განათლების ხარისხის განვითარების ეროვნული ცენტრი
NATIONAL CENTER FOR EDUCATIONAL QUALITY ENHANCEMENT

Accreditation Expert Group Final Report on Higher Education Programme

One-Cycle Educational Program of Medical Doctor

Caucasus University LLC

Dates of Evaluation: November 8-9, 2022

Report Submission Date: January 10, 2023

Tbilisi

HEI's Information Profile[1]

Name of Institution Indicating its Organizational Legal Form	Caucasus University LLC Limited Liability Company
HEI's Identification Code	205050567
Type of Institution	University

Higher Education Programme Information Profile

Name of the Programme	Medical Doctor
Level of Education	One-cycle
Qualification Granted[2]	Medical Doctor
Detailed field and Code	0912 Medicine
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)	New

Expert Panel Members

Chair (Name, Surname, University/organization/Country)	Mihály Boros, Professor, Albert Szent-Györgyi Medical School, University of Szeged, Hungary
Member (Name, Surname, University/organization/Country)	Tinatin Gognadze, Professor, Head of the Medical Doctor Program European University, Georgia
Member (Name, Surname, University/organization/Country)	Tamar Goderidze, Associate Professor, University of Georgia Medical School, Tbilisi, Georgia

---

[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)	Dr Irakli Gagua, Gagua Clinic, Georgia
Member (Name, Surname, University/organization/Country)	Giorgi Mgvdeladze, PhD student Tbilisi State Medical University, Georgia

Accreditation Report Executive Summary

- **General information on the education programme**

This summary report was written by the Expert Panel appointed by the National Center for Educational Quality Enhancement (NCEQE) of Georgia. The regulations and guidelines relating to procedural or academic matters of the program are clear and these have been made fully available for the Expert Panel. The one-cycle 'Medical Doctor' program of the Caucasus University, Tbilisi, Georgia (CU, thereafter) is planned to be launched in Georgian language. The program as a whole is aligned with the European Credit Transfer and Accumulation System (ECTS) and includes 360 ECTS credits (one credit corresponds to 25 hours), the duration is six academic years with 12 semesters. Each academic year consists of Fall and Spring semesters with 20 weeks, each; hence each academic year is scheduled for 40 weeks. The program is planned in accordance with the law of Georgia on higher education, the updated framework of national qualifications and the current sectoral characteristics of higher medical education defined by NCEQE. It is based on the Global Standards for Quality Development of the World Federation of Medical Education (WFME, 2020) and the guidelines of the Association for Medical Education in Europe (AMEE). A compulsory B2 level study course of English language is included in the program.

According to the descriptive statistics provided by the Institution the number of academic and invited staff is currently n=91 (34 academics and 57 invited staff members, without the employment of scientific staff), the number of administrative and support staff is n=43. The program has not been started, alumni or employer feedbacks of the program are not available yet.

The Expert Panel agreed that the admission numbers and the student-tutor ratios are adequately planned for the start of the educational program with matching teaching methods. The HEI defined the content, extent and sequencing of courses and described the curricular elements, including the balance between the core and optional contents. The components of programs are in harmony with the mission statement of the HEI. The HEI utilizes several standard and modern methods and technologies for measuring the learning outcomes (LOs), in general terms these are clearly and logically distributed and comply with the goals of the programs. As a whole, the structure is sound and clear, and makes the analysis easy.

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

The evaluation of the one-cycle Georgian-language MD program of the Institution was based on the Self-Evaluation-Report (SER), supporting documentation and a site-visit to the Institution. The SER and associated documents were received by the Expert Panel on September 28, 2022, and the available data were evaluated according to Accreditation Standards. Each of the Panel Experts accepted 1 or 2 Standards for which they had targeted expertise and agreed to take a lead role in the review process.

Overall, the documentation submitted in both Georgian and English versions was well organized and easy to follow. The documents included the presentation of subjects of study in a chronological order (syllabi) as well. Information on the amount of ECTS points for each subject in a semester, tutors, trainers, and their qualifications/experiences (CVs) were also presented. It was found that the SER was constructed according to the NCEQE Standards, and the datasets contained sufficient information to judge the quality of the program.

The agenda was agreed beforehand and the whole process of the site-visit was realized between November 8-9, 2022, when the Expert Panel was provided guidance by the NCEQE and held organized meetings with the representatives of the stakeholders. On November 8, 2022, the CU campus was visited (the library, pathology – anatomy – biochemistry laboratories, the skills lab, seminar rooms and the students' areas for dining, relaxation and self-study and other relevant areas for MD program) accompanied by the Director of Quality Assurance (QA) Department, Dean of Caucasus Medicine and Healthcare Management School and the Programme Coordinator. Next, a tour was organized to the Hospitals involved in clinical training (Eristavi National Center of Experimental and Clinical Surgery and Center for Mental Health and Prevention of Addiction). On Day 2 a meeting was organized with CU Administration (the President, Vice-President for Academic affairs, Director of Quality Assurance Department and the Dean of Caucasus Medicine and Healthcare Management School were present), followed by a series of meetings, personal consultations with the members of the Self-Evaluation Team, the head of the Program, representatives of the academic staff, invited staff, practice tutors/supervisors, local students (from 1-3rd years of the accredited English-language MD Program), alumni (from graduation years 2019-2021 of the Healthcare Program); employers and finally with the Director of the QA department. Thereafter the Panel held a closed meeting to conclude on the Standards and prepare for the panel report and the feedback session with representatives of the HEI when the initial findings were presented. It must be noticed that all discussions, meetings, and visits took place in a positive and helpful atmosphere.

Nevertheless, the experts identified a list of documents which would offer additional information (e.g. data on the 5-years work certificates for persons who are supposed to teach clinical subjects, memoranda with the clinics involved in Georgian MD program, contracts with academic- and invited staff members involved in the Georgian MD program) and therefore, the analysis was extended further with data provided by the HEI through NCEQE after the site visit to the Institution. These were received on November 09, 2022, through NCEQE (New Folder - Required documents), November 11, 2022, and November 18, 2022 (New Folder - Required documents folder's subfolders). The complete list of additional documents requested and received (and made available in subfolders of „New Folder") is as follows:

- Contracts (in English and Georgian language),
- Methodology to determine personnel numbers,
- Memoranda with clinics,
- Clinical component staff,
- Invoices (e.g. procurements of simulators),
- OSCE,
- School board,
- Clinical supervisor functions,
- Thesis defence,
- Curriculum mapping,
- Market analysis survey,

- Governing board, structural units and subdivisions,
- Components of the programme,
- Student contingent planning methodology,
- Student representatives' election,
- Staff and professional development,
- Strategic and action plans,
- CMS MED GEO

Here, it should be noted that most of the members of the Expert Panel (MB, TG - Tamar Goderidze and GM) have already participated in the evaluation process of the English language, accredited, one-cycle educational MD program of CU when in addition to a detailed overview of the whole structure, two clinical educational - teaching bases, the Reymann and Todua Clinics were also visited (on February 3-4, 2022). By this way - and due to the extended background knowledge and in-depth information - the Expert Panel had possibility for comparisons, too - to evaluate the extent to which the previously formulated proposals and suggestions have been considered by the Institution. Because it could be ascertained that delivery and assessment and other essential elements of the English and the Georgian language MD programs are almost identical, we have refrained from repetitions if the observed situation or positions relative to the Standards did not differ or have not changed significantly. In such cases, we refer to the previous (dated March 22, 2022) Expert Report, and advise to take the analytical results into account, again.

