

**“NATIONAL CENTRE FOR PROFESSIONAL EDUCATION QUALITY ASSURANCE”  
FOUNDATION**



**EXPERT PANEL REPORT  
ON INSTITUTIONAL ACCREDITATION OF  
ARMENIAN MEDICAL INSTITUTE**

**Yerevan – 2020**

## INTRODUCTION

The institutional accreditation of Armenian Medical Institute (hereinafter referred to as AMI) is carried out based on the application submitted by AMI.

The process of institutional accreditation is organized and coordinated by “National Center for Professional Education Quality Assurance” Foundation (hereinafter ANQA), guided by regulation on “State Accreditation of Higher Education Institutions and Academic Programmes in RA” set by RA Government Decree N 978-Ն (dated June 30, 2011) and by Decree N 959-Ն on “Approval of RA Standards for Professional Education Accreditation” (dated June 30, 2011).

The expert examination was carried out by the independent expert panel formed in accordance with the requirements set by “National Center for Professional Education Quality Assurance” foundation in regulation on “Formation of the Expert Panel”. The Panel is formed of 4 local experts and 1 international expert.

Institutional accreditation is aimed not only at external evaluation of quality assurance but also at continuous improvement of the quality of management and academic programmes at the institution. Hence, two issues were put forward to the local and international experts:

1) to conduct an expert examination of institutional capacity in accordance with the RA standards for state accreditation;

2) to carry out an expert evaluation aimed at quality improvement from the perspective of compliance with international developments and integration into the European Higher Education Area (EHEA).

This report comprises the observations of the expert evaluation of AMI institutional capacity in accordance with the RA accreditation criteria for higher education and the peer-review observations of the international expert from the perspective of AMI’s integration into the EHEA.

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## SUMMARY OF EVALUATION

### EVALUATION OF INSTITUTIONAL CAPACITIES ACCORDING TO ACCREDITATION CRITERIA

The expert examination of AMI institutional capacities was carried out by the independent expert panel formed in accordance with the requirements of “Regulation on the Formation of the Expert Panel”, «National Center for Professional Education Quality Assurance» Foundation. The evaluation was conducted according to 10 institutional accreditation criteria set by the RA Government Decree N 959-Ն, dated June 30, 2011.

While carrying out the evaluation, the expert panel considered that AMI is a medical private higher education institution whose primary mission is to develop clinical thinking among its students by providing quality theoretical knowledge, practical skills and professional competence. It was also taken into account that AMI is currently undergoing reforms and the bases for implementing PDCA cycle in different spheres are still being formed. Strategic planning is not yet implemented at all levels in AMI.

Decision-making in management system is not data-based; it is not defined what data the Institute should obtain from different processes in order to increase the efficiency of different processes and to continually improve quality. Practical trainings are being conducted at AMI, but there is no supervision of various cycles, and there is no set number of simulations that will help to assess practical skills of students effectively. It should be noted that student assessment is conducted with a focus on theoretical knowledge. There are few assignments for students to develop analytical skills, there is no applied research, and students do not use the data for various analyzes.

Among various stakeholder groups, AMI is positioned as an institution providing mostly practical training. Such a common perception and expectations about AMI are a good basis for a clear definition of strategic development priorities and goals; still AMI has not yet applied a strategic approach in setting and implementing the goals.

The role of the founders is essential in AMI governance system. The distribution of responsibilities between the governing bodies is conditional. In fact, the impact of the governance system on all AMI processes has not yet significantly contributed to efficiency.

Formally, AMI academic programmes include almost all the necessary components, and the Institute has documented almost all programme-related processes; still there are weaknesses in both the structure and implementation of the programmes. In particular, there are gaps between different components of the programmes, and ultimately no unified approach to and setting of planning, implementation, monitoring and evaluation of the programmes.

The students are generally provided with additional support from the teaching and administrative staffs, still these processes are not yet regulated. With a clear positioning, AMI manages to guarantee a steady number of applicants.

The teaching staff at AMI is mainly comprised of practicing physicians, which has a significant positive impact on the quality of educational services provided. However, the concept of human resource management has not yet been formed. The documents regulating this segment generally do not contain provisions that are strictly applied in practice.

AMI research objectives have not yet been clarified. Due to limited resources, the feasibility of conducting research is still in doubt. However, given the peculiarities of medical specialty, there is some tendency to develop conviction that AMI needs to conduct research. AMI lacks applied research.

The most important factor in learning environment and available resources is collaboration with the clinics, as a result the learners have daily access to the actual hospital environment. In terms of financial management, there are risks of depending on one source of income, as well as misalignment between the objectives and financial allocations.

AMI has not yet established sustainable mechanisms of public accountability for the provided education, research and use of resources. Some internal reporting elements are not sufficient to form external accountability. Despite the opportunities AMI has due to its positioning, it is still extremely passive in its social responsibility activities.

In terms of external relations, forming relations with local clinical organizations is a priority for AMI, and this process is being effectively implemented. Internationalization is not yet consolidated as a measure of performance, but AMI's first significant steps in this sector, in particular, hosting foreign students, are evident. Considering the financial benefits of internationalization, AMI is already planning to develop this sector.

The internal QA system cannot yet be considered established, but the magnitude of its impact is noticeable. At the same time, it also envisages expanding the toolkit as well as developing a number of new procedures.

### **Strengths of the University:**

- 1) Developed and sustained mission and positioning
- 2) Steady number of applicants
- 3) Opportunities for extracurricular classes for students, including classes conducted in a clinical settings
- 4) Practical experience of the teaching staff
- 5) Learning environment, equipment and opportunity to deal with patients in clinics

- 6) Close and sustained collaboration between AMI and local clinical organizations
- 7) Increasing impact of the quality assurance subsystem

**Weaknesses of the University:**

- 1) Lack of a unified vision in terms of prospective development
- 2) Lack of distribution of authority among the governing bodies and unclear division of labor within the cycles of the management system
- 3) Lack of administrative policies, procedures and information management approaches in place
- 4) Lack of policies and guidelines for the selection of teaching, learning and assessment methods
- 5) Lack of supervision of the implementation of academic programmes
- 6) Lack of strategy reflecting research directions and objectives, as well as long-term, mid-term and short-term programmes
- 7) Lack of mechanisms to promote research activities
- 8) Lack of diversification of income
- 9) Lack of external reporting procedures, and a policy for ensuring transparency of processes and procedures

**Recommendations:**

**Mission and Purposes**

- 1) Align reference documents with the established AMI mission; make it a benchmark for setting goals and operating the entire institution.
- 2) Engage external and internal stakeholders in processing a unified vision for the prospective development of AMI.
- 3) In parallel with the objectives, define the values of the indicators that characterize their implementation.

**Governance and Administration**

- 4) Clarify the role, responsibilities and authority of the governing statutory bodies, other management bodies and subdivisions of the management system to enhance the effectiveness of managerial decisions, contributing to the impact of the professional capacity of human resources on the quality of decision-making.
- 5) Ensure that the day-to-day operations are in line with the set strategic goals, thus establishing an interconnected rank of multi-term plans.

- 6) Develop an information management system that clarifies the scope of inbound and outbound information needed, as well as the one that introduces mechanisms to evaluate the effectiveness of information flow.
- 7) Establish clear, legally adjusted procedures for effective process regulation that will serve as a guideline for the organization of the processes.

### **Academic Programmes**

- 8) Review the outcomes of the academic programmes, focusing on their feasibility, measurability and compliance with the degree level.
- 9) Introduce a procedure for developing a syllabus to ensure that it is consistent with the learning outcomes of the curriculum.
- 10) Develop policies and guidelines for the selection of teaching, learning and assessment methods, with particular emphasis on assessment criteria.
- 11) In order to provide practical training, clearly define the number of required simulations to ensure the learning outcomes, as well as introduce student portfolio as an assessment tool.
- 12) Introduce specific elements in academic programmes that will contribute to international mobility.
- 13) Considering the peculiarities of clinical training, introduce efficient and enhancing mechanisms for monitoring and evaluating the implementation of the academic programmes.

### **Students**

- 14) Establish an appropriate procedure for international student admissions; coordinate international student recruitment processes.
- 15) Ensure students' active involvement in applied research.

### **Faculty and staff**

- 16) Clarify the requirements for the teaching staff per each academic programme.
- 17) Adjust the process of retraining conducted among the teaching, support and administrative staffs based on the assessment of the needs.
- 18) Introduce policies and procedures for ensuring and encouraging the professional development of novice lecturers.

### **Research and Development**

- 19) Clarify the scope and objectives of research interests.
- 20) Provide favorable conditions for the enhancement and implementation of the research component in academic programmes, in particular by replenishment or establishment of research laboratories.
- 21) Develop mechanisms to promote conducting research and scientific activities (e.g. providing internal grants).
- 22) Improve the mechanisms of interconnecting research activities and teaching process by ensuring a more scientific and practical learning.

### **Infrastructure and Resources**

- 23) Aim for sustainable positive trends in income diversification and develop steps to implement it.
- 24) Develop steps to digitize circulation of documents.
- 25) Ensure laboratory replenishment for effective application of educational program goals.

### **Societal Responsibility**

- 26) Develop and implement external accountability, access to procedures, and mechanisms to ensure transparency of objective information on processes in order to enhance public awareness of AMI.
- 27) Enhance AMI initiatives in the processes promoting public relations by introducing tools that encourage feedback, as well as mechanisms to ensure sustainable transfer of knowledge and values (e.g. healthy lifestyle) to the public.

### **External Relations and Internationalization**

- 28) Clarify the long-term goals of AMI internationalization, and develop tools for promoting international cooperation, identify those responsible for its implementation.
- 29) Be consistent in the execution of the signed memoranda.
- 30) Introduce mechanisms to ensure foreign language competency of internal stakeholders, taking into account the needs and targets of AMI internationalization.

### **Internal Quality Assurance System**

- 31) Coordinate QA documents to ensure that implementation of the procedures included are guaranteed.



- 32) Introduce sustainable mechanisms for evaluating the efficiency and needs of internal QA system, and provide the necessary replenishment and training relevant to the identified needs.
- 33) Introduce mechanisms for receiving and transmitting information by the Quality Assurance Center, ensuring accountability of internal QA system.
- 34) Develop mechanisms for engaging the teachers with years of experience in QA processes.
- 35) Clarify the methodology, also using quantitative indicators, for evaluating the effectiveness of different processes by the QA department, and ensure transparency of the evaluation results.

## PEER-REVIEW FROM THE PERSPECTIVE OF EDUCATION INSTITUTION'S INTEGRATION INTO EUROPEAN HIGHER EDUCATION AREA

External relations and internationalisation play an important role in higher education development and contribute extensively to the overall quality of higher education. In the context of this review, in particular the external relations and internationalisation aspect of AMI is being addressed.

