

# Accreditation Expert Group Report on Higher Education Programme

Higher Education Programme Name; Medical Doctor e-PBL HEI's Name; David Tvildiani Medical University

Date(s) of Evaluation; 10-11 June 2019

Report Submission Date; 27 June 2019

# HEI's Information Profile

Name of Institution Indicating its	LLC David Tvildiani Medical University
Organizational Legal Form	
HEI's Identification Code	211360203
Type of Institution	University

# Higher Education Programme Information Profile

Name of the Programme	Medical Doctor (e-PBL)			
Level of Education	One-stage			
Qualification Granted Indicating Qualification	Academic Degree of Medical Doctor			
Code				
Language of Instruction	Georgian			
	English Programme Teaching and			
	Evaluation			
Number of Credits	376			
Programme Status (Authorized/	Education Programme Accreditation			
Accredited/New)	Council Decision N1434 July 2014 (renewal)			

# **Expert Panel Members**

Chair (Name, Surname,	Professor Mairi Scott, Associate Dean,				
University/organization/Country)	School of Medicine University of Dundee				
	Scotland				
Member (Name, Surname,	Dr Ia Pantsulaia, Tbilisi State Medical				
University/organization/Country)	University, Georgia				
Member (Name, Surname,	Dr David Jikia, Tbilisi State Medical University,				
University/organization/Country)	Georgia				
Member (Name, Surname,	Mr Vakhtang Tebidze				
University/organization/Country)					

# Accreditation Report Executive Summary

#### General information on the education programme

The David Tvildiani Medical University (DTMU) Medical Doctor e-PBL programme began in 2014 and was approved until July1st 2019. This review is consider the recommendation for continued approval based on an assessment of compliance with the NCEQE regulations and progress of delivery of the programme overall.

The development of the programme was initially supported by St George's University London (SGUL) as part of an international TEMPUS project; 'Establishment of the Supra-Regional Network of the National Centers in Medical Education, focused on PBL and Virtual Patients'. The aim of this project was not only to allow medical schools to convert their traditional curriculum model into a Problem Based Learning (PBL) and Case-Based Learning (CBL) approach using a spiral curriculum structure but also to enhance teaching skills through the establishment of a Medical Education Centre as a focus for faculty staff training Programmes. DTMU has established the Medical Education Centre (MEC) with staff appointed who have expertise in medical education and are familiar with international standards of curriculum design and outcome based objectives. Currently the MEC offer training to faculty staff in DTMU and also other medical schools in Georgia and are working on developing Continual Professional Development (CPD) training at a national level for established practitioners.

DTMU enrolled the first students on the e-PBL programme in 2014 and currently there are students on all of the three phases of their curriculum and in all year groups over the whole 6 years. These students volunteered to be enrolled on the programme after having been accepted onto the traditional DTMU medical doctor programme. There is a mix of Georgian students and international students who are mainly from India and Africa. The programme is taught in English when international students are present and Georgian when only Georgian students are present.

The Medical Doctor e-PBL curriculum has now been fully mapped and the PBL/CBL methodology fully established. A new 'Science' module has been developed and although all students receive training in basic research methodologies there is also an option for students to undertake deeper learning in research methodology and be assessed and awarded credits for this. This was done to encourage students to consider an academic clinical pathway and so increase medical research capacity in Georgia

Recently, as part of their international engagement strategy, DTMU has also established a partnership with the EBMA (European Board of Medical Assessors), in order to offer students the opportunity to undertake the Maastricht Progress Test. 100 of the students did this and provided useful data not only on individual student performance but also and analysis of the results and comparators identified some "problematic" areas in the program which are now being addressed. This partnership will continue and will give additional QA data and international benchmarking on some aspects of the programme.

#### Brief overview of the accreditation site-visit;

The Self Evaluation Report and associated documents were sent to the expert panel on 27th May 2019. The panel identified 1 or 2 particular sections which best matched their expertise although all members reviewed all the documents and prepared areas of enquiry for the site visit. During the visit the panel identified 2 documents which would add further information however it was agreed these could be forwarded the next day. The site visit took place 10th &11th June.

**Day 1;** There were site visits to 3 of the 32 affiliated hospitals/clinics accompanied by Professors Nino Tabagari and Tamar Talakvadze. The sites chosen were;

- Mediclub (general medicine, surgery and A&E)
- Gagua Clinic (Ob/Gyn)
- Tbilisi Central Hospital (General Medicine and associated specialties)

The visits covered student areas, teaching facilities, the clinical skills facilities, the laboratories, and the hospital inpatient and outpatient clinics. Invited staff told the panel members about their work with students and the availability of access to patients in a supportive environment.

Day 2; This was conducted according to the planned timetable of meetings with the school's senior management and administration teams, the quality assurance team, academic and invited staff, PBL tutors, students, alumni, and employers. In addition there was a tour of the student facilities, the library and the teaching areas in the DTMU campus. All members of the expert panel asked questions of the DTMU representatives and contributed to the informal feedback given to DTMU at the end of the visit.

A report was submitted to NCEQE on 27th June 2019.

#### Summary of education programme's compliance with the standards;

Overall the programme is compliant with the regulations and appropriately based on the educational pedagogy underpinning the curriculum and assessment design

#### Summary of Recommendations;

None

#### Summary of Suggestions;

There are a range of suggestions for improvements however it is acknowledge that the school has a culture of continuous improvement and consequently these suggestions are offered as a way of enhancing their plans.

- 1. Review the programme learning outcomes which whilst comprehensive and clear could be elevated by using more action orientated verbs e.g. 'to demonstrate and work with detailed scientific knowledge about medical practices.......' Also the Public Health (7.2.3) could be made stronger e.g. 'The graduate can demonstrate and work with factors that affect population health' and 'exercise appropriate judgement about the legal, social economical.....' The wording of the outcomes is particularly important as the school is emphasising the programme as utilising an 'outcome-based curriculum.
- 2. Increase the use of internationally recognized terms in the description of the curriculum in order to enhance clarity around achievements when students are migrating. An example is; Section 7.2.4 on Personal & Professional Values bullet point no. 2 on 'ambiguous situations' might be stronger if stated as being 'patient-centered' which allows the bringing together of behaviors into a strong value statement which can then be demonstrated throughout the clinical teaching.