The Draft Accreditation Report was submitted to NCEQE on December 19, 2022. The argumentative position of the University (Answer and Appendix folders containing 2 and 7 doc. files, respectively) was received on December 31, 2022, and all the data, arguments and claims presented by CU were examined and discussed by the Expert Panel. It was found that Recommendations 2.4.1 (guidelines for the defence of the coursework) and 4.1.3 (staff CVs) of the Draft Report have been addressed; the HEI provided all the necessary documents; therefore, these items could be considered fully implemented and were removed from the list of recommendations presented in the Draft Report.

For Recommendation 4.1.4 we have changed the position and it is now presented as a Suggestion (see below), as requested by the HEI. We note, however, that a specific working group, set up for the particular purpose could greatly assist the educational development, and therefore we strongly suggest the HEI to take the suggested action.

For all the other comments, including the proposed changes to Recommendations 2.2.1; 2.3.3; 2.4.2; 2.6.1; 4.1.1; 4.2.1; and 4.3.1. no amendments were necessary. The unanimous view was that the arguments presented by the CU do not contain new factual elements, they are mostly opinion-based and therefore no further changes were made to the Draft Report.

Finally, the panel would like to thank the representative of the NCEQE, for all the help and support provided before, during and after the site-visit.

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

The application for authorization is aligned to the Accreditation Standards for Higher Education Institutions, the Law of Georgia on Higher Education and Medicine Sector Benchmarks for Higher Education. The external peer-review-based evaluation considered point-by point the undergraduate curriculum from this perspective; the educational and training processes employed; the educational methods, facilities, resources, and techniques; the evaluation process and criteria of the end product of

education and training. Overall, the HEI has made good progress towards achieving accreditation and the report reflects that. The experts of the Panel expressed a common view that the CU demonstrates a solid foundation for the start of preclinical studies which will provide stable background for the clinical courses. With respect to the current status, the Expert Panel identified many further strengths of the Institution, as follows:

- strong and committed leadership with clear Vision; deep commitment and determination to be successful;
- supportive and well-trained administration; enthusiasm and commitment to the values expressed in the Vision;
- high-quality academic and invited staff; interested clinical staff; commitment of staff members as a whole to teaching;
- the linking of theoretical and clinical parts of the program in the early years particularly through the activities of the Skills Center is a good example of the development of transferable skills regardless of professional boundaries.
- the program can be built upon an existing, authorized education system within a University with international recognition.

There are some items, however, where the program components are not fully complying with the requirements, and there are some suggestions in these directions intended to support progress. Nevertheless, the Expert Panel is fully convinced that the Institution has the capacity to improve these shortfalls in the near future.

Standard 1. Educational programme objectives	Complies
Standard 2. Teaching methodology	Substantially complies
Standard 3. Student achievements	Complies
Standard 4. Providing teaching resources	Substantially complies
Standard 5. Teaching quality enhancement	Complies

Summary of Recommendations

2.2.1. It is recommended to review and arrange the study courses in the program into a logical sequence.

2.3.1. It is recommended to bring the competency map in compliance with course/module syllabi.

2.3.2. It is recommended to update and replace mandatory literature with new or Georgian-language editions, or to make handouts that will be available in both electronic and printed form.

2.3.3. It is recommended that the contact and independent hours be reviewed and adjusted to better achieve the appropriate course outcomes.

2.3.4. It is recommended to check and correct the data (times, etc) presented in syllabi for accuracy.

2.4.2. It is recommended to hire specialist / tutors in the clinical skills laboratory, who will support students' learning process and satisfy their needs.

2.6.1. It is recommended to use OSCE and other modern assessment methods for evaluating learning outcomes/competences in clinical subjects.

2.6.2. It is recommended to assess all learning outcomes and competencies in study courses.

2.6.3. It is recommended to review the number of assessment methods of all syllabi to be adjusted according to the duration of the course and contact hours.

4.1.1. Contracts with all the clinics involved in the educational activities should be presented.

4.1.2. Academic- and invited staff should be trained regularly (once every 2 years) in the methodology of medical education, which should be confirmed by a relevant certificate. These certificates should be presented in the personal files. Training the lecturers according to the sector benchmark requirements should be demonstrated.

4.3.1. It is recommended to remodel the clinical skills laboratory for practice and trainings. The space for the appropriate simulation rooms should be increased and technical aids, manikins, simulators should be provided corresponding to the increased number of students.

4.2.1. Continuous and systematic monitoring of research activities and results is recommended to help improve the quality, national and international visibility of the program.

Summary of Suggestions

1.1.1. Increase partnership with foreign institutions, contract visiting teachers (professors, lecturers) who contribute with additional expertise through e-learning, webinars or on-site.

1.1.2. The ratio of contact and non-contact hours of student works required to achieve a given set of learning outcomes needs to be defined - and if necessary, adjustment is needed, to guarantee that the required LOs can be obtained.

1.1.3. The HEI must have a clear policy that fosters the relationship between medical education and medical research. Plans should be set in a Scientific Strategy.

1.2.1. The Skills Lab is expected to be used as starting points to increase the weight of practical training, and therefore short and long-term development strategies are suggested.

2.2.1. It is suggested to increase the vertical integration of the program.

2.2.2. It is suggested to comply with the total number of contact and independent hours reflected in the program, corresponding to the requirements for medical programs, i.e. not less than 5,500 hours.

2.3.1. It is suggested to improve the practical component and the lab work of study courses Biochemistry and Physiology.

2.5.1. The creation of a case bank for PBL/CBL will be a good investment for future sustainability as it will enhance the scale, scope, and quality of the cases available to the students.

2.5.2. Intensive use of modern teaching methods is suggested.

4.1.4. A committee or working group is suggested to coordinate the design of the extended OSCE checklists.

5.1.1. The University is expecting an increasing flow of students and the current English language MD program is also in high demand from students, therefore it would be desirable to increase the number of simulation training rooms, add clinical bases and focus on the inclusion of additional medical personnel in basic or clinical disciplines.

5.2.1. Thanks to the great progress made and the active enthusiasm, the programme and its qualitative results could be comparable at international level.

Summary of best practices (If Applicable)

- The intention to embed 'Quality Culture' across the whole process of education with all staff members and students be involved in the maintenance and delivery of this culture is to be commended.
- Some specific areas of good practice within the educational process are also identified, such as the inclusion of audio-visual methods encouraging interactivity (such as TED Talks in English language courses) or the organization of annual student scientific conferences.