‘External relations’ in the context of the higher education sector means all those activities that influence and promote an institution’s place within its external environment, both domestic and abroad. This can include activities such as partnerships and collaborations with other public or private institutions or bodies, participation in regional and international networks, alumni development programs, community-based partnership or services and others.

AMI has been quite active in establishing external relations, in particular on local level. During the academic year 2018-2019, AMI reported to cooperate with 21 different institutions, including nine dental polyclinics, a Military Hospital, Erebouni Medical Center, First Aid Scientific and Medical Center, Institute of Psychological Health, Armenian Association of Doctors, National Institute of Health and others. Through these collaborations, AMI further contributes to promoting its programs and students to a wider public. With AMI’s focus being training doctors for the local market, this network of local institutions and bodies among which are potential employers of AMI graduates is an important and valuable asset and supports AMI in achieving its strategic goals and objectives.

AMI has also established mechanisms to involve students in the field of external relations. An alumni representative is coordinating various alumni activities. In addition, the student council is involved in several extracurricular community service activities, thus further promoting AMI’s institutional reputation and ensuring involvement with external stakeholders.

Up to now, most AMI’s efforts in establishing and maintaining external relations are focused on the domestic/Armenian region. Very limited efforts have been undertaken so far on institutional level to establish relations with institutions beyond Armenian borders. Although AMI’s vision, mission and goals all mention an international dimension, internationalization itself has not yet been addressed in a structured and strategic way. However, Erubui Magazine reported, that in October 2019, AMI established one working group on international collaborations and external relations, emphasizing the importance of this dimension for AMI’s institutional development.

Internationalisation will play a greater role in the future of AMI. The university management very recently decided on a strategic step to admit international students and to offer programs in English language with the aim to generate revenues and increase profits. Being a very recent development, these plans were not addressed in the SER.

It is not clear whether the Armenian Ministry for Higher Education has already granted the right to AMI to establish internationally oriented programs in English language. No corresponding documents were provided during the site visit. However, at the time of several Indian students who have transferred from another Armenian institution have already been admitted to AMI for study in an English language program. More foreign/Indian students were expected to be enrolled in the following weeks. Thus, AMI seems to have created facts without establishing the formal and structural settings first.

Main organisational strategies, including policies, procedures, systems and supporting infrastructure to facilitate and sustain the international dimension at AMI, were not clearly formulated or developed. What is the internationalisation strategy? What are the goals for

internationalisation of AMI? And how are these goals translated into AMI's curriculum, research and public service functions? The Strategic Development Plan (2016-2020) does neither mention internationalisation or even the establishment of English language programs nor the establishment of any support services aiming at enrolling international students. No information on application procedures or admission criteria for international students was available at the time of the site visit, neither on the website nor at the institution itself. Equally, no information on the English language programs such as a detailed curriculum was yet available. Against this background, it is not transparent at all how quality education is to be ensured.

Admitting foreign students and offering English language programs is a first and important step in advancing internationalisation at AMI. However, it is imperative, that this is done in a coordinated and structured approach. The following recommendations are made to improve the process:

- Most importantly, permission/clearance by the Armenian Ministry for Higher Education and other relevant authorities to run English language programs needs to be obtained.
- Further, AMI needs to formulate a clear strategy, clear policies and procedures to ensure the implementation and promotion of internationalisation.
- AMI needs to ensure transparency and increase visibility about study requirements (eligibility criteria, application process etc.) and all programs offered for international students by developing marketing materials and publishing relevant information and documents on AMI website
- Relevant support services for international students need to be established.
- Last but not least, one recommendation is to establish an External Relations Department or Unit that would coordinate and bring together all efforts relating to external relations and internationalization. With recruitment of international students being only one aspect of internationalization, future further developments could include students and staff exchange programs, internationalization of curricula and establishment of regional and international collaborations.

In summary, AMI has been quite successful in establishing external relations with various Armenian institutions. Very recent first steps to equally build up and advance the international component were initiated, but require a clear strategy and a more structured approach.

**09 March, 2020**

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**Tigran Mnatsakanyan, Signature of the Expert Panel Chair**

## DESCRIPTION OF EXTERNAL REVIEW

### COMPOSITION OF EXPERT PANEL

External evaluation of the institutional capacities of UTM was carried out by the following expert panel<sup>1</sup>:

1. **Tigran Mnatsakanyan:** Lecturer at the Chair of Management, ASUE; Candidate of Economics (PhD), Expert Panel Chair
2. **Anna Poladyan:** Faculty of Biology, YSU; Associate Professor at the Chair of Biochemistry, Microbiology and Biotechnology; Candidate of Biological Sciences (PhD)
3. **Artem Grigoryan:** Associate Professor at the Chair of Pathophysiology, YSMU; Candidate of Medical Sciences (PhD)
4. **Pauline Grys:** Heidelberg University, Institute of Global Health, Quality Assurance Manager, Doctor of Medical Sciences;
5. **Vache Gharibyan:** Russian-Armenian University, Chair of General and Pharmaceutical Chemistry, 4<sup>th</sup> year student.

The composition of the expert panel was agreed upon with the Institution.

The works of the expert panel were coordinated by Varduhi Gyulazyan, senior specialist at ANQA Institutional and Program Accreditation Division.

The translation was provided by Vardanush Baghdasaryan, lecturer at the Chair of English Communication and Translation, YSULS.

All members of the expert panel, the coordinators and the translator have signed confidentiality and impartiality agreements.

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<sup>1</sup> Appendix 1. CVs of expert panel members.

## PROCESS OF THE EXTERNAL REVIEW

### **Application for state accreditation**

AMI applied for state institutional accreditation by submitting to ANQA the application form, copies of the license and respective appendices.

The ANQA Secretariat checked the data presented in the application form and the appendices in the application package.

According to the decision on accepting the application request, a bilateral agreement was signed between ANQA and AMI. The timetable of activities was drawn up and approved.

### **Self-evaluation**

Within the deadline set in the schedule, the Institution presented the Armenian and English versions of its self-evaluation report according to the form set by ANQA, and the package of attached documents.

The self-evaluation was carried out by a team formed by the order of AMI Rector.

### **Preparatory phase**

ANQA coordinator observed the report with the aim of revealing its correspondence to the technical and substantive requirements of ANQA. Then ANQA coordinator sent the self-evaluation report to the expert panel, the members of which were agreed upon with AMI.

Four trainings on the following topics were organized for the expert panel members by ANQA, with the aim of preparing the latter and ensuring the effectiveness of the activities:

1. Accreditation process, the features of the expertise, expert ethics and rules of conduct.
2. Preliminary assessment of the institutional self-evaluation through the examples from the practice.
3. An expert visit through role-plays.
4. Preparation of the expert report.

During the trainings, the standards for quality assurance and certain aspects of the field were addressed.

Having observed the self-evaluation and the package of accompanying documents of the TLI, the expert panel conducted the initial evaluation. According to the format, the list of the issues and questions for different target groups or units and the list of additional documents needed for observation have been prepared.

During the preliminary assessment, the expert panel undertook training and examination observations. Thus, the expert panel visited Erebouni Medical Center, and observed a class in “Traumatology” conducted for year 6 students, a class in “Pulmonology” conducted for year 7 students, and a class in “Cardiology” conducted for year 5 students at the Faculty of General Medicine.

Within the scheduled time, the expert panel summarized the results of the initial evaluation and formed a time schedule of the site-visit<sup>2</sup>. Guided by the ANQA manual on the expertise, the intended meetings with all the target groups, close and open meetings, document and resource observations, visits to different units were included in the time-schedule.

After having identified the main issues and the documents to be investigated, the expert panel highlighted the issues to be discussed at meetings. At regular meetings, the questions on each standard were discussed, and the package of documents on the preliminary visit of the expert panel was prepared. The package included the time-schedule of the site visit<sup>i</sup>, the questions to be investigated and explained for different target groups and the list of additional documents needed for observation during the site visit. From the lists provided by the TLI, the representatives of the teaching staff and students, graduates, employers were selected to participate in the meetings.

### **Preliminary visit**

On December 3, 2019, a preliminary visit was paid to AMI. The plan-schedule of the site-visit was agreed upon, the list of additional documents to be investigated was presented, discussions and mutual decisions were reached referring to organizational, technical, informative questions of the site visit, and questions related to the conduct and the norms of ethics of meeting participants. The rooms prepared for focus groups and expert panel discussions were observed, the issues related to the equipment and facilities were clarified.

### **Site-visit**

The site visit of the expert panel took place from December 16 to 18, 2019. In line with the timetable, the operations of the expert panel initiated with a close meeting, the aim of which was to discuss and agree with the external expert upon the assessment framework, the issues to be clarified during the site visit, strengths and weaknesses of AMI per standard, the procedure of focus groups, and clarifying further steps.

All the expert panel members, including the ANQA coordinator, the translator and the record keeper assisted the meetings.

The site visit initiated and culminated with meetings with the AMI Rector. All the meetings foreseen by the schedule have been carried out, excluding the open meeting. Throughout the site visit, the expert panel reviewed the documents<sup>3</sup>, the resources<sup>4</sup> and conducted focus group meetings in different infrastructures of the TLI.

During close meetings of the panel at the end of each working day, the interim results of peer review were discussed and at the end of the site visit, the main outcomes of the site visit were summarized.

The assessment has been carried out within the framework of State Criteria and Standards of Accreditation and ANQA procedures, following which the assessment has two levels: **satisfactory** and **unsatisfactory**.

### **Expert panel report**

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<sup>2</sup> Appendix 2. Schedule of site visit for the institutional accreditation of AMI.

<sup>3</sup> Appendix 3. List of documents observed.

<sup>4</sup> Appendix 4. Resources observed.

The expert panel and ANQA coordinator prepared the draft of expert panel report. The international expert prepared an independent peer review, which was included into the report. The preliminary report was handed over to AMI on 03.02.2020.

AMI sent its feedback on the draft report to ANQA on 17 February, 2020. Examining the preliminary version of the expert report, AMI did not present any objections. The expert panel prepared the final report, which was approved by the panel on 7 March, 2020.

**09 March, 2020**

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**Varduhi Gyulazyan, Signature of the coordinator**

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA BRIEF INFORMATION ABOUT THE EDUCATION INSTITUTION

**History:** AMI, the first private medical university in the post-Soviet states, was founded in 1990. It was accredited by the state in 2001.

