

5. Teaching quality enhancement opportunities

In order to enhance teaching quality, programme utilizes internal and external quality assurance services and also periodically conducts programme monitoring and programme review. Relevant

data is collected, analysed and utilized for informed decision making and programme development on a regular basis.

5.1 Internal quality
Programme staff collaborates with internal quality assurance service(s) available at the higher education institution when planning the process of programme quality assurance, creating assessment instruments, and analysing assessment results. Programme staff utilizes quality assurance results for programme improvement.

Descriptive summary and analysis of compliance with standard requirements

The Quality Assurance Service (System), under the university, appears robust in its planning and provision of continuous evaluation and monitoring of most all aspects of the educational program. It reports to the Faculty Council, which is then empowered to address any changes needed for quality improvement. The Service works closely with program staff and academic and administrative staff as evidenced by the Expert Team's interviews with all parties on the relationship with the Service. The executed process following the PDCA cycle, is transparent to all stakeholders, which includes the leadership, academic faculty, invited staff, students, graduates, employers. Surveys of students for their course work, quality of material, facilities, instruction are conducted following courses/clerkships and this information is fed back to the relevant faculty, committees, leadership with identified areas of improvement needed. The Self-Evaluation report gives several examples of how the feedback from students has influenced the development of new initiatives to teach and assess as well as deeper integration of the curriculum, both horizontally and vertically; the process has identified and addressed weakness in the curriculum as well as support services and facilities and examples are given.

The internal quality assurance mechanisms at TSMU are focused on facilitating the evaluation and development of educational programmes, the academic process, the resources required for its implementation, and the academic staff.

Quality development is conducted with the PDCA cycle. The policy of quality development (approved by Academic Council) includes the rules of: program elaboration, approval, amendment and cancellation; there are evaluation rules for staff activities (including scientific-research) and their productivity. In addition, the improvement of the monitoring of academic achievement of students, alumni employment, attitude of employees, and labor market research instruments are incorporated in the plan.

During the interview the team (as lecturers as well as students) confirmed that the Quality Assurance Service is using internal and external evaluation mechanisms. Different mechanisms are used for evaluation internal quality assurance, such as: student and staff surveys, monitoring of study process and exam materials, exams, academic performance analysis, evaluation of academic and invited staff activities, scientific research activities, etc. For the survey QA staff use electronic portal -Survey Monkey.

According to the survey results they have change the studying methods, increased the degree of the integration with using several departments from the university, due to students' high interest clinical modules started from first semester of studying process.

QA staff were involved in creation of the self-evaluation, they participated in the identification of strong sides and weaknesses of the program. During the interview all interviewers confirmed that QA staff closely collaborates with different structural units and it is planned to eliminate the shortcomings identified in the self-evaluation process with the involvement of the head of the program and academic and invited staff.

Evidences/indicators

Self-Evaluation Report document.

Interviews with Head of Program, leaders of the Quality Assurance Service of the University, faculty at all levels, students at all levels, graduates.

Recommendations:

o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

o Non-binding suggestions for programme development

Best Practices (if applicable):

o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

☒ Complies with requirements

☐ Substantially complies with requirements

☐ Partially complies with requirements

☐ Does not comply with requirements

5.2 External quality

Programme utilizes the results of external quality assurance on a regular basis

Descriptive summary and analysis of compliance with standard requirements

Detailed description of the external quality evaluation in the Self-Evaluation document which indicates its external quality evaluation is based upon the "Provision of Accreditation of the Eduational Programmes of Educational Institutions" and the "Authorization Provision of the Educational Institutions". The program notes that the curriculum revision began following the last accreditation visit which likely included international 'expert(s)' and the Self-Evaluation team includes employers in the region who provide external feedback and evaluation to the process.

During the interview QA staff confirmed they periodically have had external evaluations a few times, conducted by the field experts both from Georgia and Abroad.Suggestions and recommendations are used for improvement programme and studding process.

Evidences/indicators

Self-Evaluation Report document.

Interviews with Program Head and Quality Assurance Department leads.