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 Mission and Vision of Caucasus University LLC (CU, thereafter) are well defined and clearly set out the nature and direction of the stated values. They aim to develop and implement a high-quality Georgian language MD program which is focused on producing graduates with the knowledge, skills and attitudes that will enable them to deliver high quality healthcare in Georgia and in other countries too. The statements also indicate the outcomes they are seeking to embed into not only their students but the whole medical community as well. Both the Mission and Vision statements describe the University's commitment to having an international focus and describe a goal to be a recognized HEI with a reputation as a competitive and reliable partner in the healthcare and higher education field in Georgia. It is important to note that the senior staff was well able to not only describe the Mission and Vision but also give contextualized examples of how they are being applied. The Institution has defined the curriculum model and the instructional methods to be employed and additional feedback from professional organizations was also considered during the development phase. Within this framework, the HEI listed 5 main objectives to be accomplished, as follows:

1. Fundamental biomedical knowledge, which at a later stage will enable the students to deepen their knowledge and master practical skills in any field of medicine, pursue a postgraduate degree, or choose a scientific or teaching activity;

2. Acquisition of practical skills necessary for consulting and examining the patient, for carrying out instrumental and laboratory examinations, data collection, differential diagnosis of critical analysis and treatment;

3. To develop ethical values and an honest and caring attitude towards the patient, the combination of deep professional knowledge, practical skills, clinical thinking and ethical principles;

4. To develop students' skills of scientific research, adequate evaluation of evidence, critical analysis of research, and establishing a close link between medical practice and science;

5. Active promotion of the student's self-assessment skills, ability of independent learning and self-education, to develop qualities of an active member and leader of the future medical team, which is necessary for high level medical practice and for active participation in public health affairs.

These objectives illustrate the commitment and contribution to the development of the field and the society, and the plans took the local labour market demands also into consideration. In brief, successful completion of these (1-5) objectives is ensured by the courses and modules presented in the documentation, the objectives are realistic and achievable, with no major difficulties or obstacles to launch the program.

Planning and designing of the Georgian-language program were collaborative, involving several key actors, including the compilers of the SER and future practice trainers, ample evidence was provided

in this respect The participatory process was coordinated and regulated; the HEI considered the previous experience they had gained in designing and running the English-language MD program. The Expert Panel evaluated the undergraduate Georgian-language curriculum, the planned educational processes (methods, facilities, human and technical resources, the criteria of the end product of education and training, etc.) from several perspectives and paid particular attention to comparing the findings with the previous (2022) assessment results of the accredited English-language MD program of CU. There is a clear intention to cooperate with foreign institutions, and this partnership will need to be actively increased.

The program as a whole is aligned with the European Credit Transfer and Accumulation System (ECTS) and corresponds with Georgian and international standards: it is not only knowledge- but competence-based. It was found that the components are in harmony with the mission statement of the Institution and follow a logical sequence. The practice-based aspects, the practical parts of clinical subjects and more directly, the individually developed technical - procedural skills and the access of students to bedside clinical practice seems to be guaranteed. In summary, the design of the program seems to be appropriate but as concerns elaboration and developments, careful, continuous checking of performance data is needed with regular feedback reports in the early implementation phase.

The program is vertically and horizontally (partially) integrated. The curriculum is based on collaborative group learning, active personal self-learning, and intensive acquisition, demonstration, and evaluation of practical skills in simulated and real-world scenarios. In addition to bedside-teaching, early learning of research methods and communication skills, considerable attention is paid to the synergistic use of virtual simulation technologies, computer and video presentations, role-playing and problem-based and case-based learning. Particular attention is paid to the flipped learning method.

Within this scheme the 360 ECTS of the program consists of:
● Mandatory courses – 350 (ECTS), among them:
- Integrated modules - 76 (ECTS)
- Basic/Preclinical courses - 86 (ECTS)
- Clinical courses - 150 (ECTS)
- Clinical rotation – 13 (ECTS)
- Clinical internship – 15 (ECTS)
- Scientific skills - 10 (ECTS)
● Elective courses (10 ECTS)

The syllabi of the compulsory and elective courses gave sufficient information on the structural components of the program with the number of credit hours allocated per courses. One ECTS equals 25 credit hours, which includes contact hours (classes, seminars, practical etc.) as well as independent hours of work. According to the regulations, individual workload allows less than 60 credits/year but not more than 75 (during the 6 years, students are allowed to take only 15 ECTS credits additionally). Here it should be noted that in some cases the amount of independent work required to finish the course successfully is very high. Random sampling demonstrated that this ratio reaches up to two thirds of the total workload in certain cases, as shown below:
- Medical Biophysics (MEDG 1017): 67 hrs are spent for other activity (= 67% non-contact hours),
- Syndrome Based Diagnostics (MEDG 6121): 150 hrs total with 45 contact hrs (= 70% non-contact hrs)
- Clinical Skills: 100 hrs in total, 5 hrs exams and 67 hrs of other activity (= 72 % non-contact hours)
- Geriatrics (MEDG 6123): 100 hrs total, with 75 hrs of other activity (= 75 % independent work).

Certainly, the ratio of contact and non-contact hours of student works required to achieve a given set of LOs is depending on many factors, but continuous monitoring and evaluation - and if

necessary, adjustment- is needed, if the proportion of non-contact hrs exceeds a commonly agreed, pre-defined level (such as 50% or 60%), to guarantee that the required LOs can still be obtained. Development of priority areas - innovative and personalized services based on future technologies and bringing up competent, ambitious professionals with exemplary ethical-professional values - is involved in the description of qualification characterization of the program. In this context, CU has indicated its commitment to the development of medical science and scientific research, but important details of the policy are missing. More directly, plans with emphasis on specific research areas (e.g. 'basic science' or 'clinical studies') and definitions of priorities (e.g. 'primary healthcare, 'innovative and personalized services based on future technologies', etc.) are needed to strengthen the scientific component of the program. According to SER the scientific/research output of the program's staff for the last 5 years currently involves n=189 publications with n=89 publications in international journals. Nevertheless, most of these communications cannot be linked directly to medical sciences. Therefore, the scientific elements on the fields of human medicine and the adjoining activities must be strengthened with specific, short (1-2 years) and longer-term plans (5-10 years), strategies to encourage scientific research (esp. done by preclinical scientists, clinicians, young or established senior researchers; plans to support cooperations; plans/funds for a chosen research project, plans for the development of scientific/clinical research infrastructure, etc.), and these specific plans should be set in a Scientific Strategy.

Evidences/indicators

- SER
- Annexes (submitted documents)
- Educational program
- Interviews

Recommendations:

- –

Suggestions for programme development:

- Increase partnership with foreign institutions, contract visiting teachers (professors, lecturers) who contribute with additional expertise through e-learning, webinars or on-site.
- The ratio of contact and non-contact hours of student works required to achieve a given set of learning outcomes needs to be defined - and if necessary, adjustment is needed, to guarantee that the required LOs can be obtained.
- The HEI must have a clear policy that fosters the relationship between medical education and medical research. Plans should be set in a Scientific Strategy.

Best Practices (if applicable):

- –

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

- –

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 learning outcomes (LOs) of the program are systematically described in the SER and the "CMS MD Program" document. On the basis of the National Qualifications Framework (NQF) evaluation criteria and the integration of competencies in the field of medicine, dividing 3 NQF domains (Knowledge and Understanding, Skills, and Responsibility and Autonomy) into 14 outcomes aligned with 14 competencies in the National Benchmark of Higher Medical Education of NCQE, a detailed "Program Learning Outcomes Assessment Schedule" is presented, where the courses by which the assessment is done are presented, together with the forms of assessment, assessment targets, and the timing for data collection (timelines). In this scheme all LOs will be assessed twice, what will allow, after the first assessment, to review the teaching/learning methodology and / or also the assessment methodology itself and make necessary changes in the program, if needed.