Since its foundation, AMI has sought to establish its own teaching staff: the Institute invited prominent and respected scholars, representing various medical research institutions in the country, to work at AMI. AMI has signed cooperation agreements with these scientific and research institutions on the basis of which AMI chairs were formed. The best specialists of the research institutes were recruited by AMI. The Institute of Epidemiology was among these institutions, where the chairs of Virology, Immunology, Microbiology and Parasitology were established. On the basis of Hematology Center after Prof. R. Yeolyan, several courses in Clinical Immunology, Hematology and Transfusiology were developed and taught – this was unprecedented in HEI system. In the Institute of Physiology of the National Academy of Sciences of the Republic of Armenia, the course in Human Physiology was developed and taught. An experienced scientist, Academician Hovhannes Baklavajyan was the Head of the Chair. A team of medical chemistry and pharmacology was selected from the Institute of Fine Organic Chemistry. On the basis of Institute of Molecular Biology of NAS RA, the Chair of Biochemistry was founded (Academician Konstantin Gharagozyan – founder and the Head of the Chair). Thus, AMI managed to ensure a link between science and education. The Institute sought to develop research thinking among students, and many of them volunteered in the laboratories after the classes to assist their teaching assistants in their research, and it was no accident that the first student conference was very representative.

**Education:** In 1991-1992 academic year Armenian Medical Institute was transferred to Erebouni Medical Center. Basic clinical courses were conducted on the basis of Erebouni hospital. For the first time, the course in Internal Diseases was taught not as a faculty and hospital therapy programme, but as separate programmes in Pulmonology, Cardiology, Gastroenterology, Rheumatology, Nephrology, etc. An experienced and knowledgeable professor Rafael Mamikonyan coordinated the clinical Chairs. The teaching staff included Academicians, Corresponding members, Doctors and PhDs (in medical and biological sciences), Associate Professors, and Professors.

Current requirements for human resources remain strict, and currently the Institute employs around 150 highly qualified specialists – Doctors, Professors, PhDs, Associate Professors. This powerful scientific potential plays a major part in the development of medical science in Armenia. There are 16 chairs at AMI, located in the campus and in 27 clinical units,



which are the leading medical centers in the country. Erebouni Medical Center is the major educational and performance base of the Institute, where students gain valuable knowledge and practice. There are two faculties at AMI: General Medicine and Dentistry.

**Research:** In its strategic plan, AMI highlights the interrelated role of higher education and research in ensuring and improving the quality of education.

**Internationalization:** The Institute seeks to expand cooperation with leading Armenian and foreign HEIs, intensify participation in European institution partnerships, local and international inter-university programmes, and develop mechanisms for mutual recognition of learning outcomes and credit transfer by promoting academic mobility among students and the teaching staff, and strengthening the international reputation of AMI.

The main strategic goals and directions of AMI internationalization are:

1. Reviewing the international relations system and developing a strategy for promoting functionality.
2. Developing new collaborative programs and promoting international cooperation with leading universities.
3. Developing mechanisms to promote student participation in international programs.
4. Ensuring mobility among students, teaching and administrative staffs.

**Source:** *sources for the identification of facts in the above mentioned fields are the documents provided by the TLI (e.g. self-evaluation report, strategic plan, action plan, plans of the departments, concept papers, etc.)*

## I. MISSION AND PURPOSES

**CRITERION: The policies and procedures of the institution are in accordance with the institution's mission which is in line with ANQF.**

### Findings

**1.1 The institution has a clear, well-articulated mission that represents the Institution's purposes and goals and is in accordance with National Qualifications Framework NQF.**

AMI mission is stipulated in the Charter and the strategic plan of 2016-2020. The mission statement includes general provisions.

AMI was established as a private educational institution having local orientation (therefore it was named Armenian) and providing affordable educational services (tuition fees have never exceeded a particular level). These provisions are general activity guidelines for AMI management.

The founders are physicians by occupation.

AMI is guided by NQF and medical education peculiarities in formulating its mission and purposes.

**1.2 The mission statement, goals and objectives of the Institution reflects the needs of the internal and external stakeholders.**

AMI is a private organization.

Some internal and external stakeholders are engaged in the working group formed to develop the strategic plan.

The strategic plan was approved by the Scientific Council, which includes internal stakeholders.

Stakeholders have disagreements regarding certain areas of development, in particular establishing research institute, providing educational services to foreign students.

**1.3 The Institution has set mechanisms and procedures to evaluate the achievement of its mission and goals and further improve them.**

According to the self-evaluation, AMI applies key performance indicators (KPI) to evaluate the implementation results of its mission and purposes. The Rector and Vice-Rectors submit a report on KPIs at the end of each academic year in accordance with the strategic plan

timetable for the given year, which serves as basis for evaluating the programs implemented and for identifying the reasons for failures.

However, as a result of the aforementioned process, changes are scarce and non-strategic, while indicators are generally not quantitative.

**Considerations:** The mission statements do not fully reflect AMI true mission, which was formulated by the founders and is still up to date. It can be noted that AMI has a clearly defined mission, but it has not yet been formally formulated. However, this does not prevent AMI management from pursuing the true mission in its activities.

Combining CEO position by the founders may hinder the clear formulation of the mission.

Despite stakeholder involvement in the working group and Scientific Council, developing and approving the SP, respectively, AMI has not yet identified some key areas of its development, which proves the lack of effective discussions with stakeholder involvement. AMI is a private organization hence the interests of founders are a priority. However, even the founders have not yet established a unified vision on AMI future development.

Current mechanisms for reviewing purposes and objectives do not ensure objective assessment of the effectiveness of purposes and actions to achieve them, since quantitative indicators are not applied and assessments are not transformed into reforms.

**Summary:** Taking into consideration the well-established and sustainable mission of AMI, certain involvement of internal stakeholders in defining purposes, it can be concluded that AMI activities comply with the established mission, which is in line with NQF.

**Conclusion:** The compliance of AMI institutional capacities with the requirements of Criterion 1 is evaluated as satisfactory.

## II. GOVERNANCE AND ADMINISTRATION

**CRITERION: The institution's system of governance, administrative structures and their activities are efficient and are aimed at the accomplishment of mission and goals of the institution preserving ethical norms of governance.**

### Findings

**2.1 The Institution's system of governance ensures structured decision-making process, in accordance with defined ethical rules and has efficient provision of human, material and financial resources to accomplish its educational and other purposes.**

AMI management is implemented in accordance with the Charter. The governing bodies are the founding council, the Rector and the Scientific Council.

The activities of the founding and Scientific Councils are regulated by the relevant regulations, though they predominantly repeat relevant articles of AMI Charter.

The founding council consists of 4 founders who are physicians by occupation and replace each other successively as the Rector. The founding council members have separate rooms in AMI area and meet weekly to discuss operational management issues.

According to the self-evaluation the Scientific Council is the governing body for methodological and scientific activities. However, the Scientific Council sessions are not convened frequently (set requirement - at least twice a semester).

The direct management of different areas of AMI activities is implemented by 3 Vice-Rectors and Deans of 2 faculties. The position for vice-rector on science is vacant.

Faculty councils are designated as governing bodies of faculties, with the Deans of the relevant faculties as chairpersons. According to the self-evaluation, procedure on faculty governance and activities is defined by AMI Charter and faculty regulation, though the latter does not resolve any procedural issue except for the Dean election (the same applies to the Chair's regulation). However, the Deans are actually appointed by the Rector: election by the Scientific Council is formal.

The activities of individual departments are regulated by regulations (regulations/procedure/charter), in particular, the activities of the quality assurance center, the economic affairs, accounting, human resources department, etc. However, these regulations do not provide a clear and coordinated division of activities between the units, namely, the Vice-Rector conducted benchmarking of academic programs, the IT officer is responsible for AMI website content, etc.

In spite of some traditional approaches, functional departments do not generally have an established concept for activities.

## **2.2 The Institution's system of governance gives an opportunity to students and the teaching staff to take part in decision making procedures.**

Some internal stakeholders are engaged in AMI Scientific Council and faculty boards. The Head of the Student Council is a member of the Scientific Council.

According to the self-evaluation, lecturers and students express their opinions in "Erebuni" monthly, published at the university, as well as within the scope of surveys.

## **2.3 The Institution formulates and carries out short-term, mid-term and long term planning consistent with its mission and goals as well as has appropriate mechanisms for the implementation and monitoring of those plans.**

“Action plan for AMI strategic development plan (2016-2020)” was developed, but the dates for individual actions according to the plan are vague (long intervals are set).

The departments have annual work plans, but studies revealed that they do not stem from AMI SP and the purposes defined in it.

AMI developed “Procedure on evaluating the results of mission and purposes”, though it is a concept and does not define the actual procedure.

#### **2.4 The Institution carried out examination of facts affecting its activities and draws on reliable findings during the decision-making process.**

According to the self-evaluation, surveys are conducted among alumni for identifying factors that affect the quality of teaching, in order to determine their satisfaction with the knowledge and abilities required.

However, the study of factors affecting activities is focused on internal factors.

#### **2.5 The management of the policies and the processes is based on the quality management principle (plan-do-check-act /PDCA/).**

A number of documents are available with revised editing. Most of the procedures were adopted in two sessions of the Scientific Council (August 2017 and August 2019).

It should be noted that the administration of policy and procedures is mainly at the planning stage.

Although AMI has a lawyer who takes part in developing internal documents, most of them do not envisage regulations, imperative provisions.

#### **2.6 The Institution has evaluation mechanisms in place ensuring data collection, analyses and application of the data on the effectiveness of the academic programs and other processes**

Certain methodology for surveys is developed which includes some mechanisms for evaluating the information received (mainly statistical reliability). These mechanisms, however, have just started to be applied. Since quality assurance processes have just started to be implemented, the effectiveness of different mechanisms has not yet been evaluated.

#### **2.7 There are objective mechanisms in place evaluating the quality of quantitative and qualitative information on the academic programs and qualification awarded.**

According to the self-evaluation, the effectiveness of publications on qualitative and quantitative information can be judged by the increase in the number of students, in awareness on AMI and by credible reputation. However, the aforementioned facts are not measured and applied by AMI as a basis for reforms.

**Considerations:** The fact that the regulations governing the activities of the Founding and Scientific Councils predominantly repeat relevant articles of AMI charter, that four members of the Founding Council replace each other successively as the Rector, that Founding Council members generally discuss operational management issues, that Scientific Council sessions are not convened frequently, proves that the power is not distributed among the three main governing bodies prescribed by AMI Charter. This situation jeopardizes the importance of the Founding Council as a body which elaborates strategic development directions, as well controls or counterbalances the executive bodies, endangers the Rector's institute as of professional executive manager with a sustainable vision for development, as well as the reputation of the Scientific Council as an independent decision-making body with professional competence.

The fact that the position of one of the Vice-rectors is vacant, particularly, in case of the lack of infrastructure in the given field proves the disadvantages of vertical division of work and the unimportance of providing the management system with human resources.