- 3. Carry out further detailed mapping of all 6 years of the spiral curriculum with the assessments or in order to enhance constructive alignment as an aid to student & faculty understanding.
- 4. Consider the introduction of explicit admission criteria for the international students (e.g. IELTS or Multiple Mini Interview assessment) in order to enroll students more able to cope with the early years of study.
- 5. Analyze the data on student terminations in order to identify any trends or issues that can be mitigated through relevant interventions.
- 6. Increase emphasis on the opportunity presented by the elective 'Science' module as an indicator of the additional skills needed to begin a career in medical research
- 7. The Clinical Skills simulation teaching has progressed well and although having it spread over different locations allows student access it does limit the opportunities for the development of more complex simulation scenarios. A dedicated Simulation Centre designed to simulate an actual ward setting would allow the opportunities to develop more complex and realistic simulation teaching opportunities including multidisciplinary learning.
- 8. Consider inviting students to 'self-assess' on their performance in the PBL Groups (perhaps using a Reflection model) before the Tutor gives his/her opinion on their participation, intervention style, team working skills etc.
- 9. Consider enhancing the student log book /PBL notetaking into a formal 'Portfolio' from Year 2 onwards in which the student captures evidence of their 'reflective practice' up to an beyond the point of graduation.
- 10. Identify opportunities for informal external quality assurance assessors with inclusion of employers to offer formative suggestions in programme development aligned to the needs of healthcare providers.

#### Summary of best practices (If Applicable)

- 1. The PBL aspect of the Medical Doctor E-PBL has bene successfully embedded in the teaching in all cohort years.
- 2. The enthusiasm and commitment of the PBL tutors plays a significant part in that success
- 3. The involvement of staff AND students in the contextualization of the PBL cases is an effective way to makes sure the materials are presented in a way that is most relevant to DTMU students
- 4. DTMU has established a partnership with the EBMA (European Board of Medical Assessors), in order to offer students the opportunity to undertake the Maastricht Progress Test. This partnership will additional QA data and international benchmarking on some aspects of the programme
- 5. A range of software medical education programmes have been purchased to aid the student to use the case-based learning (CBL) approach in increasingly complex clinical problems. The additional ability for the students to access these programme in their own study time as well as scheduled classroom sessions also enhances their learning opportunities.
- 6. The support for both faculty staff and students to attend national and international conferences is impressive and demonstrates DTMU's strong conviction to enhance medical education and research capacity at a national level.

- 7. The students were energetic and enthusiastic and described excellent staff/student relationships at all levels.
- 8. Student peer tutoring and mentoring is developing well and there are plans to develop it further by enhancing the students teaching skills
- 9. The DTMU alumni group is a cohesive and committed group of former students who are active in a variety of ways in supporting the work of the medical school
- 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 Medical Doctor ePBL programme is a designed as a 6 year long spiral curriculum in 3 phases; Basic and Clinical Sciences, Clinical Medicine, Clinical Clerkship. The programme objectives are compliant with the regulations, consistent with the strategy and mission of DTMU and are based on widely recognized international standards of educational pedagogy. The overall goal of the programme is simply stated and should be realised effectively by the PBL/CBL design of the programme.

The collaboration through the Tempus project (using SGUL materials) allowed the early implementation of a new programme along with a guarantee that it would be effective and of a high quality. The up-front provision of the SGUL PBL/CBL cases along with support in delivery contributed to speed or readiness along with commitment from the DMTU academic staff to contextualize and localize the materials. These were necessary and important steps which not only ensured that the cases relevant to DMTU students but they also allowed engagement and ownership by the academic staff and students who worked on the changes. Currently DTMU have 30 of the SGUL Year 1 cases and 18 Year 2 cases embedded in their curriculum.

The development of Phase2 of the programme (Clinical Medicine) ) using a CBL approach throughout all the modules/themes is an effective way to build on the students' study skills in 'directed self-study' established by their work on the PBL cases. The delivery of these cases through small group work enhance by a range of sophisticated online software tools enhances the classroom teaching and allows the students additional opportunities for self-study.

Although the detailed mapping of the programme and assessment to demonstrate constructive alignment will be refined with increased experience of delivery, it is evident that the 3 Phase approach which incrementally builds on the students' knowledge and skills is effective. This is not surprising as the approach DTMU has adopted is increasingly recognised internationally as the gold standard of modern medical education techniques. Students who receive education in this way gain the skills of a life-long self-directed professional learner, skills which increasingly are required by health care regulators in many countries.

The scientific component of the programme with a core module that offers additional credits for those students who wish to undertake the assessment has been developed to allow student choices that might be helpful for their future career preferences e.g. in medical education and research.

#### Evidences/indicators

- Self-Evaluation Rreport
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni
- Curriculum Alignment Appendix 1&2 (sent later)
- D3.1 Establishment of the Supra-Regional Network of the National Centers in Medical Education, focused on PBL and Virtual Patients-ePBLnet 530519-TEMPUS-1-2012-1-UK-TEMPUS-JPCR Component evidences/indicators including relevant documents and interview results
- Educational program (Appendix #1)
- University Mission and Strategic Plan (Appendix #2)
- o Analysis of labor market and employers' demands (Appendix #3)
- Internationalization Policy (appendix #4)
- Results of personnel and students' surveys for study promotion of HEI international cooperation and internationalization (Appendix #5)
- Web pagehttp://www.dtmu.ge/index.php?lang=2 (Appendix #6)

#### Recommendations:

None

#### Suggestions for programme development:

o Carry out further detailed mapping of all 6 years of the spiral curriculum with the assessments or in order to enhance constructive alignment as an aid to student & faculty understanding.

#### Best Practices (if applicable):

- The PBL aspect of the Medical Doctor E-PBL has bene successfully embedded in the teaching in all cohort years.
- o The enthusiasm and commitment of the PBL tutors plays a significant part in that success
- The involvement of staff AND students in the contextualization of the PBL cases is an effective way to makes sure the materials are presented in a way that is most relevant to DTMU students

# 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

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 programme outcomes are clear and appropriate for the level of degree. They are fully compliant with the standards and this is well evidenced within the programme documents. The nature of the programme ensures that students build up their knowledge base in a way that offers clinical relevance and context from the beginning. They build on this in an incremental way due to the nature of the 'spiral curriculum'.