The program LOs clearly describe the minimum competences required for graduation, but it is important to note that the current evaluation assesses plans, the program does not have graduates and there is no feedback from alumni. Nevertheless, these plans are well formulated, and the efficiency of implementation can be judged with exact performance indicators once the program is up and running. In this scheme versatile and efficient evaluation methods are planned, including oral exam, written test / quiz, demonstration of practical skills (on simulators/mannequins, patients or standardized patients), Objective Structured Clinical Examinations (OSCEs) - in midterm evaluations Mini-OSCEs (where the number of stations can be 5-6 and in the final exam 11-12), Objective Structured Practical Exam (OSPE) for laboratory and/or instrumental investigations in preclinical sciences, like physiology, biochemistry and pathology. WPBA (Workplace Based Assessment) is intended to be used in clinical training, with Direct Observation of Procedural Skills (DOPS), Case Based Discussion (CBD), Mini Clinical Evaluation Exercise (Mini-CEX), and Case-Based Discussion. The matching number of preclinical and clinical tutors, their skills, the selection

criteria of supervisors and the capacities of the clinical hospitals were demonstrated sufficiently (and determined by contracts).

Students can acquire basic technical/practical skills in the simulation centre (Skills Lab) of the Medical School, which is clearly a significant advantage and an exceptional opportunity for preclinical and clinical educators, too. It seems likely that the current environment meets the basic demand of preclinical courses and the integration of procedural knowledge obtained during simulation skills training into the presented clinical curriculum is possible, but the technical background can be developed further with diagnostic and technical/interventional possibilities. Besides, it would be important to develop repeatedly the sets of practical procedures that the students must master by the end of the study program. Briefly, the Skills Lab is expected to be used as starting points to increase the weight of practical training, and therefore short and long-term development strategies are suggested.

A student portfolio has been introduced where individual achievements will be recorded from the first semester and will allow the self-assessment of academic development and finding the ways for progression. From March 2023 ePortfolio is planned as well, to be employed for long-term evaluation of student activities (in the CMS electronic platform) and will be used in 5 basic and 10 clinical disciplines. From 2024 there will be a transition from the pilot phase to the full use and the portfolio's share in the rating system will be increased.

In summary, a range of valid performance indicators is considered by the HEI and the planned educational program can safely proceed according to commonly accepted principles of evidence-based medicine. Analytical and critical thinking is taught throughout the curriculum, which may also allow students to participate in the scientific development of the profession. Besides, the program incorporates contributions of behavioural and social sciences and ethics that - in theory - enables effective communication and decision making in clinical practice. To sum up, proper integration between basic medical sciences and clinical subjects seems to be guaranteed and this process should provide the enrolled students skills to assume appropriate clinical responsibility upon graduation and to continue their professional development. The professional content and structure of the training, the teaching and learning support methods used are up to date, meet the professional requirements and are suitable for achieving the intended LOs. However, it is important to note again that there are no comparative performance data and as an early warning, certain monitoring linkage must be assured between the preclinical and clinical parts of the educational program (the subsequent stage of training and practice that the student will possibly enter after 3rd year) to promote an uninterrupted teaching and learning process, and to ensure harmony between plans and reality.

Evidences/indicators

- SER
- Annexes (submitted documents)
- Educational program
- Interviews

Recommendations:
o –

Suggestions for programme development:
o The Skills Lab is expected to be used as starting points to increase the weight of practical training, and therefore short and long-term development strategies are suggested.

Best Practices (if applicable):
o n/a

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

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	X			

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

Prerequisites for admission to the MD program of CU are transparent, but the program is new and therefore it is not accessible through the University's website yet. Nevertheless, this point was confirmed by reviewing the self-evaluation report and the supporting documentation provided as evidence and interviews with the University administration team.

Pre-requisites for enrolment in the Program are:

· Certificate of general education or an equivalent (secondary education) document.
· A document certifying the passing of the Unified National Examinations in accordance with the rules approved by the Ministry of The Minister of Education and Science of Georgia.
· Overcome the minimal competence threshold as set at the Unified Entry Examinations.

Admission/enrolment without passing the unified national exams and the right of studying is regulated by The Minister of Education and Science of Georgia.

Enrolment of students through mobility procedures is possible twice per year, within the prescribed deadlines and necessary procedures as specified by The Minister of Education and Science of Georgia.

Persons identified in the Article 52 Paragraph 3 of the Georgian Law on Higher Education:

· Foreign citizens and stateless persons who have received general secondary or equivalent education in a foreign country.
· Georgian citizens who acquired general secondary education in a foreign country or have completed the last 1 year of general secondary education abroad.
· Foreign or Georgian students who have studied in a foreign country for at last 1 year at a higher educational institution recognized by the legal regulations of the country concerned.
· Admission/enrolment without passing the Unified National Examination is regulated by the acting legislation. Students from foreign countries are required to hold Georgian language certificate B2 level. This regulation ensures admission of the students with relevant knowledge, skills, and competencies required for mastering the program.

Evidences/indicators

- Educational Program
- Self-Evaluation Report
- Interview results
- CU website: https://cu.edu.ge/ka/schoolss/chs
- Law of Georgia on Higher Education

Recommendations:
○   -

Suggestions for programme development:
○   -

Best Practices (if applicable):
○   -
In case of accredited programme, significant accomplishments and/or progress
○   -

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 one-cycle program of Medical Doctor (MD) of CU is developed in accordance with sector benchmarks of higher education of Medicine, with program development methodology of Caucasus University and the mission of the University. The program comprises 360 ECTS (9000 hours in total). 60 ECTS per year; 29/ 30/ 31 ECTS per semester. The duration of the program is 6 years/12 semesters. Each academic year consists of two semesters - Fall and Spring; each semester comprises 20 weeks; among them study weeks are 14, midterm exam – 8th-9th week, final exam - 17th-19th week, additional exam – 20th week. Each academic year is scheduled for 40 weeks. 350 credits are mandatory, 10 credits are elective. One ECTS equals 25 credit hours, which includes contact hours (classes, seminars, practical etc.) as well as independent hours of work. Total amount of contact hours of the program is 3955, independent hours = 5045.

Individual workload allows less than 60 credits per year but no more than 75 (during the 6 years, students are allowed to take only 15 ECTS credits additionally), that is in line with the rule of credit distribution, the Order №3 of the Ministry of Education of Georgia.

The educational program Medical Doctor is partially integrated. The program consists of Integrated Modules - 76 (ECTS), Basic/Preclinical courses - 86 (ECTS), Clinical courses - 150 (ECTS), Clinical Rotation – 13 (ECTS), Clinical Internship – 15 (ECTS), Scientific skills - 10 (ECTS), Elective courses (10 ECTS).