The autonomy of faculties and chairs is jeopardized by appointments to elective positions. This can also cause a constraint on decision making by collegial bodies.

Although it can be noted that documents are available to regulate the performance of almost all units of the management system, in fact this set of documents does not ensure proper regulations, which jeopardizes not only the performance of individual units, but also the efficient use of resources because of activities which do not stem from responsibilities.

Due to engagement in councils lecturers and students generally have the opportunity to participate in decision making related to them, but as it was mentioned above, collegial bodies do not participate actively and directly in decision making.

There are different platforms for faculty and students to express their opinions (SC, monthly, surveys, etc.), but there are no mechanisms and examples of influence on decisions.

The indefinite deadlines set by AMI strategic development action plan for specific activities do not enable to clearly allocate activities and develop short-term plans. This results in a breach between AMI management system activities and SP. This is also testified by the annual work plans of the units.

The procedure on evaluating the accomplishment results of the mission and purposes does not enable to compare the actual activities with the purposes, as a result of which the

accomplishment of purposes is not evaluated and the activities are at risk of not being targeted at purposes. In such situation, developing from long-term to short-term plans is ineffective, and AMI daily performance may not lead to accomplishing the purposes.

Although AMI conducts internal environment study, the lack of mechanisms for studying external factors affecting the activities can be devastating especially for a private university. Meanwhile, it is worthwhile to mention that the availability of the affiliated medical facility partly compensates for this gap. As a result, AMI has reliable though insufficient information to support the validity of its decisions.

Although some documents are available in revised edition, most of the procedures were defined in two sessions of the Scientific Council (August 2017 and August 2019). However, the relevant documents do not generally envisage any regulations, which hinders their introduction as procedures. Identifying this disadvantage does not require probationary period, hence the definition of some procedures is not intended to improve processes. In this case, proper improvement of policies and procedures does not surely take place.

Although AMI attempts to evaluate the validity of survey information through statistical tools, it is not yet a well-established mechanism, and the effectiveness of other information-related processes is not evaluated.

Individual AMI units are aware of the indicators for measuring the effectiveness of information disclosure, but the inapplicability of indicators endangers the improvement of relevant processes.

**Summary:** Taking into consideration the lack of distribution of power between AMI management bodies and a number of dangers arising from it, the unclear distribution of work between the management system units, the lack of guarantees for internal stakeholders to affect decisions related to them, a certain breach between the management system activities and the SP, the lack of study of external environmental factors, improper administration of policies and procedures, lack of information management approaches, it can be concluded that the effectiveness of AMI management system and targeting purposes are not ensured.

**Conclusion:** The compliance of AMI institutional capacities with the requirements of Criterion 2 is evaluated as unsatisfactory.

### III. ACADEMIC PROGRAMS

**CRITERION:** The programmes are in concord with the Institution's mission, form part of institutional planning and promote mobility and internationalization.

#### Findings

**3.1 The academic programs are in line with Institution's mission, they correspond to the state academic standards and are thoroughly described according to the intended learning outcomes of the qualification awarded.**

In order to modernize and improve the educational activities, AMI strategic development plan for 2016-2020 intends to review academic programs in line with students' educational needs and the health care system, matching them with modern educational methodologies and technologies.

In accordance with its mission and ambitions, AMI provides and improves academic programs for "Medical work" and "Dentistry" specialties in line with RA ME state educational standards based on the qualifications awarded and expected educational outcomes, which should also promote student mobility.

Academic programs are developed and formulated according to learning outcomes and reflect the combination of theoretical knowledge and practical skills. However, it should be noted that the «Relevance of PAP course outcomes», namely the map of outcomes of academic and course programs is the result of some mechanical work.

External stakeholders are engaged in developing and implementing academic programs. According to state educational standards (RA Government Decree N 714-N of July 7, 2016), academic programs include curriculum, course timetable, course study programs, internship programs. However, in some cases the outcomes of individual courses are not defined in the academic program.

In order to assess the level of clinical reasoning and diagnosing correctly, some courses involve analysis of simulated patients, so the number of clinical subjects, which involve such analyses, is planned to increase.

Course programs are not composed uniformly and are either superficial or too detailed sometimes, but there is no unified approach to allow for a gradual process of acquiring knowledge and skills based on outcomes. There is very little English literature in course guides. The latter reflects not a flaw in the course guide but the lack of steps implemented.

The learning outcomes are not defined by active words of Bloom's taxonomy, which makes it difficult to measure. The evaluation of outcomes is mainly intuitive.

**3.2 The Institution has a policy that promotes alignment between teaching and learning approaches and the intended learning outcomes of academic programs, which ensures student-centred learning.**



According to the self-evaluation, AMI selects teaching and learning methods which areas student-centered as possible to ensure that all students meet the minimum threshold of learning outcomes. In order to elaborate correct curricula and programs, chairs developed relevant methodological guidelines which were approved by the Rector.

Meanwhile, it became clear during the expert visit that perceptions of student-centered learning are new, teaching and assessment methods are not selected in line with expected learning outcomes. There are some positive developments in teaching clinical subjects, where the active involvement in real-life situations enables students to reach the defined outcomes. However, in general, neither students nor faculty have a clear, common vision of the outcomes of the given course.

In recent years, interactive and small group teaching methods, as well as students' individual, practical and group work have been applied increasingly. Open lessons are organized to promote students' individual work, during which students choose topics at their discretion, make presentations and answer the group's questions.

"Procedure on regularly updating teaching and learning approaches and methods" is developed, though it specifies neither the policy nor the procedure for selecting methods.

Focus group meetings with students and alumni play an important role in enhancing the effectiveness of teaching and learning methods.

Additional trainings and exchange of modern teaching methods are also implemented, though not all lecturers participate in these trainings.

### **3.3 The Institution has policy on students' assessment according to the learning outcomes and promotes academic integrity.**

Student assessment system incorporates patient history write-up which is further taken into account during the final examination. In annual final accreditation report, the head of the committee states the pros, cons, and recommendations for the examination. In addition, students have the opportunity to appeal their grades.

According to the self-evaluation, in order to ensure the objectivity of assessment, as a result of discussions the Scientific Council decided to submit an order, according to which a member of the administrative staff shall be present with the chair lecturer at midterm exams.

Assessment is multi-component, including attendance, individual work and theoretical knowledge. However, assessment does not stem from the defined outcomes. Assessment is conditional since practical skills are not clearly tested in the outcomes. This is also evidenced by

the fact that the table reflecting the relevance of the teaching and assessment methods for PAP course outcomes is not targeted.

The procedure on “Assessing knowledge of students of Armenian Medical Institute” does not reflect the assessment policy.

AMI has a procedure reflecting the policy for assuring academic integrity and preventing plagiarism. However, its real-life implementation has no visible evidence yet. Thus, presentations, used as assessment tool for individual work, do not include proper reference, which is not always the result of students’ failure.

### **3.4 The programmes of the Institution are contextually coherent with other relevant programs and promote mobility of students and staff.**

The self-evaluation states that AMI is guided by the PAPs of Yerevan State Medical University after M. Heratsi, however, AMI PAPs were originally based on the programs of Physicians' Improvement Institute.

There is a procedure on “Principles, goals, objectives, policy, procedure, and schematic structure for benchmarking of AMI performance effectiveness” which gives only a general description of what benchmarking is, without referring to academic programs and clarifying their benchmarking procedure. In addition, benchmarking components were also applied with some Russian HEIs, whose selection principle was not clear.

Relevant academic programs enable students to continue education in other programs both within the given HEI, by passing exams on subject differences, and beyond the educational institution.

The mobility of faculty and students at AMI is not developed. Actual mobility is rather passive. The mobility of students and lecturers is not directed at specific goals or programs, but is arbitrary, namely is the result of student’s unsatisfactory performance or of the lecturer’s transfer from the HEI.

### **3.5 The Institution adopts policies in place ensuring academic programme monitoring, evaluation of effectiveness and enhancement.**

According to the self-evaluation, AMI policy is aimed at enhancing PAP effectiveness through monitoring, self-assessment of learning outcomes, and review of academic programs. PAP monitoring is initiated and implemented by the relevant educational unit on a bi-annual basis, in accordance with the monitoring schedule.

Methodological assurance of educational quality assessment includes stakeholder engagement, monitoring of academic programs, assessment of learners' knowledge and skills (as well as alumni competences), assessment of faculty competence, self-evaluation of work, benchmarking with other medical universities.

Procedure “On monitoring and reviewing academic programs” is developed. In practice, however, PAPs are not properly controlled, and the review policy is not clear, either.

**Considerations:** The academic programs for AMI specialties are structured in accordance with the adopted standards, which has a positive impact on planning PAP implementation. However, the study of individual PAP components leads to the conclusion that some of them are “artificial”. There is a noticeable lack of unified approach to course program development and to their connection with the academic program.

In spite of the available documents, lecturers do not ultimately receive sufficient guidance or consultancy in selecting teaching and learning methods. There is no policy in place for selecting methods. Even in clinical teaching there is no coordinated approach. As a result, the choice of actual methods is at lecturers' discretion. Meanwhile, some efforts are made to improve the methods, but they are not yet institutionalized.

Assessment regulations, although available in the form of documents, are still formal. Assessment components are defined, but there are no criteria, which is crucial especially in assessing practical skills. Such flaws in the assessment system ultimately endanger trust in the competences of specialists produced.

There is no clear procedure for PAP benchmarking at AMI, but compliance with local medical university programs is sufficient for domestic mobility. Programs do not include components directly contributing to international mobility.

In spite of the monitoring and review procedures of the programs, PAP implementation is not properly controlled, which is a particularly important issue in teaching clinical subjects. The main guidelines for program improvement are improvements by other HEIs; such approach precludes competitive advantage at the program level.

**Summary:** Taking into consideration certain breach between PAP outcomes and components, the lack of selection policies and guidelines for teaching, learning and assessment methods, the lack of monitoring of the effectiveness of academic programs, the uncertainty of practical skills assessment, problems related to monitoring different cycles it can be concluded that the processes of PAP planning, implementation and monitoring need to be substantially improved.

**Conclusion:** The compliance of AMI institutional capacities with the requirements of Criterion 3 is evaluated as unsatisfactory.

#### IV. STUDENTS

**CRITERION: The Institution provides support services to students ensuring productive learning environment**

##### **Findings**

**4.1 The Institution has set mechanisms for promoting students' recruitment, selection and admission procedures.**

Admission of applicants for AMI BA full-time academic program is implemented according to the procedure "On admission to state and non-state higher education institutions" approved by RA Government Decree of 26.04.2012. Admission is implemented as a result of unified state examinations. Each year AMI has the right to admit 180 and 140 students for «Dentistry» (BA and MA) and «Medical work» specialties, respectively.