The assessment methods (both formative and summative) comply with the national requirement of Georgia and include MCQ, Problem Analysis, Case Based Discussion (CBD) MiniCEX, Direct Observation of Procedural Skills (DOPS), and OSCE & Case Presentations with appropriate use of trained simulated patients & mannequins, Portfolios & Progress Test. The detailed mapping documents demonstrate appropriate constructive alignment throughout the curriculum and the assessments.

Academic staff are trained in the creation of valid and reliable assessments and to carry out the assessments to a consistent standard. The students are given timely feedback on formative 'runthrough' of the main types of assessments such as OSCE which is utilized from Year 2 onwards. They are also given timely feedback after all summative assessments and any student whose performance is a cause for concern are monitored by the Dean, course leader or clinic tutor so as to offer any necessary intervention and support in a timely manner.

#### **Evidences/indicators**

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni
- Curriculum Alignment Appendix 1&2 (sent later)
- Analysis of employer's survey results on field and general competencies valuable for the medical field (Appendix #7)
- Analysis of employer's survey results and report on use of results (Appendix #7.1)
- Employers opinion on field competencies of the Medical Doctor Program graduates (Appendix #8)
- The characteristics of determining the professionalism identity and ability to reflect it in medical pre-diploma education (Appendix #9)
- Students survey (Attachment # 10)
- Analysis of feedback on modules of Principles of clinical diagnosis with Clinical assessment of pathological processes (Appendix #11)
- Students' self- and peer-evaluations in PBL: Comparative analysis of correspondence with tutors' assessment and their future professional progress benefit (Appendix #12)
- o Report of the Medical Education Center (Appendix #13)
- Educational program (Appendix #1)
- Analysis of labor market and employers` demands (Appendix #3)
- Internationalization Policy (Appendix #4)
- Results of staff and students' surveys for encouraging international cooperation and internationalization possibilities (Appendix #5)
- Web pagehttp://www.dtmu.ge/index.php?lang=2 (Appendix #6) Component evidences/indicators including relevant documents and interview results

#### Recommendations:

None

#### Suggestions for programme development:

- o The programme learning outcomes are comprehensive and clear however a few could be elevated by using more action orientated verbs e.g. 'to demonstrate and work with detailed scientific knowledge about medical practices.......' Also the Public Health (7.2.3) could be made stronger e.g. 'The graduate can demonstrate and work with factors that affect population health' and 'exercise appropriate judgement about the legal, social economical.....'
- Increase the use of internationally recognized terms in the description of the curriculum in order to enhance clarity around achievements when students are migrating. In section 7.2.4 on Personal & Professional Values bullet point no. 2 on ambiguous situations might be stronger if stated using the current terminology of these behaviors as being 'patient-centered' which allows the bringing together of behaviors into a strong value statement. Perhaps also add 'team-based learning' as another distinct skill needed in modern healthcare

#### Best Practices (if applicable):

□ DTMU has established a partnership with the EBMA (European Board of Medical Assessors), in order to offer students the opportunity to undertake the Maastricht Progress Test. This partnership will additional QA data and international benchmarking on some aspects of the programme

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

#### Programme's Compliance with Standard

 $\square$  Does not comply with requirements

Standard	Complies with	Substantially	Partially	Does not Comply
	Requirements	complies with	Complies with	with Requirements
		requirements	Requirements	
Educational	X			
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

The University's policy on admission, suspension and termination is overseen by the Rector's Council. Students are admitted to the programme in line with the national requirements of Georgia for Georgian students. International students apply and each application is processed and considered by the Dean or Vice Dean. There is no formal test of English language however DTMU makes a judgment based on the student's application (written in English) a SKYPE interview and school reports which describe the student's level of English.

The enrollment procedures are reviewed regularly and amendments are made based on an analysis of the data from previous cycles. The administration teams involved are well aware of all necessary processes and the students interviewed reported that DTMU had been helpful throughout their application and admission.

#### Evidences/indicators

- Self-Evaluation report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni
- Rule of Recognition, Suspension, Termination, Restoration of Student Status, Mobility, and Recognition of education received during the study period (Appendix # 14)
- Rule of Regulation of the Study Process (Appendix # 15)
- Analysis of the first-year students' academic performance in the context of Unified
   National Examinations results (Appendix #16)
- Rules and Conditions of Registration (Appendix #21)
- Educational program (Appendix #1)
- Web site http://www.dtmu.ge/index.php?lang=2 (Appendix #6) component evidences/indicators including relevant documents and interview results

#### Recommendations:

o None

#### Suggestions for programme development:

- Consider the introduction of explicit admission criteria for the international students (e.g. IELTS or Multiple Mini Interview assessment) in order to enroll students more able to cope with the early years of study.
- Analyze the data on student terminations in order to identify any trends or issues that can be mitigated through relevant interventions.

#### 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

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 PBL/CBL structure delivered though a spiral curriculum with 3 Phases is well designed and appears to be very effective. The spiral curriculum is based on strong pedagogical underpinning and is fully integrated both vertically and horizontally having been designed to enable the achievement of the necessary mix of biomedical and clinical sciences knowledge and clinical skills along with the key determinates of professionalism based on moral values and ethical principles. The programme intended outcomes are delivered through a range of approaches; lectures to transfer knowledge of the fundamental Biomedical sciences along with small group work and PBL/CBL materials to ensure individual students are able to obtain the outcomes in a way most effective for them as individuals.

Clinical competencies are then acquired though enabling students to apply their knowledge in the clinical context in a range of locations that allow exposure to clinical situations (both simulated and real). In this way they learn the skills necessary to adopt a patient centered approach through communication, diagnosis and management of illness in an ethical and practical manner relevant to health care delivery in Georgia and beyond. Preventive medicine, evidence based practice and research methods are also covered in the programme throughout the teaching years. The range of assessment methodologies including the use of the OSCE exam is an appropriate and robust method which assesses the students' achievements in regard to the full range of programme outcomes.

The contextualization of the SGUL PBL/CBL cases was carried out by the establishment of working groups who carefully and comprehensively reviewed all cases in order to make changes e.g. Georgian names, backgrounds, drug names etc. PBL tutors have been trained and given carefully designed 'facilitation notes'. They all have time to prepare for the delivery of the sessions in advance in order to offer appropriate guidance to support the students 'directed-self-learning'. They collaborate as a

group to reflect on the previous teaching and identify lessons learned or supportive approaches in the future e.g. dealing with students who do not engage.