Basic (Preclinical) teaching (I - III years), which in the I-II courses includes natural sciences, English language and horizontally integrated modules on the structure and functions of body systems (anatomy, histology, physiology, biochemistry), which are synchronized according to organ systems. The syllabi of these modules integrate the development of practical skills in biomedical research in the first 4 semesters, and the first aid module is implemented both at the patient's bedside and in the clinical skills laboratory, to which the first course of clinical skills is added from the second semester. From the very beginning of the first year of the Clinical, Research and Communication Skills Curriculum, the initial level of these extremely important elements for the future doctor is established by taking into account the requirements of the national qualification and field regulatory benchmarks.

From the 3rd year - at the stage of clinical training, the subjects of pathological structure and function of disease development, introduction to therapy and surgery (propaedeutics) are taught.

From the 4th year special clinical courses are introduced. Using a spiral training, pre-clinical subjects (pathology / histology, pathophysiology / biochemistry, microbiology, immunology, genetics, pharmacology) are replicated with basic knowledge elements and practical skills and already linked to the clinical context. The curriculum includes courses in clinical radiology and clinical pharmacology. At the same time, clinical and scientific skills are being taught, refined, and modelled on the most important ethical values, attitudes, and professionalism for the physician. From the 4th year clinical courses (Dermato-venerology, Neurology, Otorhinolaryngology, Gynecology, Infectious Diseases, Urgent surgery, Urology, Ophthalmology, Oncology, Child Infectious Disease, Medical Rehabilitation, Family Medicine, Clinical radiology and Clinical pharmacology) are basically taught separately that makes us to suggest to increase integration, such as for example possible integration of clinical pharmacology or clinical radiology with some of clinical courses.

During the planning and developing of the Georgian program, some recommendations which expressed during the accreditation process of the English language MD program were already considered by the Institution. These were mainly related to the program structure and curriculum. However, some issues still need to be improved as shown below:

- It is good practice that "Pathology" training course in the program starting from the 3rd semester and continues for 4th semester, which will further facilitate the integration of student's knowledge. However, the mentioned semester sequence does not thematically follow the normal study structure. For example, the topics in Pathology 1 needs the knowledge of microbiology, which is starting from the 4th semester according to the presented curriculum.
- Also, the training course "First Aid" is teaching the in the first semester at the I. Tsitsishvili Children's New Clinic. In the course a student learns cardiopulmonary resuscitation, direct and indirect heart massage, emergency management, while the normal structure and function of the cardiovascular system is starting from the II semester.
- The „Parasitology "course in the program is taught in the 7th semester, but it would be better to teach it in earlier semester, close to microbiology.
- The module "Body System" is integrated, the modules are based on the structure and functions of body systems (anatomy, histology, physiology, biochemistry) and are synchronized according to organ systems by 5 parts. According to the curriculum a student is studying Body Systems I (Nervous System) and Body Systems II (Respiratory & Cardio-Vascular System) in the second

semester parallel of each other. Same is the case in Body Systems IV (Urine & Reproductive System) and Body Systems V (Special Sense Organs) – these modules also are taking place in parallel at semester 5. To achieve the intended LOs of each study course, it is recommended to distribute the modules over the semesters so that one body system is studied in one semester.

Evidences/indicators

- o Educational program
- o Syllabi
- o SER
- o Interview results

Recommendations:

- It is recommended to review and arrange the study courses in the program into a logical sequence.

Suggestions for programme development:

- o It is suggested to increase the vertical integration of the program.
- o It is suggested to comply with the total number of contact and independent hours reflected in the program, corresponding to the requirements for medical programs, i.e. not less than 5,500 hour (see: EUR-Lex - 32005L0036 - EN - EUR-Lex (europa.eu) Section 2, Doctors of medicine, Article 24.)

Best Practices (if applicable):

- o -

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

- o -

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

2.3. 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

The educational MD programme is partially integrated, study courses in the curriculum are based on the pre-requisite knowledge and skills already acquired. All syllabi were reviewed with focus on prerequisites for admission, learning goal and outcomes, number of credits indicating contact and independent hours, assessment methods, teaching and learning methods, content of the academic course, the mandatory and additional study materials are indicated in all syllabi.

Syllabi are formatted similarly across the curriculum, and each provides detailed information on the content, pedagogy, assessment, and general behavioural expectations. The course documentation provides evidence of compliance with the standards and alignment of all module's learning outcomes as well as program learning outcomes. Credit allocation is fully appropriate. All learning outcomes of the courses are defined as general and field competencies, based on the sector benchmark.

The competency map illustrates the three learning outcomes 1 - Introduction, 2 – Deepening, 3 – Reinforcement, which demonstrates student's progression. Some remarks, are, however, necessary. According to the map of body systems courses these do not give to students the competency of effective communication, when the learning outcomes of these courses describe the skill of communication it is stated that: "student presents the results of its research, arguments and conclusions to both the academic and professional community, in the form of a proper presentation" and "assessment system uses evaluation of verbal presentation".

The required mandatory literature in the syllabi is available for students electronically online, but most of them are rather old (დავით მიქელაძე., 2009; რუხაძე რუსუდან, - ჰისტოლოგია, 2009, პირველადი გადაუდებელი დახმარება 1998, კილასონია, ბესარიონ - სასამართლო მედიცინა 2011, ალ. ალექსიძე. თბ., 2003, კუტუბიძე, რამაზ - ბავშვთა ქირურგია : სახელმძღვ.. - თბ., 2003).

In some study courses, only English-language literature is specified as mandatory literature, when the student cannot confirm the English B2 level knowledge yet (Clinical skills I). In these cases, it will be better if books in Georgian language were made compulsory.

The distribution of contact hours in the syllabi is usually 1 hour of lecture and 2 hours of practical training. However, depending on the difficulty of some of the courses, 2 hours is not always enough to achieve the intended learning outcome of the course (Neuroanatomy, Neurophysiology, Biochemistry).

The syllabi of compulsory and elective courses give clear information on the details of the program and the number of ECTS/credit hours allocated per course. Indeed, the number of contact hours is depending on the different teaching-learning methods and varies according to the content of the course/module/clinical clerkship and the LOs. Nevertheless, the ratio of contact and independent hours in some courses needs review: Body System I – 61/139 hours, Body System V – 33/67 hours, Traumatology and Orthopaedics – 50/100 hours, Critical Care & Emergency Medicine – 50/100, Allergology & Clinical Immunology – 50/100.

Besides, it appears that data (time of activities, duration of exams, lectures, practicals, etc.) presented in the syllabi should be examined and checked for accuracy (underline examples are shown below following random sampling):

- In case of Course Work (Syllabus MEDG 6126, page 1) 20 hrs of Class is shown („the visit with the supervisor") but on page 6 the duration of "Visit" is = 21 hrs.

- History of Medicine (MEDF 003) the duration of lecture/practical/exam/other is 7 / 14 + 5 + 24 = 50 hrs, while in the academic calendar and course overview 2+2 hrs midterm/final exam and 22 hrs class/lecture hours are shown.
- Basics of Demography (MEDF002) with 24 hrs + 2 hrs midterm/final exam + 24 hrs; in academic calendar 2 + 2 hrs midterm/final exam, 21 hrs of lecture is presented, while in Course overview 24 hrs lecture and 2+2 hrs exams are shown.
- E-health (MEDF011) course with 2 ECTS and 50 hrs - in the academic calendar 35 hrs are shown, while in the summary (page 1) 21 hrs class, 8/18 hrs lecture/practical, 5 hrs exam and 44 hrs 'other' are listed. Moreover, in this case the Course overview (page 6) which lists the activities from day 1 to day 12, the sum of lectures and practicals and exams will be 26 + 6 (and the latter includes even the hours for „additional exam").
- Hospital management (MEDF 008) with 50 hrs: on page 1 the details are 7 + 14 + 3 + 24 hrs = 48 hrs, without midterm exam (and midterm exam is not included in the Course overview, either).