AMI students go to high schools in Yerevan and regions, as well as in Armenian-populated regions of Georgia during April and May, meet with students mostly interested in natural sciences, talk to students and their parents, and tell about their alma mater. In May and June, AMI organizes "open days", during which interested students visit the university, meet students, faculty, observe auditoriums, the gym, the unique museum of anatomy, the phantom classroom, the technical lab, the laboratory of inorganic chemistry. Mostly lectures by AMI or invited specialists on popular topics are planned these days.

It became clear during the expert visit that admission mechanisms are in place at AMI. Most students from the adjacent college continue their education at the university. It became clear during the meeting that recruitment mechanisms are mostly applied by SC members, who occasionally go to RA regional schools and provide AMI-related information.

Availability of tuition fee also plays a great role when choosing a university, which creates a competitive advantage among adjacent medical universities.

It also became clear during the expert visit that though AMI already implements admission of international students, there are no relevant documents to initiate education in foreign language.

According to the self-evaluation, statistics for the last five years indicate that the main reasons students are expelled from university include poor performance and absenteeism. The

main reasons for students' dismissal according to their application include changing residence, social conditions and personal issues.

#### **4.2 The Institution has policies and procedures for assessing student educational needs.**

According to the self-evaluation, it is the surveys (e.g. questionnaires reflecting the teaching quality and effectiveness, questionnaire of assessing the resources, and the like) that serve as main means of bringing out the educational needs of students. By means of surveys conducted among students and thanks to meetings with them it is possible to discover their opinion on the procurement with educational resources, effectiveness of teaching, the quality of providing current exams, the quality of conducting internship and final certification exams.

The institute has Student Council which brings to the surface the educational needs of students once in a while (meetings with students, analyses of student applications, and the like).

The participation of students in various councils (scientific, faculty, student, and the like), prescribed by RA legislation and internal protocol of the institute, immediately contributes to the process of bringing out the educational needs of students, and it is in councils where the feedbacks of students about the educational services provided by the institute and the issues concerning various spheres of its activity are introduced and discussed.

As a result of the expert visit it came to light that the center for quality assurance involves students in the processes of conducting relevant surveys. The students address the questions they are concerned with to the SC but these questions do not mainly treat of the educational needs.

#### **4.3 The Institution provides opportunities for extra-curricular activities and advising services aimed at supporting student effective learning**

According to the self-evaluation, AMI creates possibilities of organizing additional courses and providing consultation aimed at enhancing the effective learning of students. The organization of additional courses and consultation in AMI pursue two objectives: to contribute to the acquisition of knowledge by the students and to set the stage for the future professional activity of the student.

It is the students with slow study progress over the whole year that are mainly involved in additional courses who fill the gap in knowledge, write essays and answer the questions related to the topics by taking 1-2 courses a week, the study material is explained to them, the main significant parts of the subject are clarified, as a result providing satisfactory knowledge.

As a result of the expert visit it came to the surface that AMI has clearly set a schedule related to the additional courses during which those students who have missed a lesson can

attend and fill the gap. English courses are also organized in AMI which are conducted for an extra charge.

#### **4.4 There are precise regulation and schedule set for students to turn to the administrative staff for additional support and guidance.**

The institution of curators operates in AMI which is meant for assisting and instructing students. The members of professional faculty of the institute, more often than not, the workers of the chairs responsible for quality assurance can also act like curators.

The deans and vice-rector for educational affairs have appointed/reserved hours for student admission.

Over the semester once or twice the deans organize semester consultation for all years which the heads of chairs of all subjects taught in the given year and/or the chair workers responsible for quality assurance can take part in.

#### **4.5 The Institution has student career support services.**

According to the self-evaluation, annual meetings are conducted for graduating students with top specialists of large clinics from different RA regions, internship units are expanded for consolidating the connection between graduates and labor market.

After the expert visit it came to light that the Career Center does not operate in AMI.

AMI has Graduate Student Association which serves as a liaison between graduates and the institute. With the help of this body it is possible to control the career growth of students after graduating from the institute.

#### **4.6 The Institution promotes student involvement in research activities.**

According to the self-evaluation, a particular number of students (2-5) is involved in the scientific and research activity conducted by the majority of the chair's lecturers, and these students, having participated in those researches, become coauthors of articles published in local and global journals. Students contribute to the chairs' scientific and research activity and conduct mainly abstract type of work.

As a result of the expert visit it came to knowledge that AMI has student scientific society which, in turn, has not so many members. It came to the surface as well that very few students contribute to the researches, including applied researches.

#### **4.7 The Institution has a special body, which is responsible for the protection of students' rights.**

Pursuant to the self-evaluation, Student Council ensures processes of student self-government and self-management for all the students of the institute, expresses and protects student interests, furthers their sport, social, scientific, intellectual, creative, cultural, moral and spiritual development, and creates ties with scientific, educational and other organizations of the RA HEIs.

SC is formed by selecting the representatives. If the group consists of 125 students, it can have only 1 member, and those with more than 125 students can have 2 members. SC members are nominated by fellow students. The candidate, who receives the most votes, gets elected. The SC consists of committees on training, information, culture and entertainment.

According to the self-evaluation, for protecting student interests the members of the committee on training have taken part in the process of appealing knowledge evaluation since 2008. The results of surveys conducted regularly by the committee on trainings are discussed at thematic meetings of the debating club including students and lecturers.

As a result of the expert visit it came to light that the SC does not perform intense activity in terms of protecting student rights. The same problem is stated in student guidebook too in which the issues related to the protection of student rights are not highlighted.

#### **4.8 The Institution has set mechanisms for the evaluating and ensuring the quality of educational, consultancy and other services provided to students.**

Quality assurance as an integral system started to operate in 2012 when the Center for Education Quality Assurance was started in the institute, and the central and faculty committees of quality assurance were founded.

As a result of the expert visit it came to knowledge that ANQA conducts surveys aimed at assessing students' educational and other needs in AMI. But the analysis of the given surveys is not accessible for students. After the meetings it became known that the students, by and large, assess positively the available resources by means of which education is assured. This view may be largely influenced by the fact that the students mainly conduct their classes in the adjacent Erebouni Medical Center.

**Considerations.** The expert group welcomes the fact that AMI has mechanisms for recruiting, selecting and admitting students. It is worth mentioning that mainly the students from the adjacent Medical College enter AMI but the institute does not still have agreements with

colleges which would boost the increase of its students. It is also positively assessed that the students are involved in activities conducted in ANQA, and students are entitled to voice their problems, in the meantime, the level of students' awareness is still low concerning the fact who should be addressed when this or that problem crops up.

Despite the fact that the institute has no career center, the expert group assesses positively the fact that the institute, being located and having cooperation with the institute, can have its positive impact on the further career of the institute.

The expert group welcomes that fact that the students of the institute are entitled to have classes in the adjacent medical centers and clinics, meanwhile, it is necessary to have classrooms furnished with waxworks.

The small number of students involved in researches gives rise to concerns since it puts at risk students' acquisition of analytical skills.

**Summary.** Taking into consideration the fact that the institute has particular mechanisms for recruiting students, surveys are conducted for bringing to the surface the needs of students, students are entitled to fill missed courses, additional courses of English are provided, bodies like SC and SSS operate in the institute, the expert group infers that AMI meets the requirements of criterion 4.

**Conclusion.** The compliance of AMI institutional capacities with the requirements of Criterion 4 is evaluated as satisfactory.

## V. FACULTY AND STAFF

**CRITERION: The Institution has a highly qualified teaching and support staffs to achieve the set goals for academic programs and institution's mission.**

### **Findings**

#### **5.1 The Institution has policies and procedures promoting recruitment of a highly qualified teaching and supporting staff for the provision of academic programs**

AMI considers one of its objectives in its strategic plan the sustainable and qualitative replenishment of the professional and administrative staff, the procurement of necessary resources for the development of professional growth. This objective gives rise to the following problems: replenishment and improvement of the PF in compliance with the requirements of educational programs and quality assurance, improvement of material and technical base.



Since 2011 the mechanism of selecting PF on a competitive basis has been endorsed, envisaged by “the Procedure of Selecting Lecturers”. But the selection of the professional faculty has often been conducted based on the contract signed with the institute’s rector (with the agreement of the head of the chair).

Various means of encouragement can be applied for assuring high indicators and properly performing assignments while carrying out their work commitments, but these mechanisms are not systemic.

Over the last 5 years the professional faculty has been updated and replenished. The requirements introduced to the lecturers are regularly reviewed by the administrative staff and representatives of ANQA, and the main staff make up 50, 89% (57 individuals) of the whole teaching staff. Advertisements for job vacancies are placed in republic media, but they should be placed in relevant platforms available on the internet. There are many cases of conducting the procedure of selecting lecturers without competition.

## **5.2 The requirements for qualifications of teaching staff per academic program are comprehensively stated.**

“Requirements for the qualifications of the teaching staff in line with PAPs” are not integrated with PAPs. The requirements are set according to separate PAPs.

Overall, the university has specific requirements for selecting the professional faculty. But the requirements are not adapted to the objectives and outcomes of the academic programmes.

Pursuant to the self-evaluation, AMI selects lecturers for each subject taking into account basic education, qualification, work (teaching) experience of the latter and the results of the competition.

## **5.3 The Institution has well established policies and procedures for the periodic evaluation of the teaching staff.**

For regularly evaluating the professional faculty and checking their relevance to the job observations, surveys, discussions are conducted, drawbacks are found out, and measures are developed for fixing and abolishing them. There is also a protocol of conducting observations available but the procedure is precisely set. Besides, there is also a certain order of lecturers’ certification but certification standards are not defined.

Regular evaluation of the professional faculty's quality has been accomplished by the lecturers of the chair through mutual class observations. According to the self-evaluation, certification of the lecturers is conducted once every 3 years.

There is a certain order and form for conducting class observations.

The form "The lecturer through the student's eyes" was redeveloped in 2018-2019.

#### **5.4 The Institution promotes professional development for the teaching staff in accordance to the needs outlined during regular evaluations (both internal and external).**

According to the self-evaluation, for regularly evaluating the professional faculty and checking their relevance to the job observations, surveys, discussions are conducted, drawbacks are discovered, and measures are developed for fixing and abolishing them.

AMI organizes courses meant for acquiring and improving pedagogical skills of lecturers.

Professional faculty's participation in various international and local, scientific and training seminars and conferences enhances their qualification.

The process of perfecting lecturers is not systematized. AMI takes up very few steps for improving lecturers.

#### **5.5 The Institution ensures that there is a permanent staff for the stable provision of the academic programs.**

AMI has specific order which contributes to the selection and maintenance of the professional faculty with relevant vocational qualifications.