In addition in Phase 2 the 6 themes (Life cycle, protection etc.) give coherence to the subjects covered however as there is an inherent risk of complexity in a fully integrated spiral curriculum there needs to be careful, extensive and explicit mapping. Throughout the programme the expected competencies and outcomes are carefully detailed and the assessments are aligned to the desired outcomes. Logbooks and portfolios are designed to aid students in tracking their own progress. The Maastricht progress test is a very useful way to help students assess their own level of competence at the various stages compared to peers and after a successful trial DTMU has decided to continue with the use of the Maastricht progress test.

In order to enhance the educational opportunities available from real clinical cases, students are encouraged to meet patients in the clinics and wards whenever possible. In addition, a cohort of 'simulated patients' have been trained for both teaching and assessment. However as increasing numbers of simulated patients are needed, there are recruitment drives for volunteers along with additional training to increase consistency.

The DTMU Curriculum Committee works with the Medical Education Center to support the development and delivery of the programme. All relevant DTMU committees include student members and engage with stakeholders whenever possible. Academic and invited staff are required to undertake training as teachers and all staff are encouraged and supported to develop their skills through training programmes and conference (both national and international) attendance.

Overall the DTMU programme is fully compliant with all components of the NCQCE Sector Benchmarks of Higher Education

#### Evidences/indicators

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni.
- o NCEQE Medicine Sector Benchmarks of Higher Education
- Curriculum Alignment Appendix 1&2 (sent later)
- Rule and procedures for the development, approval, modification and cancellation of an education program (Appendix #17)
- Policy of planning, elaborating and development of programs at the David Tvildiani
   Medical University (Appendix #18)
- o Program syllabi (Appendix 19)
- Report of the Medical Education Center (Appendix #13)
- Educational program (Appendix #1)
- Web pagehttp://www.dtmu.ge/index.php?lang=2 (Appendix #6)

#### Recommendations:

o None

#### Suggestions for programme development:

o Increase emphasis on the opportunity presented by the elective 'Science' module as an indicator of the additional skills needed to begin a career in medical research.

#### 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

 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

N	o 1:	• . 1		
X	Complies	with	requirem	ents

- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- $\square$  Does not comply with requirements

#### 2.3 Course

- > Student learning outcomes of each compulsory course 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

The course documentation provides evidence of compliance with the standards and alignment of all module learning outcomes and programme learning outcomes. There is consistency in all 3 phases; Basic and Clinical Sciences, Clinical Medicine, Clinical Clerkship and the learning outcomes for each phase are appropriate for the level of study of an MD programme. The credit allocation is also appropriate. The programme design is based around 'directed self-learning' with students required to study in PBL groups between the sessions with their PBL tutor. Dedicated study space is given to the students to allow this to happen.

Phase 1; The Basic Biomedical sciences phase is described as being necessary to allow student to gain a basic understanding in Embryology, Physiology, Biochemistry, Microbiology and Pathology. Although teaching in this phase is lecture based, learning is also enabled through group work and working through scientific papers and evidence in a regular Journal Club.

Phase 2; Clinical Medicine has a range of themes including the more diverse subjects of 'Public and Population Health' and 'Personal and Professional Development' which are extensively embedded into the PBL/CBL cases. The contextualisation of these complex subjects into patient cases allows the student to gain personalised insight and understanding of their own values and behaviours, both of which are essential in medical practitioners.

Phase 3; This final phase is a clinical apprenticeship model with students on clinical attachments interacting with both patients and also the multi-disciplinary team in the hospital/clinic.

There is a range of different assessment approaches which are designated as appropriate to the different phases and adequately assess all learning outcomes.

There is extensive access to the necessary teaching materials both in the main campus and in the clinics (confirmed in those that were visited) and the use of the e-library guarantees that students (and academic staff) have access to the latest literature and evidence base for the subjects being studied.

#### Evidences/indicators

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Employers, Students and Alumni.
- Curriculum Alignment Appendix 1&2 (sent later)
- o Program syllabi (Appendix 19)
- Educational program (Appendix #1);

#### Recommendations:

o None

#### Suggestions for programme development:

- The Clinical Skills simulation teaching has progressed well and although having it spread over different locations allows student access it does limit the opportunities for the development of more complex simulation scenarios. A dedicated Simulation Centre designed to simulate an actual ward setting would allow the opportunities to develop more complex and realistic simulation teaching opportunities including multi-disciplinary learning.
- Consider inviting students to 'self-assess' on their performance in the PBL Groups (perhaps using a Reflection model) before the Tutor gives his/her opinion on their participation, intervention style, team working skills etc.

#### Best Practices (if applicable):

• A range of software medical education programmes have been purchased to aid the student to use the case-based learning (CBL) approach in increasingly complex clinical problems.

The additional ability for the students to access these programme in their own study time as well as scheduled classroom sessions also enhances their learning opportunities.
In case of accredited programme, significant accomplishments and/or progress
<ul> <li>Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)</li> </ul>
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
$\square$ 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 DTMU curriculum is essentially a PBL/CBL based programme which enables students to acquire the skills of academic enquiry which are necessary for clinical practice and scientific and medical research. According to Bloom's taxonomy these skills; analysing, synthesising and evaluating, collaboration and various forms of communication are at the higher level of education objectives. The PBL approach also encourages self-assessment and self-reflection which increasingly allows students to become less tutor-dependent as they progress through the programme and so are able to acquire discipline specific skills and transferable skills. When students are on placement the supervisor is able to further guide and support them to develop their skills with real and simulated patents in a safe environment. The supervisors' interviewed on the visit, were all aware of the nature of the DTMU programme and the need for appropriate supervision at all times.

Specific science skills are delivered as part of the core curriculum within the credit bearing modules and also as part of the PBL cases. Additionally students are able to develop their learning by undertaking a 'project' which is assessed by the Scientific Research Department and so awarded additional credits. The project is further assessed by presentation at the Journal Club. Students are also encouraged to undertake electives (in Georgia or abroad) and some choose to do electives in scientific research rich institutions.