Evidences/indicators

- o Educational program
- o Syllabi
- o Curriculum map

Recommendations:

- o It is recommended to bring the competency map in compliance with course/module syllabi.
- o It is recommended to update and replace mandatory literature with new or Georgian-language editions, or to make handouts that will be available in both electronic and printed form.
- o It is recommended that the contact and independent hours be reviewed and adjusted to better achieve the appropriate course outcomes.
- o It is recommended to check and correct, if necessary, the data (time of activities, duration of exams, lectures, practicals, etc.) presented in syllabi for accuracy.

Suggestions for programme development:

- o It is suggested to improve the practical component and the lab work of study courses Biochemistry and Physiology

Best Practices (if applicable):

- o –

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

- o –

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

2.4 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

The documents attached to the MD educational program demonstrate that the program ensures the development of the practical and scientific research skills of the students.

- Practical skills are developed at preclinical and clinical stages. The development of necessary clinical skills in the preclinical phase of the program is ensured mainly by the course "Clinical practice 1, 2, 3, 4" and "First Aid".
- The University has established a clinical skills laboratory to promote practical skills development. The development of clinical skills at the clinical stage is ensured by the core Clerkships. The city's leading medical - diagnostic facilities are involved in the program implementation based on contracts/memoranda. The University conducts clinical activities in more than twenty clinics. Interviews with the administration revealed that CU is building a new, multi-profile, 120-bed clinic within a radius of 600 m from the campus and equipped with the latest medical and technological standards, which will start operating in 2026 and will become the main clinical base for the University's medical program.
- During the interview with students from English MD program (Georgian program is new and does not have active students yet) it has been stated that they have access to the departments of health care providers, where supervisors support them. However, interviews with supervisors showed that program has no clear definition of the role and functions of supervisors, it is remarkable that supervisors are professors who are practitioners, and this raises questions if they are able to assist, facilitate and provide technical support to students.
- The program masters research skills through compulsory courses: "Scientific Research Skills and Methods I-II" and "Biostatistics", "Epidemiology and Evidence-Based Medicine" and by preparing a research paper. Caucasus Medicine and Healthcare School regularly holds an annual student scientific conference, The aim of the conference is to provide students with the necessary skills in this area, to encourage them to engage in further research activities.

Evidences/indicators

- The educational program, attached documents
- Self-Evaluation Report
- Interview results

Recommendations:

o It is recommended to hire specialist/tutors in the clinical skills laboratory, who will support students' learning process and satisfy their needs.

Suggestions for programme development:
o -

Best Practices (if applicable):
o -

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

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

The program documentation and the SER describe various teaching methods relevant to the course objectives, focused on learning outcomes. Teaching methods are entirely in line with the appropriate level of education, correspond to the course content and its specificities and ensure the achievement of entire program outcomes. Teaching methods are described in all syllabi: traditional (verbal / oral method, book work method, written method, demonstration method, discussion / debate method, bedside-teaching methods, practical / laboratory methods) and innovative methods of teaching, problem-based learning; Team-based Learning / collaborative learning, Case-based Learning method, Role-playing. The program documentation state that Case-based Learning (CBL) and case-based clinical reasoning are actively used as learning models, in addition to bedside-teaching and recurrent usage of simulator-training and experience with standardized patients after initial clinical skills course – then during clinical clerkships, also according to the documentation along with the traditional methods the program uses flipped learning from the very first stage. Interviews revealed that staff is familiar with both traditional and modern methods of studying, however modern methods are not widely used, it is therefore suggested to use increasingly modern teaching methods,

that is preconditioned to reach learning outcomes of the program. For future stability creation of a PBL/CBL case bank is necessary.

Evidences/indicators
- The educational program, associated documents   - Self-Evaluation Report   - Interview results

Recommendations:
o -

Suggestions for programme development:
- The creation of a case bank for PBL/CBL will be a good investment for future sustainability as it will enhance the scale, scope, and quality of the cases available to the students.   - Intensive use of modern teaching methods is suggested.

Best Practices (if applicable):
o -

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

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

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

Assessment of the academic performance of students of MD program is carried out via using modern indicators on the basis of the orders of the Minister of Education and Science of Georgia. The credits attributed to the program component can be obtained only in case when the learning outcomes are achieved in the syllabus, which is confirmed with one of the positive assessments. Student assessment is multi-component, summative and formative assessments are used. The evaluation system of the program includes 100 points and envisages:

a. Five types of positive grades:

a.a) A Excellent – 91-100 points out of the maximum score;

a.b) B – Very good – 81-90 points out of the maximum score;

a.c) C – Good – 71-80 points out of the maximum score;

a.d) D – Satisfactory – 61-70 out of the maximum score;

a.e) E – Sufficient – 51-60 points out of the maximum score;

b. Two negative grades:

b.a) (FX) did not pass – 41-50 points out of the maximum score, which means the student needs to work harder and is allowed to retake the exam one more time after performing some independent work; b.b) (F) – Failed – 40 points or less out of the total score, which means the student's work is insufficient and he/she has to re-take the course.

The assessment methods used in the program are modern and correspond to the requirements of the WFME and sector benchmark standards. Oral exam, Written Test / Quiz, Objective Structured Clinical Examination (OSCE), Objective Structured Practical Exam (OSPE), Assessment in the Workplace (Clinical) Environment, Case-Based Discussion, Mini Clinical Assessment Exercise (MiniCEX), Portfolio.

Regardless of the various evaluation methods, in some courses, not all learning outcomes and competencies are assessed:

Clinical Skills I – outcome of the course: students demonstrate the following skills: Blood Pressure Measurement, Hand washing and wearing gloves; Peripheral venipuncture, Bladder catheterization (on male and female simulators, taking an electrocardiogram; Auscultates the heart and lungs, defines and evaluates heart rate and expiration rate, but midterm and final exams are written evaluations, a pattern by MCQ's. At the end of the syllabus, it is noted that: "Stage evaluation of Program Learning Outcomes (Patient Consultation and Practical Skills Performance) will be assessed by OSCE after Clinical Skills-2 course (at the end of 3rd semester). It is recommended that if the student's practical skills cannot be evaluated in the course, it would be better to adjust the learning outcomes of the training course so that it is measurable by the evaluation methods used in syllabus - or add OSCE exams.

Same is valid in case of Clinical Skills III – outcome of the course: Placing the patient on a stretcher and transporting, Transporting the patient with a chair, Orogastric and nasogastric tube insertion, Examination of a gynaecological patient, Examination of the mammary gland, Examining frostbite in a newborn. Exams are based only on written tests.

Based on the above mentioned it is recommended to use OSCE and other modern assessment methods for evaluating learning outcomes/competences in clinical subjects and to asses all learning outcomes and competencies in study courses.