"The Rule for the development, approval, amendment and annulment of an educational program"approved by the resolution # 24/2 of 29 December 2017 by TSMU Academic Council.

"The Statute of Quality Assurance Service of Tbilisi State Medical University - Legal Entity of PublicLaw" approved by resolution No 23/3 of the TSMU Representative Council, March 9, 2010

Recommendations:

- o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:

- o Non-binding suggestions for programme development

Best Practices (if applicable):

- o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress

- o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation

   o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard

     ☒ Complies with requirements

     ☐ Substantially complies with requirements

     ☐ Partially complies with requirements

     ☐ Does not comply with requirements

5.3. Programme monitoring and periodic review

Programme monitoring and periodic review is conducted with the involvement of academic, scientific, invited, administrative staff, students, graduates, employers and other stakeholders through systematically collecting and analysing information. Assessment results are utilized for programme improvement

Descriptive summary and analysis of compliance with standard requirements

Interview with the Quality Assurance Service confirmed the Self-Evaluation Report affirmation on how the results of surveys of graduates, employers, students, faculty inform recommendations for improvement across the spectrum of the educational program. Courses are systematically surveyed for student perception of quality of instruction, meeting learning outcomes, facilities, and this data is fed back to instructional faculty as well as the appropriate supervising body/committee. Information from graduates and employers (confirmed in interviews) is incorporated into program evaluation processes and has led to demonstrable changes, e.g., 'need for more practical clinical skills upon graduation.' A strength, unique to the program, is that the Quality Assurance Service provided by the University also provides a parallel service to the USMD program, and it is likely that there is considerable 'crossover' of positive action plans and identification of weaknesses that could affect both programs.

During the interview students and staff confirmed that they regularly have surveys to evaluate the programme. TSMU uses Survey Monkey, and documentation provides samples of questionnaires.

Academic and invited staff highlighted that the course evaluation results are used by them for improving the course. Some areas of practice have been amended in response to student opinions, for example, changes in timetables, replacement of courses, update of teaching materials and literature.

Evidences/indicators

Reported survey results of Quality Assurance Service leadership.

Interviews with QA Service leadership, students, graduates, employers.

Recommendations:
o Proposal(s), which should be considered by the institution to comply with requirements of the standards

Suggestions for programme development:
o Non-binding suggestions for programme development

Best Practices (if applicable):
o Practices, which prove to be exceptionally effective and which may become a benchmark or a model for other higher education programmes

In case of accredited programme, significant accomplishments and/or progress
o Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)

Evaluation
o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard ☒ Complies with requirements ☐ Substantially complies with requirements ☐ Partially complies with requirements ☐ Does not comply with requirements

Programme's Compliance with Standard

Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
Teaching quality enhancement opportunities	✓			

Enclosed Documentation (If Applicable)

HEI's Name: LEPL Tbilisi State Medical University

Higher Education Programme Name, Level of Education: Once-Cycle Medical Doctor Programme

Number of Pages of the Report: 33

Programme's Compliance with the Standard

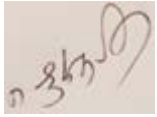| Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
1. Educational programme objectives, learning outcomes and their compliance with the programme	✓			
2. Teaching methodology and organization, adequate evaluation of programme mastering	✓			
3. Student achievements and individual work with them	✓			
4. Providing teaching resources	✓			
5. Teaching quality enhancement opportunities	✓			

Expert Panel Chair's

Dean Parmelee

Expert Panel M embers'

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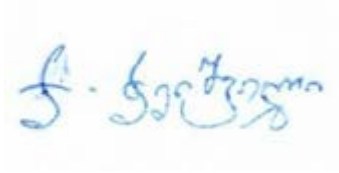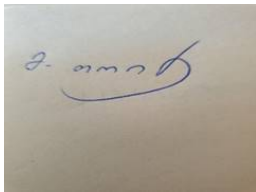
Irine Pkhakadze

Jilda Cheishvili

Marine Toidze

Elene Khurtsidze