#### Evidences/indicators

- Self-Evaluation Report
- o Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni
- Educational program (Appendix #1)
- o Curriculum Alignment Appendix 1&2 (sent later)
- Program syllabi (Appendix #19)
- Agreements/Memorandums concluded with practice/research institutions (Appendix 20)

Re	COI	nm	end	lati	ions:
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o None

#### Suggestions for programme development:

 Consider inviting students to 'self-assess' on their performance in the PBL Groups (perhaps using a Reflection model) before the Tutor gives his/her opinion on their participation, intervention style, team working skills etc.

#### Best Practices (if applicable):

10. The support for both faculty staff and students to attend national and international conferences is impressive and demonstrated DTMU's strong conviction to enhance medical education and research capacity at a national level.

#### 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**

o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard  ${\cal O}$ 

rombi	ies w	illi re	quirem	emis

- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- $\square$  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

As previously described this is a PBL/CPL based programme and as such is inherently student centered with students becoming increasingly skillful in 'directed self-learning'. The essence of such a programme is that it requires 'scaffolding' of knowledge to allow incremental knowledge acquisition. The spiral curriculum support this 'scaffolding' by allowing additional knowledge and contextualization of knowledge to develop based on the student's individual learning opportunities.

All groups have a mix of Georgian and international students so that international students who may not be familiar with conversational Georgian language and culture can be supported by their Georgian peers, however students are expected to learn Georgian at the start of their studies. All the PBL/CBL cases are contextualized to help student integration. However it is accepted that not all international students will be fully conversant in the Georgian language in a way that allows them to interview patients and so whenever possible on clinical attachments these students are paired with a Georgian student who can help with translation. If this pairing is not possible, supervisors and/or tutors will translate for the international students. This is not ideal as these students, when on placement, may also miss out on the inter-professional discussions within the health care teams which is a rich source of learning around clinical decision making. These issues reinforce the importance of the early language training provided when students first arrive in Georgia.

#### Evidences/indicators

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni
- Educational program (Appendix #1)
- Methodology for Development of an Individual Curriculum (Appendix #22);

#### Recommendations:

o None

#### Suggestions for programme development:

 Consider enhancing the student log book /PBL notetaking into a formal 'Portfolio' from Year 2 onwards in which the student captures evidence of their 'reflective practice' up to an beyond the point of graduation.

#### 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

 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  $\,$ 

X	Compl	lies wi	th req	uirements	

- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- $\square$  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

As previously described there is a range of assessments and the choice of assessment depends on the stage of the programme and the subject area to be assessed e.g. the application of knowledge through MCQ, problem solving skills through case based analysis, clinical skills through OSCE exams. Students are aware of the assessments and are given many opportunities to practice and receive formative feedback. A prolonged OSCE station assessment is used formatively to allow the student to become more aware of how their performance will be assessed through check-lists and also how to manage the time available in an OSCE station effectively. Students are given robust and timely feedback on all their assessments in order to support and track their progress.

A grading system is used; A to F with FX meaning that students are able to repeat the assessment once following feedback designed to help them address their deficiencies. A grade F means that the student has to repeat the semester.

Objective assessment methods e.g. MCQ are analyzed using a psychometric approach and overall results are quality assured for consistency, homogeneity and heterogeneity of issues assessed. This work is time consuming when done manually and so DTMU are exploring the option of purchasing software to support the analysis of all assessment data in order to ensure fairness and compliance with legislation.

Evaluation of the PBL tutor performance is also carried out which helps maintain consistency if delivery. Any training needs identified are addressed.

Evidences/indicators
- C-16 Elustion Donort
Self-Evaluation Report  Interview with University Administration team Self-Evaluation team Head of Programme  Output  Description of Programme  Descrip
<ul> <li>Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University &amp;</li> </ul>
Faculty QA, Students and Alumni   Educational program (Appendix #1);
<ul> <li>Curriculum Alignment Appendix 1&amp;2 (sent later)</li> <li>Rule of Regulation of the Study Process (Appendix # 15)</li> </ul>
<ul> <li>Rule of Regulation of the Study Flocess (Appendix # 15)</li> <li>Provision On pedagogical staff workload at David Tvildiani Medical University (Appendix</li> </ul>
23)
20)
Recommendations:
o None
Suggestions for programme development:
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
<ul> <li>Significant accomplishment and/or progress made by the programme after previous accreditation (If</li> </ul>
Applicable)
Evaluation
o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard
compliance with the specific component of the summand
☑ Complies with requirements
$\square$ Substantially complies with requirements
$\square$ Partially complies with requirements
— - uroum, comprise num requiremente
$\square$ Does not comply with requirements

#### Programme's Compliance with Standard

Standard	Complies with Requirements	Substantially complies with	Partially Complies with	Does not Comply with
	Requirements	-		
		requirements	Requirements	Requirements
Teaching	X			
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

DTMU provides consultation services for the students which cover various affairs such as academic and scientific activities, career growth, continuation of studies, financial issues etc.

The students can receive support from their coordinators who provide them with counseling under their authority or refer to the other members of Dean's office or to the Dean itself. During the site visit, the students pointed out the high level of their satisfaction with their communication with the Dean's office and the support received by the staff. It was clarified during the visit, if there is a mix of Georgian and international students, the classes are conducted in English; and if there are Georgian students only – then in Georgian. This was confirmed by the international students as well that they do not have any problem with this point.

The University has a "Peer Support Center" which facilitates providing assistance to freshmen students by clinical course students. Besides that, DTMU has the Center for Promotion of Career Development which plans and implements individual work with students in in order to help them in choosing their future career in medicine.

The students are also able to benefit from an individual and flexible payment system of their tuition fees. The university also has allocated several scholarships and grants for the students, for instance, funding of US Medical Certificate Exams, funding of participation in the international medical courses and conferences etc.