Assessment methods which are widely used almost in all syllabi should be relevant to the course content and its duration. In case of Cell & Molecular Biology and Human Genetics – each student should be assessed 11 times (Verbal presentation (PBL) 8 times, Written tasks/quizzes 2 times, presentation once). Study weeks are n=14, practical hours n=1 and the number of the students in a group is n=22. During the interviews, the course leader also confirmed that this type of ongoing assessment is not relevant to the course duration.

Evaluation method "Portfolio" is used in almost all syllabus, which criteria is very clearly written. However, during the interviews, the staff could not confirm the theoretical or practical readiness in this regard.

Evidences/indicators

- o The educational program, syllabi, affiliated documents
- o Self-Evaluation Report

Recommendations:

- o It is recommended to use OSCE and other modern assessment methods for evaluating learning outcomes/competences in Clinical subjects.
- o It is recommended to assess all learning outcomes and competencies in study courses, as detailed in the narrative.
- o It is recommended to review the number of assessment method of all syllabi to be adjusted according to the duration of the course and contact hours.

Suggestions for programme development:

- o -

Best Practices (if applicable):

- o -

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

- o -

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 methodology and organization, adequate evaluation of programme mastering		X		

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
As the Georgian language MD program of CU has no students yet, an interview was conducted with English Language MD program students. It has been revealed that the Educational Process Management and Student Registration Office of CU provides relevant services to students on an ongoing basis, office is designed to consult students and respond to their applications; solve problems created in the learning process with the relevant departments and the university administration.   The students can obtain the necessary information, advice, and assistance from the academic supervisor of the educational program and the head of undergraduate programs. The students interview revealed also that students are getting appropriate communication from CU Staff, e.g., from the Dean, the Head of the educational program, and the learning process managers.   Interviews ascertained that students of CU Faculty of Medicine receive appropriate consultations and support regarding the planning of learning process, improvement of academic achievement, employment, and professional development as well. The students have opportunities to participate in conferences and other kinds of extracurricular activities like social and sports events. During the interviews with the MD program students, they emphasized that the Administration is very collaborative with students and considers their recommendations and suggestions.   During the on-site visit at K. Eristavi National Center of Experimental and Clinical Surgery and Center for Mental Health and Prevention of Addiction, the Expert Panel had the chance to see study rooms for students. The K. Eristavi National Center of Experimental and Clinical Surgery's director stated that 3-4 students would attend one operation since several operative rooms are available.   At the time of interviewing students, they have mentioned that CU has appeal procedures if there is something that do not agree with in the learning process. During the interviews students noted that they would like to improve practical component and lab work of study courses - Biochemistry and Physiology in particular.
Evidences/indicators

- o Self- Evaluation Report- CU Medicine
- o Educational Program
- o Interview Results
- o University website

Recommendations:

- o –

Suggestions for programme development:

- o

Best Practices (if applicable):

- o –

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

- o –

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 –
Evidences/indicators o –
Recommendations: o –

Suggestions for programme development:
o   -
Best Practices (if applicable):
o   -
In case of accredited programme, significant accomplishments and/or progress
o   -

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

The program's staff consists of academic, invited, administrative and support staff. Rules and procedures for hiring (electing/appointing) the staff are described in the relevant HEI's management policy. These rules are transparent and objective and should ensure attracting and hiring qualified employees, the interviews with the academic, invited and supportive staff showed that these rules are working, and in case of preclinical studies no major shortcomings were identified in this item (the qualification of personnel is corresponding to the preclinical programme, the current workload is adequate, the ratio of tutors to students is acceptable for the first 3-years of the programme). Here it should be emphasized, again, the need to support both teaching and scientific activity and a continuing evaluation based on both educational and scientific quality. More discrepancies were found in the case of clinical training. Clinical supervision should be carried out by a person appropriately skilled and competent in the techniques with sufficient knowledge and seniority. Such status should be documented, the regulation of minimum academic qualifications for each of the categories of the clinical teaching staff is necessary.

o HEI has sent the additional documents which we have asked for, but memoranda with the clinics are still not available for all the clinics which are mentioned in the program list, even most of the contracts are for the English MD program and not for the Georgian one (Raymann Clinic, The National Center for Tuberculosis and Lung Diseases, New Hospitals). It is therefore strongly recommended to have and to present contracts with all the clinics from where academics or invited persons are involved in the Georgian MD program.

o According to the sector benchmark academic and invited staff should be trained regularly (once every 2 years) in the methodology of medical education, which should be confirmed by a relevant certificate. Such kind of certificate is not available in all personal files. We have asked the HEI if they had these and to provide them but did not get any certificate as of today. Therefore, we recommended to train the lecturers according to the sector benchmark requirements in every 2 years.

o The special requirement for academic and invited staff members who are conducting clinical courses is minimum 5-years of clinical work experience which should be proven by official documents from the clinical workplaces. It is therefore recommended that everyone should have such document to prove their qualifications according to the requirements.

o In this line it is suggested to set up a committee responsible to prepare and monitor the extended OSCE checklists.

Evidences/indicators

o SER
o Educational program
o Interview results

Recommendations:

o Contracts with all the clinics involved in the educational activities should be presented on Georgian MD program.
o Academic and invited staff should be trained regularly (once every 2 years) in the methodology of medical education, which should be confirmed by a relevant certificate.

These certificates should be presented in the personal files. Training the lecturers according to the sector benchmark requirements should be demonstrated.

Suggestions for programme development:

- A committee or working group is suggested to coordinate the design of the extended OSCE checklists

Best Practices (if applicable):

- -

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

- -

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

The quality assurance department of the HEI continuously evaluates the indicators of the learning process and compares them with the same parameters of the previous periods. The English MD program has been analysed regularly since its launch, and the first dynamic comparison with the results of the previous period has already been made and can be used for the Georgian MD program, too. The Institution has a relatively small number of academic staff and it is important to increase this number in order to ensure the sustainability of the program. The Medical Faculty is a relatively newly established teaching base of the Institution and one of its priorities is to promote, internationalise and implement the results of scientific research. At the educational level, one of the main objectives is to develop students' scientific research skills and to stimulate their interest in participating in research projects. The Expert Panel reiterates the importance and clarity of the

Research Strategy and the recognition of excellent or outstanding scientific activities carried out by staff. In summary, the current situation is acceptable, but this background should be considered an appropriate starting point for the implementation of more targeted, planned activities related to medical sciences.

Evidences/indicators

- o SER
- o Educational program
- o Interview results

Recommendations:

- o Continuous and systematic monitoring of research activities is recommended to help improve the quality, national and international visibility of the program.

Suggestions for programme development:

- o

Best Practices (if applicable):

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

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 Georgian language MD program and the medical faculty has the necessary infrastructure to run the curriculum, the teaching tools are available, and the relevant protocols of use comply with recognised international standards. Among other things, the program has well-equipped lecture halls with projectors and computers, sufficient working space for students, including access to computer

workstations. There are already plans to build a new university hospital. The faculty has a skills laboratory with simulation facilities to promote the development of practical skills, but the space in the clinical skills laboratory is limited and insufficient for the planned number of students for practice and training, and there are no staff to support the learning process and meet the needs of students. Some stations are already used for OSCE examinations. Nevertheless, the OSCE–suitable simulation rooms are not sufficient for the Georgian program, it is recommended to increase the space/numbers of the appropriate simulation rooms and ensure the purchase of more technical aids, manikins, simulators.