There is "the procedure of ensuring sustainability of the main professional faculty" which is of declarative character.

The dynamic growth of salary also enhances the sustainability of procurement with PF. For example, in 2017 compared to the previous year salary fund grew by 20%. The aggregate total of the salary fund increased in 2018-2019.

#### **5.6 There are set policies and procedures for the staff promotion.**

The institute has currently 126 workers, 65 of which have titles. The median age of institute's professors is 63, and in case of associate professors it is 54.

Over the academic year the workers of the institute receive rewards, allowances and the like, but the monitoring system of the workers' social status does not yet operate in the institute, and the level of workers' social satisfaction is not being evaluated.

There are no policy and procedures for assuring professional growth of the PF.

Over the last 5 years the median age of the PF of the institute has rejuvenated by 4 years.

For enhancing computer literacy of the staff private courses are conducted but these courses are not envisaged for the administrative and study-related staff.

### **5.7 The Institution has necessary administrative and support staffs to achieve the strategic goals.**

According to the self-evaluation, the effectiveness of the administrative staff's performance proceeds from the accurate selection of the PF and their engagement in the teaching process which enhances the quality of students' education, high academic performance, moreover, decreases the number of students dropping out of the institute.

**Considerations.** The expert group considers that AMI is provided with the PF and study-related staff with sufficient vocational qualifications for accomplishing its PAP objectives.

The rector has ratified "the procedure of selecting lecturers" which stipulates replenishment of teaching staff on a competitive basis. But the members of teaching staff sometimes get hired not on a competitive basis. The policy of replenishing PF and study-related staff are still on the stage of development.

The expert group welcomes the fact that in the process of selecting lecturers for each subject of the academic program their basic education, vocational qualification, work experience are considered, but the requirements for the vocational qualifications of the PF for each academic program of AMI do not yet need precision. Job portfolios for replenishing the PF are not available.

The fact that AMI is replenished with young lecturers which will boost the process of teaching staff's generational shift is also welcomed.

The expert group positively assesses the fact that AMI has developed different approaches for periodic control and evaluation of the teaching staff, including class observations, student surveys, and the like. It is good that the institute has a system of encouraging PF; in addition, some trainings are conducted for the PF. These approaches will undoubtedly contribute to the effective performance of its PAPs. But the systems of increasing AMI workers' qualification, as well as the certification systems of the PF and study-related staff are not regulated. Not all lecturers take trainings; in some cases the workers take vocational trainings on

their own initiative. The monitoring system of the staff's social status does not yet operate in the institute, and the level of workers' social satisfaction is not being evaluated.

**Summary.** Taking into consideration the fact that AMI has a certain policy of selecting its PF and study-related staff, approaches of training and evaluating the PF are taken up which are aimed at perfection of the lecturers, and AMI attaches importance to the rejuvenation of the PF, the expert group considers that AMI meets the requirements of Criterion 5.

**Conclusion.** The compliance of AMI institutional capacities with the requirements of Criterion 5 is evaluated as satisfactory.

## VI. RESEARCH AND DEVELOPMENT

**CRITERION: The Institution ensures the implementation of research activity and the link of the research with teaching and learning.**

### **Findings**

#### **6.1 The Institution has a clear strategy promoting its research interests and ambitions.**

Pursuant to AMI's SP, the HEI tends to develop the research performance of the institute. This objective entails the following problems: to enhance the effectiveness of the research work of the institute's internal stakeholders, to contribute to the increase of its effectiveness.

According to the self-evaluation, the assurance of the sustainable growth of the number of young specialists with high qualifications, attaching importance to the role of conducting scientific researches, creation of work atmosphere in line with the educational, scientific, biological and medical innovations are among the most important objectives of AMI's development.

By the self-evaluation, institute's students do their experimental researches in those partner organizations where AMI lecturers do their researches, but it is not known what kind of researches are performed in AMI.

"The strategy of performing Armenian Medical Institute's researches, and the structure of their organization and systematization" was endorsed in 2019 which prescribes some pretensions (their realismity is not considered). The scope of interests is not specified.

Pursuant to 2016-2020 SP, the development of institute's research performance is a strategic objective. But the problems and actions deriving from this objective are uncertain,

consequently, they envisage no specific steps. Besides, the SP does not reflect the scope of institute's research interests, and its pretensions.

## **6.2 The Institution has a long-term strategy and med term and short-term programs that address its research interests and ambitions.**

According to the self-evaluation, many outstanding scientists teach in AMI whose scientific works dictate the institute's pretensions and possibilities in the field of research. Short- and medium-term research works are done, but the works are not introduced.

The main provision of the long-term strategy in the field of science is the creation of its scientific center, and the procedure of its implementation also envisages development and performance of medium- and short-term academic programs for expanding the scope of its young specialists too. But the visit comes to witness that creation of the institute's scientific center is not planned.

Self-evaluation prescribes that researches are mainly performed on those topics which are highly applicable in the field of theoretical and practical medicine, but the way this process is managed and regulated is not introduced.

## **6.3 The Institution ensures the implementation of research and its development through sound policies and procedures.**

According to the self-evaluation, AMI has created favorable conditions (in Erebouni Medical Center, institutes of NAS) for performing qualitative researches in terms of ensuring the effectiveness and relevance of the policy and procedures aimed at boosting the development of researches and innovations.

Pursuant to the self-evaluation, over the last three years certain amount of money (2%) has been assigned from the institution's budget for accomplishing the objectives of research and development. But the objectives of the research and development are not introduced. The effective usage of the resources allocated for science is not being evaluated.

For encouraging the research performance of AMI's young staff the HEI furthers the process of engaging senior students in the research activity of the institution.

The document "Strategy of performing Armenian Medical Institute's researches, and the structure of their organization and systematization" defines some procedures, besides the HEI launches research assistant system which tends to hire the graduates with honors for taking part in performing researches.

#### **6.4 The Institution emphasizes internationalization of its research.**

According to the self-evaluation, AMI attaches importance to the internationalization of its research performance. From the day of its foundation on, AMI has published numerous monographs, textbooks and methodological manuals, and has organized a series of student scientific conferences. There are many textbooks and methodological manuals among the publications. Over the last years (2016-2019) the number of publications has drastically reduced.

According to the self-evaluation, since the day of its foundation AMI has published medical journal Erebouni where the monumental events taking place in the institute and its main student base Erebouni Medical Center are shed light on. AMI students and lecturers also issue their articles in the above-mentioned journal, magazines “Health Service” and “Medicine”, and other journals.

By the self-evaluation, AMI is the information assistant of the scientific journal “Banber: Oral and Maxillofacial Surgery” which is published under the auspices of AMI’s scientific council.

#### **6.5 The Institution has well established mechanisms for linking research with teaching.**

Pursuant to the self-evaluation, 24 doctors of science and professors, 5 members from foreign academies and many candidates of science teach in Armenian Medical Institute. AMI organizes annually scientific conferences among students of different HEIs whose articles, theses are published in a scientific collection. “The mechanisms for interconnecting research performance and academic process” were endorsed in 2019, but the purpose and application of the document are not specified.

**Considerations.** The expert group welcomes the fact that AMI in its SP attaches importance to the role of research performance in medical education; moreover, its SP also includes the problems directed at the development of the institute’s research performance. But its SP does not reflect the scope of institute’s research interests, and pretensions. The strategic order of available scientific researches is mainly dedicated to the organization and systematization of science where short- and medium-term programs, main areas of institute’s scientific activity are not specified. That order does not contain any management model of the scientific activity which is not yet conducted. Topics of scientific works are not specified and partially controlled; reports on performing research activity are not available. The expert group welcomes the fact that for developing its research performance AMI cooperates with workers of Erebouni Medical Center

and especially many institutes of NAS, and makes use of the resources of those institutions. But this approach is difficult to control and is risky too in terms of sustainable and unflinching performance of AMI's researches. This cooperation should be harmonized with AMI's scientific pretensions, areas and resources (scientific units). Moreover, after the visit it became known that the institution attaches importance to performing research activity only formally, it considers its development unrealistic, so assigns rather small number of finances for performing them. The expert group considers that the lack of modern scientific and research laboratories will impede the creation of scientific units within the structure which is planned to be fulfilled in the long-term strategic plan of researches.

AMI takes some actions targeted at enhancing the internationalization of its research performance. Active participation of the staff's members in various vocational conferences is observed which is very important in terms of modernization of research performance. But the staff's participation in the grants assigned for local and international science and education is very low. Despite the fact that numerous works have been published they are mainly monographs, textbooks and methodological manuals. The indices of the scientific works published by AMI workers are not so high; the publications are primarily materials of conferences, very few reviewed works are published in global journals with influence coefficient.

AMI takes some actions targeted at creating mechanisms for interconnecting research performance and academic process. The expert group positively evaluates the creation of SSS and implementation of annual conferences among students from different HEIs whose articles and theses are published in a scientific collection. But the participation of young specialists in scientific researches is still low, primarily because of the lack of science and research center in AMI and lack of research laboratories, low motivation of young specialists for getting engaged in scientific activity and other reasons.

**Summary.** The expert group considers that the scientific and research area in AMI still has some unsolved problems, the strategy reflecting AMI's research areas and pretensions is not available, long-, medium- and short-term specific programs are not available. The mechanisms for interconnecting research performance and academic process are not specified which mainly proceeds from incomplete management mechanisms of material and technical resources and scientific activity.

**Conclusion.** The compliance of AMI institutional capacities with the requirements of Criterion 6 is evaluated as unsatisfactory.

## VII. INFRASTRUCTURE AND RESOURCES

**CRITERION: The Institution has necessary resources to create learning environment and to effectively support the implementation of its stated mission and goals.**

### **Findings**

#### **7.1 The Institution has an appropriate learning environment for the implementation of current academic programmes.**

According to self-evaluation, the education implemented in the territories of renting clinical units gives students an opportunity to gain professional knowledge making use of modern equipment. The strategic plan highlights the problems of renovating and improving the auditoriums, building conditions, material-technical base of AMI, classrooms of clinics, replenishment of chairs with appropriate materials and equipment, expansion of educational-scientific laboratory units, the necessity of improving computer activities, which is being implemented stage by stage.

Clinical chairs are located in 27 advanced medical centers. The clinical courses and educational-productive internship is implemented in clinics in specially furnished rooms and areas, which are rented by the HEI and are being utilized.

Teaching clinical subjects in the institute is implemented by a corresponding syllabus by the participation of advanced local specialists in clinical departments, well-equipped laboratories, surgeries, dressing wards, in conformity with contracts signed with clinics.