The students emphasized during the interviews that the admission to this program went smoothly, with the appropriate support by the university. It was mentioned that they overcame adaptation process to the PBL program with the help of their tutors and the staff.

involv	confirmed by the students during the site visit that the university promotes students' ement in the extra-curricular activities and supports their initiatives, organizes the tours, social ies and sports events.
Eviden	ces/indicators
0	Self-Evaluation Report
0	Interview with University Administration team, Self-Evaluation team, Head of Programme
	and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University &
	Faculty QA, Students and Alumni
0	Provision On pedagogical staff workload at David Tvildiani Medical University (Appendix
	# 23)
0	Rule of Regulation of the Study Process (Appendix # 15)
0	Student Internal Regulations (Appendix # 24)
0	Provision of Davit Tvildiani Scholarship (Appendix # 25)
0	Rule for allocating Individual scholarship of MediClub Georgia (Appendix # 26)
Recom	mendations:
0	None
Suggest	ions for programme development:
Non-bi	nding suggestions for programme development
Best Pra	actices (if applicable):
0	The students were energetic and enthusiastic and described excellent staff/student relationships at all levels.
0	Student peer tutoring and mentoring is developing well and there are plans to develop it further by enhancing the students teaching skills
In case	of accredited programme, significant accomplishments and/or progress
0	Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)
Evaluat	ion
	lease mark the checkbox which mostly describes your position related to the programmes ance with this specific component of the standard
	$\square$ $\boxtimes$ 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
Evidences/indicators
Recommendations:
o None
Suggestions for programme development:
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
<ul> <li>Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)</li> </ul>
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	x			

#### 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

Qualification of personnel is corresponding to the program. DTMU has the regulations for election and attraction of qualified academic staff. The university regulation describes very detail the academic positions, their duties, terms and conditions of the election, criteria for evaluating the participants (Appendix # 27, 28). This procedure is open, clear and based on competition in accordance of legislation of Georgia as well as regulation of the institution.

The criteria for evaluation the expertise of academic staff are based on person's pedagogical, scientific and clinical activities in the relevant field; As well as participation in professional and social life.

The current workload is adequate; the ratio of professors/tutors to students is acceptable for the program. The DTMU has special formula for calculation of the minimal needed numbers of academic staff. According the SER number of all professors including invited teachers are 222 (Academic staff 70, invited teachers 152). From academic staff 19 Professors (full), 39 Associate professors, 10 Assistant Professors, 2 Assistants.

Workload of academic staff is determined by teacher's individual positions and include teaching and clinical activities, scientific research works and other educational activities such as monitoring, working with PhD students, residents etc. (Appendix # 23). The minimum contact hours of academic staff are 300 annually, whereas the maximum is 900hours. Thus, according the positions professor

should work 300 hours (auditorium work), 650 (other activities); Associate Professor: 400 (auditorium work) - 750 (other activities); Assistant Professor: 500 (Auditoria Work) - 850 (other activities);

• Assistant: 220 (auditoria work) - 350 (other activities). In DTMU, the duration of the working time is no more than 36 hours per week for academic personnel.

#### Evidences/indicators

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Employers, Students and Alumni
- o The procedure of personnel acceptance (receiving) (Appendix # 27)
- o Rules of Academic personnel affiliation (Annex # 28)
- Regulation on the work load of academic staff (pedagogical composition) at Davit Tvildiani
   Medical University (Appendix # 23)
- Regulation of dean's office (Annex # 31)
- Work Descriptions (Annex # 34)

	ations:

o None

#### Suggestions for programme development:

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

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

#### **Evaluation**

(	o Please	mark th	e checkbox	which	mostly	describes	your	position	related to	the	program	nme
com	pliance	with this	s specific co	mpone	ent of th	ie standar	d					

	-	
□ Su	ıbstantially con	nplies with requirements
□ Pa	artially complie	s with requirements

□ Does not comply with requirements

☑ Complies 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

DTMU regularly evaluate the academic, invited and scientific staff based on students' surveys (DREEM). According the Results of recent assessment the overall DREEM score of teachers is 35/44, which is identical to "ideal teacher". University are involved in international TEMPUS project, which focus on development of academic staff as well as program. The University has successfully implemented the following projects:

- ✓ ePBLnet: 530519-TEMPUS-1-2012-1-UKTEMPUS-JPC "Establishment of the Supra-Regional Network of the National Centers in Medical Education, focused on PBL and Virtual Patients"
- ✓ PACT: 544047-TEMPUS-1-2013-1-GE-TEMPUS-JPGR "Project Actor Capacity Training in Caucasus"
- √ #G-2094 "Elaboration of a universal test on magneto sensitivity"

Now, University participates in the following International projects:

- ✓ "Academic Integrity for Quality Teaching and Learning in Higher Education Institutions in Georgia" (Coordinator: Ilia State University)
- ✓ "Raising Research Capacity of Georgian HEIs through Developing R&D Units" (Coordinator: Iv. Javakhishvili Tbilisi State University)
- ✓ "Doctors' Education, Empowerment of Patients, Regarding Atrial Fibrillation and venous Thromboembolism" (Call Pfizer-RFP-2018CV2).

The University has a system of research development and creative activity support; Which aims at supporting new knowledge, visions, approaches and perspectives (including further studies), including finding new research ideas for research problems (Appendix # 32).

DTMU give financial support to the PhD students, students and professors for attending the medical education conferences and scientific forums (including AMEE, AMSE). According to the SER all university staff have the opportunity to acquire new/modern approaches to learning and teaching. DTMU are involved in the several international projects, where main aim is development of higher medical education and staff in Georgia. Based on one of them the Center for Medical Education has been developed (Project # 530519-TEMPUS-1-2012-1-UK-TEMPUS-JPCR-ePBLnet). This center facilitates Georgia's integration into the common European sphere of higher education as well as the establishment of a quality education system and maintaining the continuously updated and continuous processes of its development.

Evidenc	ces/indicators			
Ad V Augus	accy marcators			
0	Self-Evaluation Report			
0	Interview with University Administration team, Self-Evaluation team, Head of Programme			
	and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University &			
	Faculty QA, Employers, Students and Alumni			
0	DREEM Survey and Analysis Results (Appendix # 54)			
0	Information about scientific activities of academic and scientific personnel of DTMU			
	(Annex # 30)			
0	Mechanism for Supporting Research Activities (Annex # 32)			
Recomi	mendations:			
	o None			
Suggest	ions for programme development:			
Non-bi	nding suggestions for programme development			
	actices (if applicable):			
0	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			
0	Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)			
Evaluat	ion			
o Pl	ease mark the checkbox which mostly describes your position related to the programmes			
	compliance with this specific component of the standard			
	⊠ Complies with requirements			
	$\square$ Substantially complies with requirements			
	☐ Partially complies with requirements			
	$\square$ 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

DTMU (from February 28, 2018) holds 2 teaching building (one is own and second in in rent) and student dormitory (for 369 students] (Appendix # 33). The real estate is registered in LEPL Public Registry database (<a href="https://www.reestri.gov.ge">www.reestri.gov.ge</a>)

For scientific works and clinical skills learning the University has agreements with various clinics, hospitals, scientific research and other institutions (Appendix # 20), which also confirmed by authorization decision # 65 (10.09.2018): "David Tvildiani Medical University Ltd (S/K 211360203). Additionally, DTMY has approved project for the construction of a new teaching hospital (Annex # 37).