Overall, the students of the English MD program found a stimulating learning environment with adequate equipment, space, and opportunities for collaboration and group work. The library is equipped with the necessary IT devices and provides access to international scientific databases, journals and e-books. The state and functionality of the IT equipment is satisfactory. Library resources are accessible from outside the university. The same assessment applies to the clinical partner institutions involved in the educational process, the main practical training bases in the associated hospitals and clinics are regularly assessed for their adequacy and quality of the practical training program.

Evidences/indicators
- SER   - Educational program   - Interview results

Recommendations:
It is recommended to remodel the clinical skills laboratory for practice and trainings. The space for the appropriate simulation rooms should be increased and technical aids, manikins, simulators should be provided corresponding to the increased number of students.

Suggestions for programme development:
o

Best Practices (if applicable):
o

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

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

Information on the short-term budget specifically allocated for the development of the Georgian MD Program and precise, detailed calculations are not included in the SER documents. However, the Administration of CU has assured that the finances, the budget and management of resources are carefully managed and the resources necessary for the long-term sustainability of the programme are completely available. On-site interviews with the administration and faculty members indicated that the HEI demonstrates strong financial management and a focus on increasing spending efficiency and attracting new revenue sources, which together give reason for optimism about the future of the institution's new program. The Expert Panel advises that the institution should continue to strive to achieve balanced financial results each year

Evidences/indicators

- o SER
- o Educational program
- o Interview results

Recommendations:

- o

Suggestions for programme development:

- o

Best Practices (if applicable):

- o

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

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		X		

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.
The Medical School's Quality Assurance (QA) service organizes the data collecting, analyzing and processing them as student satisfaction, employer satisfaction survey, as well as labor market trends about graduate success rates and other studies. There are no significant problems in this respect. The quality assurance service works on PDCA (plan, do, check, act) according to the cycle. In the evaluation of the educational program, the listed aspects of compliance are checked: learning outcomes and program objectives correspond to the competencies defined in the qualification description; forms and criteria for evaluating students' results are in accordance with the rules provided by the legislation. Teaching methods are consistent with program goals and outcomes; materials and amenities fit the program. However, considering that the university is expecting an increasing flow of students and the current English language program is also in high demand from students, it would be desirable to increase the number of simulation training rooms, add clinical bases and focus on the inclusion of additional medical personnel in basic or clinical disciplines. Here, it is important to note that the university will start building a private clinic in 2024, which it plans to staff with qualified personnel, both local and invited from other countries. It is indicated that the new clinic will start functioning from 2027. During the evaluation of the training course/components, the following issues are checked: compliance of teaching methods with the tasks and expected results of the training course;

performance of educational tasks, content of the educational course and learning outcomes; correspondence of the study course with specific mandatory and optional literature; assessment of student results and multi-components transparency; achieving relevant competencies as a result of completing course tasks, using available materials and facilities, among others.

Data processing and evaluation meets the required standards.

The person involved in the quality management of the Medicine program collaborates with internal working groups in the university when planning the program's quality assurance process, defining evaluation tools and evaluation methods and analyses the results. The school uses the quality assurance results to improve the program, and it has been demonstrated that the results are taken into account when making decisions. During the interview, it was stated that the annual self-evaluation report is prepared with the active support and involvement of the academic and administrative staff.

The quality assurance department uses the PDCA principle, with specific steps and tasks for each level, the service is well-functioning and includes overall program quality assurance and engagement, both horizontally and vertically.

Evidences/indicators

- o SER document.
- o Interviews (Head of Program, leaders of the QA Service of CU, faculty at all levels, students at all levels, graduates)

Recommendations:

- o –

Suggestions for programme development:

- o The University is expecting an increasing flow of students and the current English language program is also in high demand from students, therefore it would be desirable to increase the number of simulation training rooms, add clinical bases and focus on the inclusion of additional medical personnel in basic or clinical disciplines.

Best Practices (if applicable):

- o –

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

- o –

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

The educational program was periodically evaluated by external experts. Following the external evaluation and received recommendations, the QA service has created the component of "Quality Assurance in Medical Services" in the Health and Health Management course; they have planned to better organize summer internships and student internships (theoretical lectures, practical seminars / presentations, introduction to the nuances of the on-site treatment or diagnostic process, preparation of a short essay and / or group presentation). These experiences will be reflected in the students' portfolio; extensive involvement of the University staff and students in a wide range of international cooperation (exchange activities, scientific cooperation, organization of joint conferences and platforms, involvement in cultural events and public diplomacy).

The opinion of a foreign (USA) expert on the introduction of structured clinical trials, mini-clinical evaluation exercises, portfolio, and other modern methods of evaluation has also been considered, as well as the opinion on the necessity of preparing cases and appropriate scenario teams and updating the data. During the interview QA staff confirmed that they periodically have had external evaluations a few times, conducted by the field experts both from Georgia and abroad.

Evidences/indicators

- o Documents of Quality Assurance mechanisms
- o Regulation of the Quality Assurance Department
- o Evaluation by external experts
- o Interviews with Program Head and Quality Assurance Department leads.

Recommendations:

- o –

Suggestions for programme development:

- o Thanks to the great progress made and the active enthusiasm, the programme and its qualitative results could be comparable at international level

Best Practices (if applicable):

- o –

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

o –

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 committee.

During the interview students and staff confirmed that they regularly have surveys to evaluate the program. 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.

The head of the Program and implementing staff monitor the goals of the educational program and training courses and the effective achievement of the learning outcomes in accordance with the pre-defined target benchmarks.

Students evaluate educational courses and instructors every semester. Also, after the end of each semester, the Quality Assurance monitors the students' academic performance, the results of which are processed according to the educational courses, instructors and schools.

The University conducts an annual survey of students, through which students evaluate the services they receive at the University: library, informational, consultation and other services.

The practice of comparing the Program with similar programs of foreign universities is established, which helps to bring the educational Program in line with modern requirements and incorporate best international practices.

Evidences/indicators

o Reported survey results of Quality Assurance Service leadership. o Interviews with QA Service leadership, students, employers.	
Recommendations: o –	
Suggestions for programme development:	
Best Practices (if applicable):	
In case of accredited programme, significant accomplishments and/or progress	
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	X			

Enclosed Documentation (If Applicable): -
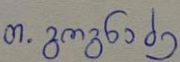**HEI's Name:** Caucasus University LLC
Higher Education Programme Name, Level of Education: One-cycle Educational Program of Medical Doctor
Number of Pages of the Report: 39

Programme's Compliance with the Standard

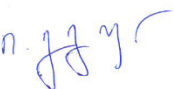| Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
1. Educational programme objectives, learning outcomes and their compliance with the programme	X			
2. Teaching methodology and organization, adequate 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

Mihaly Boros

Expert Panel Members'

Tinatin Gognadze

Tamar Goderidze

Irakli Gagua

Giorgi Mgvdeladze