#### **7.2 The Institution provides appropriate financial resources with necessary equipment and facilities as needed to achieve its mission and goals.**

The AMI strategic plan highlights the reconstruction and reequipment problems of auditorium fund, building conditions, material-technical base, clinic auditoriums, library and other components of educational environment.

The main source of financing for AMI is tuition fees. Financial activities of the HEI are implemented in accordance with the HEI charter.

The management of finances of AMI is implemented by the Founding Board each year; allocation of financial means is implemented among services of different bodies of AMI, based on the expenses and entries of the previous year.



### **7.3 The Institution has policy on financial distribution and capacity to sustain and ensure the integrity and continuity of the programmes offered at the Institution.**

Every year, based on tuition fee entries after student admission of previous year, an estimate is made by the Management Board and an order is released by the Rector, on the basis of subaccounts of previous year, which are comprised of salaries, purchase of laboratory and working materials spent with the aim to ensure educational process, expenses of renovation and reequipment of library, laboratories, and auditoriums, financing of rented educational and educational-productive units, economic expenses and other necessary purchases. While forming the budget applications filed by all departments are taken into consideration.

### **7.4 The Institution's resource base supports the implementation of Institution's academic programmes and strategic plan, which promotes sustainability and continuous improvement of quality.**

There is a "Regulation of survey-assessment on satisfaction of teachers and learners by material-technical and methodological equipment (reapproved)", however it does not regulate the procedure and consequences.

According to self-evaluation, both the students and the institute evaluate the resources as unsatisfactory.

Technical resources and scientific-laboratory base are not sufficiently presented in theoretical chairs. With the aim to amend this the HEI has planned to cooperate with foreign organizations. During the accountable period measures were taken to expand the resource base and align academic programs.

### **7.5 The Institution has a sound policy and procedure to manage information and documentation.**

Information and documentation processes of the institute are regulated by AMI inner orders, RA code and other legal acts. Information and paperwork in the institute are regulated by the head of staff and human resources officer, who implement admission, registration, stocking of letters, documents and other writings addressed to the institute and distribution to their implementors, registration and delivery of letters, documents and other writings in the name of institute, as well as registration of circulation of documents among structural departments of the institute, control of terms for document implementation, delivery of department cases to the institute archive by the defined order, assurance of preservation and utilization of documents

during paperwork, methodological aid for correct formulation and implementation of documents in structural departments.

There is a management order of document circulation procedures in the HEI. However, nothing was written about this order in the AMI inner regulations or other presented documents.

The AMI inner regulations do not define the documentation order.

#### **7.6 The Institution creates safe and secure environment through health and safety mechanisms taking into account the students with special needs.**

According to self-evaluation, the security of AMI is implemented by legislation and defined order of inner regulatory rules. Security of AMI encompasses the functions of ensuring security of the building, the nearby yards and areas and all the properties, as well as ensuring security of students in the institute and security during the implementation of responsibilities of AMI management and staff. AMI provides healthy and safe environment by means of healthcare and security programs. Security guards provide all-day watch, during day hours volunteers from the Students' Council and sanitary cleaning staff join them, who are 6 in number and enhance territory surveillance in day hours, the territory is also observed by surveillance cameras.

Wheelchair ramps have been built for approaching the building, handles have been fastened in the lavatories of the first floor, a special notebook has been put in the canteen, in which people with diabetes or students having any sort of food allergy can order special food.

#### **7.7 The Institution has special mechanisms in place for the evaluation of the effectiveness, applicability and availability of resources given to the teaching staff and learners.**

ANQA has developed a set of tools and procedures aimed at the assessment of effectiveness, applicability and availability of educational resources and counseling services. According to the procedures a multidimensional monitoring on planning, acquisition, application and service of financial and educational resources should be implemented, based on survey results, study of needs and study of department reports. The degree of satisfaction with resources is mainly assessed by means of surveys, meetings and interviews, which are periodically conducted with internal and external stakeholders. The results of surveys are generalized.

There are tens of points in the surveys, which have no explanation or are not included in the coming strategic plan as an objective.

**Considerations.** The most important component of educational environment is clinics, where learners not only get the opportunity to work with real equipment and patients, but also

are able to work in as real an environment as possible. AMI laboratories need replenishment for theoretical teaching.

Nearly the only source of financial resources is tuition fees: such lack of income diversification is risky. Financial planning is detached from strategic plan, as a result of which separate SP goals remain largely declarative. AMI strives to allocate finances for the satisfaction of needs reflected in estimates, however possible, but it is much more important to set priorities in the conditions of limited resources and to allocate resources accordingly.

The material resource base both owned and rented by AMI serve for the implementation of programs. The fact that periodically resources are directed at amendment of building conditions demonstrates that AMI values the relevance of its resource base. However, the same can be said about library resources only partially.

Although document circulation in AMI is constantly occurring, its effectiveness has not been assessed yet. Nearly no measures have been taken towards digitalization of document circulation.

All in all AMI is able to ensure safe environment, which is also conditioned by the big number of doctors. The building conditions are mainly adapted for people with special needs, however there are no adapted learning materials.

AMI is trying to assess the effectiveness of available resources from the perspective of internal stakeholders, but it has not yet invested a full set of tools.

**Summary:** Taking into consideration the effective educational environment in clinics, the opportunity to work with equipment and patients, means aimed at improvement of building conditions, and the safe environment, it can be concluded that AMI has sufficient resources for the implementation of mission and goals.

**Conclusion:** The compliance of AMI institutional capacities with the requirements of Criterion 7 is evaluated as satisfactory.

## VIII. SOCIETAL RESPONSIBILITY

**CRITERION: The Institution is accountable to the government and society for the education it offers and the resources it uses as well as for the research it conducts.**

### **Findings**

#### **8.1 The Institution has clear policy on accountability.**

The main accountable document of AMI activities is the annual report, which reflects works conducted in various spheres of activity. Another way of accountability is discussions on implementation of strategic plan and current works in the Scientific Council.

In 2019 the documents “Mechanisms of Armenian Medical Institute for Transparency and Availability of Procedures of Public Information” and “Procedure of Responsibility and Accountability Order Defined by AMI” were approved. However, the first does not define any regulation: the document does not set mechanisms subject to implementation, but includes non-imperative general description. The second document enumerates some mechanisms, however no period of implementation or responsibilities are set.

## **8.2 The Institution ensures transparency of its procedures and processes and makes them publicly available.**

According to self-evaluation, the AMI official website is highlighted in the information process, where the public can access events and activities in the institute. However, the frequency of website update is low.

The website is trilingual. The IT specialist (in consultation with various departments of the Institute) is responsible for content update.

Part of the procedures are put in the website, but they are mostly not translated. “Erebuni” magazine is also being published, the electronic versions of latest issues of which are released in the website. The magazine is collaborative and only partly covers AMI activities.

## **8.3 The Institution has sustainable feedback mechanisms for establishing contacts with society.**

AMI has developed a document “Mechanisms Contributing to Formation of Feedback with Public in Armenian Medical Institute”, which, however, does not contain any regulation: it is merely a general description of possible directions of feedback.

According to self-evaluation, the Rector, Vice Rector in Educational and Scientific Affairs, Deans have admission hours during the week, there is a “Feedback” window in the AMI official website. Nevertheless, there are no mechanisms ensuring and enhancing feedback.

## **8.4 The Institution has mechanisms that ensure knowledge /value/ transfer to the society.**

According to self-evaluation, AMI organizes lectures with the participation of the best specialists in the field, undergoing trainings in ANQA. ANQA employees have organized

additional trainings for the administrative and teaching staff in the HEI, additional language classes are going to be organized. However, the mentioned activities are targeted at internal stakeholders.

Some scientific-educational materials can be openly accessed in the AMI website, as well as some publications are available in magazines.

SC representatives sometimes visit schools introducing some information on activities of AMI.

**Considerations.** In spite of the availability of some accountability mechanisms, they have not yet turned into external accountability. The approved documents do not create any clear regulation, which results in no guarantee or order of accountability in AMI (except those required by legislation).

The fact, that dealing with the low frequency of updating website, i.e. the main tool making the activities of AMI transparent, was assigned to the IT specialist not only from the technical, but also from the content perspective, comes to prove that there is still no policy of ensuring transparency of activities and procedures in AMI, although the introduced mechanisms give an opportunity to ensure transparency and public accessibility.

Opportunities for feedback are created for both internal and external stakeholders, but they are only opportunities and are not aimed ensuring feedback. AMI does not initiate feedback.

AMI makes some scientific-educational materials accessible for public in the website, however there are no mechanisms, which guarantee providing public with knowledge. It can be concluded that providing the public with knowledge and values is entirely left for the initiation of external stakeholders. Maybe the only exception is SC visits to schools, which, however, are not yet firmly formed mechanisms and are mainly targeted at attracting applicants.

**Summary:** Taking into consideration the lack of accountability order, as well as policy of ensuring transparency of activities and procedures, shortage of initiative in ensuring feedback and providing public with knowledge, it can be concluded that AMI has not yet formed stable public accountability mechanisms for its provided education, implemented research and use of resources.

**Conclusion:** The compliance of AMI institutional capacities with the requirements of Criterion 8 is assessed as insufficient.

## IX. EXTERNAL RELATIONS AND INTERNATIONALIZATION

**CRITERION: The Institution promotes experience exchange and enhancement through its sound external relations practices, thus promoting internationalization of the Institution.**

## **Findings**

**9.1 The Institution promotes its external relations through sound policies and procedures aimed at creating an environment conducive to experience exchange and enhancement and internationalization.**

Since the day of its foundation AMI has only been oriented towards the local market, although for the last few years taking into consideration the possible financial profits, it has started to view the possibilities of foreign students studying.

Provisions on internationalization are defined in the SP. Particularly, AMI has set a goal to extend cooperation with Armenian and foreign HEI-s, promote inter-university academic mobility of students and lecturers, ensure participation of foreign experienced specialists in developing and introducing educational and scientific programs, create conditions for the admission of foreign students in the HEI and the educational process, enhancing the knowledge of foreign languages by the AMI lecturers, as well as inviting new lecturers. There is an “AMI Admission Organization Order of Foreign Students”.

Nevertheless, the regulations on internationalization do not contain any element or procedure of encouragement policy. AMI mostly values relations with local organizations (especially clinical ones).

**9.2 The Institution’s external relations infrastructure ensures regulated process.**

According to self-evaluation, till now there is no infrastructure in AMI for ensuring foreign relations and internationalization.

It has been decided to assign the coordination of scientific activities to the Vice Rector in Scientific Affairs, however the latter’s position is vacant.

Recruitment of foreign students is delegated to a specialized organization.

According to self-evaluation, the presence of foreign students will impel to create a special department or a position of a responsible person.