Results of student survey conducted on material resources are satisfactory (Appendix # 38). The Library's environment includes the following spaces: bookshop, reading hall, information-technological equipment space, group workspace, working space for the staff. The library is equipped with 17 personal computers connected to the Internet, 1 laptop, printer, wireless internet. The University periodically updates the library fund with new editions of manuals and other literature; The DTMU Library is a member of the Georgian Library Association and Georgian Library Consortium of Georgia and a member of the consortium of the project "Electronic Information Libraries - eIFL", which has access to the following electronic resources and bases (available for academic composition , As well as for students) (Annex # 41):

The University also has a student portal (http://db.dtmu.ge) - using which students are acquainted with their assessment - attendance, activity, verbal exam, and quiz assessment;

The University also owns the various teaching electronic resources. for example, http://www.anatomy.tv - University has acquired ANATOMY.TV license. This electronic resource enables users to be familiar with detailed information about the anatomy using 3D technology.

#### **Evidences/indicators**

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni.
- Public Registry Extracts and Drawings (Appendix # 33)
- o Agreements / Memorandums with the Practice and Research institutions (Annex # 20)
- The new hospital project (Annex # 37)
- o Information on the results of the material resource surveys (Annex # 38)
- o Terms of Use of the Library, Instructions, Meetings (Annex # 39)
- Description of the Dafne Hare Library (Annex # 40)

0	Documents asserting the involvement in the international electronic library network
	(Annex # 41)
0	Statistics of the use of electronic library bases (Appendix # 42)
0	Student Survey Results (Appendix # 43)
0	Mechanisms for Development and Renewal of Library Resources and Services (Annex # 44)
0	DREEM Survey and Results Analysis (Appendix # 54) 56)
0	Budget (appendix 56)
Recom	mendations:
	o None
Suggest	ions for programme development:
Non-bi	nding suggestions for programme development
Best Pra	actices (if applicable):
0	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
0	Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)
Evaluat	ion
	ease mark the checkbox which mostly describes your position related to the programmes ance 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

Davit Tvildiani Medical University the financial resources provided are economically sustainable. The main source of funding of the University are:

- 1. Study Fees;
- 2. National and international funds;
- 3. Other permitted income derived from economic activity;
- 4. Dividends received from other enterprises.

The financial condition of the university is stable, growing and ensures fulfillment of the activities in the Strategic Development Plan.

Expenses is planned in parallel with DTSM budget revenue planning. The budget are allocated according the funding of all necessary expenses, which are entrusted by the university, for example, necessary expenses include state taxes and fees, execution of salary liabilities undertaken by staff timetables and contracts, granting of scholarships, settlement with valuables and services suppliers, payment of membership fees, student mobility, research financing and so on.

The university authority discussed and approved the 2019 budget priorities:

- 1. Development of Educational and Information Resources (for promoting teaching, learning and research processes);
- 2. Deepening cooperation with leading European universities (exchange student programs, business trips, student conferences, internships, etc.);
- 3. Scientific research activities (about 254000 lari, scientific trips and conferences, internationalization);
- 4. Implementation of infrastructure projects (completion of existing construction, current and capital repair of building facilities);
- 5. Improvement and development of the learning environment;
- 6. Improve staff training, retraining (organizing various training courses, teaching foreign language);
- 7. Support various initiatives (funding of scholarship scholarships, encouraging employees, supporting student initiatives, etc.);

#### Evidences/indicators

- Self-Evaluation Report
- o Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Students and Alumni.
- Regulation on Workload of Pedagogical Composition at David Tvildiani Medical University (Appendix # 23)
- Financial Management and Control System (Annex # 45)
- University Budget (Appendix 56)

#### Recommendations:

o None
Constitute for the developments
Suggestions for programme development:
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
<ul> <li>Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)</li> </ul>
rippireuole
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
23 Complies with requirements
☐ Substantially complies with requirements
☐ Partially complies with requirements
☐ Does not comply 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	X			

# 5. Teaching quality enhancement opportunities

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

On behalf of the National Center for Educational Quality Enhancement, the visiting team met with the University's leadership, Dean, Program Managers and Head of Quality Assurance Service, Professors / Teachers, Tutors, Employers and Students participating in the program.

The quality of the presented program and its delivery is one of the main goals of the university educational mission and as part of this they place great emphasis on the need to involve all staff and students in ensuring that the philosophy of continuous improvement is delivered.

Teaching staff are encouraged and required by the Quality Assessment Group to be involved in the annual self-assessment planning, monitoring and evaluation s and are also encouraged to welcome and be responsive to student feedback on their performance. This was particularly evident in discussion with the PBL tutors who considered that such feedback was essential for their own development as teachers.

The students' involvement in quality assurance is not limited to feedback and information. They are involved in interviews, self-assessment reports, and university management and management (membership in decision-making) committees. Consequently students are full participants in the process as equal partners, responsible for sharing and understanding of the quality of education, identifying and combating deficiencies and expressed the view that the senior management of DTMU were very accessible and open to all student suggestions.

The documentation of all Quality processes is comprehensive and includes the information needed for strategic planning, specific actions for identifying problems and communication with academic personnel; Quality assessment processes are based on the assessment aspects of curriculum, learning outcomes, learning and teaching strategies, employers' requirements, student evaluation system, quality of academic and support staff, student opinion survey and others. The Quality Assessment Methodology is based on an analysis of the situation according to the Quality Assessment Purpose, Quality Indicators, Performed Works and Evidence.

#### Evidences/indicators

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Students and Alumni.
- Important Characteristics of DTMU Quality Assurance and Important Principles of Development (Appendix # 47)

0	Analysis of the academic performance of freshmen students in the context of the results of
	UNE - 2017- 2018 (Appendix # 16)
0	The procedure for use of quality assessment results and the report on the use of results -
	Approx 49.

The provision on pedagogical staff workload at David Tvildiani Medical University (Appendix # 23)

(Appendix # 23)
<ul> <li>The methodology for determining the student contingent (Appendix # 49)</li> </ul>
o Self-Assessment Report 2015_2016 (Appendix # 50)
o Self-Assessment Report 2016_2017 (Appendix # 51)
<ul> <li>Employers' Opinion on Certified Medication Graduates Competencies, Tbilisi, 2019</li> </ul>
Recommendations:
o None
Suggestions for programme development:
Suggestions for programme development.
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 mode.
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 (I
Applicable)
Evaluation
o Please mark the checkbox which mostly describes your position related to the programmes compliance with this specific component of the standard
compliance with this specific component of the standard
☑ Complies with requirements
— compact was 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

For the purpose of accreditation the external evaluation of the program quality was conducted in July 2014; since then, the reports on the progress of the program development are annually submitted to the National Center for Educational Quality Enhancement. In addition, the educational program of electronic problems based Teaching for Certified Medical doctor (E-PBL) was developed by the EU funded project "530519-TEMPUS-1-2012-1-UK-TEMPUS-JPCR: within the frames of Establishment of the SupraRegional Network of the National Centers in Medical Education, focused on PBL and Virtual Patients (ePBLnet). Consequently, each stage and component of the mentioned process was evaluated, on one hand, by the Coordination Council composed of the members of the Consortium of the Project within the framework of the project, and on the other hand, the members of the relevant EU team at the end of the project.

During the project (refer to the Accreditation Report period of the Program Certified Medical doctor (E-PBL), at the David Tvildiani Medical University was conducted provision of adapted PBL cases for students and their survey (Karaganda University) for the purpose of assessing these cases (see Appendix "D3.3 Repurposed PBL cases evaluated and implemented"). The assessment of a virtual patient by the students was positive and high interest towards it was expressed.

Under the supervision of the Ukrainian partner of the project (Sumy State University) the framework approach for the Study Program (PBL Case and Week) has been developed for adaptation of educational resources, within the framework of which was conducted the comparative analysis of the necessary resources with the existing resources and the available resources were shared to the consortium (see appendix "D4.1 Adaptation of the existing resources"), based on the mentioned the database was developed for supporting each PBL Case (see appendix "WP4.1 GE").

Project Leader Partner, London St. George University has undertaken a detailed survey of the process (see Annex "D5.4 Evaluation Report") within which the following groups were identified as categories of stakeholders: Students; PBL tutors; Persons involved in the curriculum adaptation; Persons involved in the cases adaptation; Heads of Medical Education Center; The targeted survey of the relevant persons was held from each identified group.

The results showed that PBL's implementation significantly improved students' motivation and engagement in the learning process. Students have confirmed that interactive cases have increased their involvement and increase motivation to find additional information for the purpose of "solving" the case and making the diagnosis. Part of the students noted that PBL increased their "workload". They also pointed out that interactive cases helped them to be more prepared for real clinical situations, namely, improved the ability to diagnose and care for the patient in the clinical environment. The students positively evaluated the technologies used for PBL implementation.

#### Evidences/indicators

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Employers, Students and Alumni.
- o <a href="http://epblnet.eu">http://epblnet.eu</a>

0	http://epblnet.eu/content/quality-control-plan						
0	http://epblnet.eu/content/quality-control-report						
0	http://epblnet.eu/content/dissemination-final-report						
_							
Recomi	Recommendations:						
	o None						
Suggest	ions for programme development:						
0	Identify opportunities for informal external quality assurance assessors with inclusion of employers to offer formative suggestions in programme development aligned to the needs of healthcare providers						
Best Pra	actices (if applicable):						
<ul> <li>The DTMU alumni group is a cohesive and committed group of former students who are active in a variety of ways in supporting the work of the medical school.</li> </ul>							
In case	of accredited programme, significant accomplishments and/or progress						
0	Significant accomplishment and/or progress made by the programme after previous accreditation (If Applicable)						
Evaluat	ion						
	ease mark the checkbox which mostly describes your position related to the programmes ance with this specific component of the standard						
⊠ Complies with requirements							
$\square$ Substantially complies with requirements							
	$\square$ 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

Academic staff, students are involved in quality assurance self-assessment groups. As well as in committees and councils for planning, implementing, management and managing training programs (e.g. the Rector's Council, Curriculum Committee, Faculty Council); it is also important and very useful for their curriculum revision and / or participation in working groups created for other special (specific) purposes.

For the purpose to provide a "quality" feedback from the employers' on program, learning outcomes, and other issues, the University invites employers (potential) in faculty activities including career days; student conferences, formal and informal meetings, with the purpose of joint work and feedback. The University facilitates the invitation of employers to participate in lectures and seminars and discuss real situations; which creates the preconditions for their informed participation and quality feedback in the development of the program.

Monitoring and periodic evaluation of programs is also continuously implemented.

#### Evidences/indicators

- Self-Evaluation Report
- Interview with University Administration team, Self-Evaluation team, Head of Programme and Programme Coordinators, Academic Staff, PBL Tutors, Invited Staff, University & Faculty QA, Employers, Students and Alumni.
- o Employers' Opinion on Certified Medication Graduates Competencies, Tbilisi, 2019
- Self-Assessment Report 2015\_2016 (Appendix # 50)
- Self-Assessment Report 2016\_2017 (Appendix # 51)

#### Recommendations:

o None

#### Suggestions for programme development:

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

 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	X			
enhancement				
opportunities				

Enclosed Documentation (If Applicable)

HEI's Name: LLC David Tvildiani Medical University

Higher Education Programme Name: Medical Doctor (e-PBL)

Number of Pages of the Report: 40

# Programme's Compliance with the Standard

Standard	Complies with Requirements	Substantially complies with	Partially Complies with	Does not Comply with
		requirements	Requirements	Requirements
1. Programme objectives are clearly defined and achievable; they are consistent with the mission of the HEI and take into consideration labour market demands	X			
2. Teaching methodology and organization, adequate evaluation of programme mastering	X			
3. Student achievements and individual work with them	X			
4. Providing teaching resources	X			
5. Teaching quality enhancement opportunities	x			

# **Expert Panel Chair's**

Mairi Scott

**Expert Panel Members'** 

Dr Ia Pantsulaia, signature

Dr David Jikia signature

Mr Vakhtang Tebidze signature