**9.3 The Institution effectively collaborates with local and international counterparts.**

Foreign cooperation is firstly implemented within the framework of organizing clinical education: AMI collaborates with several local organizations. Cooperation with the latter is long-term and mutually profitable, as clinical educators receive appropriate payment and rating units.

There are a few memorandums signed with foreign foreign HEI-s, however they do not function.

Starting from 2019-2020 AMI will have foreign students. Besides the recruited students, there are also foreign students transferred from other local HEI-s.

AMI has planned to have a dormitory.

#### **9.4 The Institution ensures internal stakeholders' appropriate level of a foreign language to enhance efficiency of internationalization.**

Teaching foreign languages is included in all the curricula. However, according to self-evaluation, the allocated quantity of hours is not sufficient for ensuring proper level of language knowledge.

The quantity of employees knowing foreign languages has not changed nearly for the last few years.

Nevertheless, according to self-evaluation, the teaching staff is periodically taking part in congresses, conferences and seminars in leading foreign universities and clinics.

**Considerations.** AMI is currently taking its first steps towards internationalization. The internationalization policy is still at the stage of development. However, during the last years of its development AMI has valued relations with local organizations, which it considered a priority in the conditions of limited resources.

Only direct financial entries are considered as internationalization profits yet, which jeopardizes functioning of more prospective directions of internationalization, which also imply indirect profits.

There are no departments in AMI implementing the function of ensuring foreign relations and internationalization, which means that Rector is the one mainly dealing with foreign relations, besides, decentralized and non-coordinated procedures are taking place. Such approach can seem justified in terms of small range of international relations, taking into consideration the expenses of creating and preserving an appropriate department, although it strictly limits the opportunities of expanding foreign relations. AMI is not committed to making major contributions towards internationalization, before some profits are made. Consequently, the importance and merits of internationalization have not been evaluated and realized by AMI yet.

It can be concluded from mutually profitable and long-term relations with local medical institutions that they are not at risk. In terms of relations with local organizations AMI has managed to form a stable network.

Admission of students, who wanted to transfer from another HEI, comes to prove that AMI takes given opportunities, but has not yet set a goal to put great efforts in their implementation. The future dormitory, however, will expand the opportunities of internationalization and will make AMI more appealing for foreign students.

Unfortunately, AMI is not still consistent to the implementation of signed memorandums, which make some part of international relations a mere formality.

In spite of some participation in various international events on behalf of teaching staff, their knowledge of foreign language was not ensured by AMI. The steadily insufficient level of data characterizing knowledge of foreign language comes to prove that AMI does not put proper efforts towards this.

**Summary:** Taking into consideration close and stable cooperation of AMI with local clinical organizations, the first steps and goals towards internationalization, gradual alignment of resources to the needs of foreign students, it can be concluded that AMI ensures some exchange of experience and development by means of foreign relations.

**Conclusion:** The compliance of AMI institutional capacities with the requirements of Criterion 9 is evaluated as satisfactory.

## X. INTERNAL QUALITY ASSURANCE SYSTEM

**CRITERION: The Institution has an internal quality assurance system, which promotes establishment of a quality culture and continuous improvement of all the processes of the Institution.**

### **Findings**

#### **10.1 The Institution has quality assurance policies and procedures.**

The formation of current QA internal system has started since 2011, when the infrastructure of quality assurance was created and surveys were conducted.



Currently, documents named “QA Working Guidelines”, “QA Manual” “Policy of Education Quality Assurance” are approved by AMI. There are also procedures of various surveys. However, there are repetitions of regulations in the above mentioned documents.

Besides the surveys, AMI is trying to assess effectiveness of various activities by means of current reactions and writes; statistical methods are also being used .

### **10.2 The Institution allocates sufficient material, human and financial resources to manage internal quality assurance processes.**

In 2011 a working group for self-evaluation of institutional capacities of AMI was created, on basis of which in 2013 Education Quality Assurance Center was created with permanent staff. Currently the center has 3 positions, as well as a separate office, which is provided with necessary equipment.

The objectives and functions of the center are defined by the order of the center.

QA committee of Scientific Council and QA Faculty committees were also created in AMI, QA responsible people were assigned in chairs. Some of their functions are defined by the QA Manual.

7 employees of the institute took part in three-staged courses titled “Development and Improvement of Systems of Quality Assurance of Education” in 2016-2019.

Quality Assurance Center is accountable to AMI Rector.

### **10.3 The internal and external stakeholders are involved in quality assurance processes.**

Besides participating in surveys as respondents, internal stakeholders were included in self-evaluation working groups and QA committee.

Several students aid the work of Quality Assurance Center.

Nevertheless, it was mentioned during the expert site visit that there is a lack of “down-up” accountability for Quality Assurance Center: besides, it became clear that communication between Rector and Quality Assurance Center is rare.

Quality Assurance Center, with the participation of teaching staff, organized events of promoting new teaching methods. According to representatives of Quality Assurance Center, new methods were mainly introduced by young educators.

### **10.4 The internal quality assurance system is periodically reviewed.**

The document “Policies and Procedures of Reviewing the System of Internal Quality Assurance” was approved, which, however, only contains general formulations and does not

identify the reviewing policies and procedures of AMI, as well as does not clarify approaches to assessment of effectiveness of QA internal system.

Nevertheless, according to self-evaluation, a program on improvement of activities was formed, based on the results of self-evaluation of AMI institutional capacities.

#### **10.5 The internal quality assurance system provides valid and sufficient grounds for the external quality assurance processes.**

QA internal system is largely based on terminology of European standards of quality assurance, and the self-evaluation was mainly implemented by the ANQA format.

QA internal system only partially provided the informational bases of self-evaluation.

With the aim of current assessment of activities, no application of quantitative indicators is intended in AMI.

#### **10.6 The internal quality assurance system ensures the transparency of the processes at the Institution providing valid and up to date information on their quality to the internal and external stakeholders.**

There are mechanisms in AMI, which make the information on the quality of procedures more accessible by separate groups of internal stakeholders, particularly reports filed to the Scientific Council and periodical meetings with students and teaching staff.

The website is viewed as a tool of ensuring transparency of information for external stakeholders, however no information is published on the quality of procedures.

**Considerations.** There are documents in AMI reflecting QA policies and procedures, but they are not systematized, which makes the practical exercise of regulations in the documents more difficult. QA procedures are described, but the guarantees of the implementation of these procedures are not clear because of the same non-systematization.

AMI is trying to assess the effectiveness of procedures by different approaches, however some of them are not analytical and assess only the fact of procedure implementation. Nevertheless, the practice of implementing analyses by statistical methods is gradually being introduced, which will ensure a more effective assessment, if developed properly.

In spite of the presence of QA committees and responsible people, the main part of quality assurance functions is implemented by Quality Assurance Center. The provision of means for the capacity building of the Center comes to prove that AMI highlights the activities of QA infrastructure. Although the capacities of Quality Assurance Center are satisfactory for

the current procedures of QA, taking into consideration the modifications of approaches in the internal system, a need for re-equipment and trainings by new directions might emerge in near future.

Aside from resources, Quality Assurance Center was also provided with considerable independence: it is accountable to the Rector.

Nevertheless, weak connection with the Rector jeopardizes the merits of independence for Quality Assurance Center.

Besides, taking into consideration both some detachment from the Rector, and lack of accountability from departments, it can be concluded that Quality Assurance Center is not fully integrated in internal information flows.

The involvement of separate groups of internal stakeholders in QA works comes to prove that quality assurance is valued by them. Nevertheless, there are still no involvement mechanisms for external stakeholders.

It is worthwhile to mention that some internal stakeholders takes part in QA procedures by different formats, but at the same time there is a significant majority of doctors in the teaching staff with years of experience of AMI, who, as is shown by the experience of Quality Assurance Center, have no great interest to engage in QA procedures.

There are no stable mechanisms of assessing the effectiveness of QA internal system in AMI.

Although the self-evaluation was implemented by an appropriate format, the activities of QA internal system was only partially useful for the self-evaluation. The reports and information on QA do not allow to implement a full assessment without additional data collection.

Although AMI has mechanisms for delivering information on quality of procedures to separate stakeholders, they do not ensure the transparency of that information. They are not immediately accessible for an information searcher, and the published information is only about procedures, but not about their quality.

**Summary:** Taking into consideration the quantitative and qualitative growth of QA procedures occurring in AMI, the stability of activities of Quality Assurance Center, involvement of some internal stakeholders in QA procedures, it can be concluded that AMI QA internal system overall enhances continual improvement of procedures and tries to contribute to formation of quality culture.

**Conclusion:** The compliance of AMI institutional capacities with the requirements of Criterion 10 is evaluated as satisfactory.

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA

<b><u>CRITERION</u></b>	<b><u>CONCLUSION</u></b>
1. Mission and Purposes	<b>Satisfactory</b>
2. Governance and Administration	<b>Unsatisfactory</b>
3. Academic Programs	<b>Unsatisfactory</b>
4. Students	<b>Satisfactory</b>
5. Faculty and Staff	<b>Satisfactory</b>
6. Research and Development	<b>Unsatisfactory</b>
7. Infrastructure and Resources	<b>Satisfactory</b>
8. Societal Responsibility	<b>Unsatisfactory</b>
9. External relations and Internationalization	<b>Satisfactory</b>
10. Internal Quality Assurance System	<b>Satisfactory</b>

**09 March, 2020**

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**Tigran Mnatsakanyan, Signature of the Expert Panel Chair**

## APPENDICES

### APPENDIX 1. CVS OF EXPERT PANEL MEMBERS

**Tigran Mnatsakanyan:** Graduated from Armenian State University of Economics (ASUE) with a degree in Management in 2008. In 2011 he received his PhD in Economics (“The directions of enhancing the effectiveness in Public Administration /case study of Armenia/”). He has been an assistant at the Chair of Management, ASUE, since 2011. In 2008-2011 he was the president of ASUE Student Scientific Society. Since 2009 he has been a Lecturer/Assistant at the Chair of Management, ASUE. He has published a number of scientific articles on theory of administration, history of public administration, contemporary issues in public administration, methodology and enhancement of evaluating efficiency, and issues in local government. He has participated in international conferences dedicated to improving quality in higher education.

**Anna Poladyan:** Graduated from the Department of Biophysics, Faculty of Biology, Yerevan State University, in 1994. In 1994-1996 she was a researcher at the Department of Biophysics, Faculty of Biology, YSU, and a senior laboratory technician. She was a junior scientific researcher in 1996-1998, a researcher in 2000 and a senior scientific researcher later in 2000-2018. She has received her PhD in Biological Sciences in 2000. She was a consultant at Microbial Biotechnology and Biofuel Innovation Centre in 2016-2017. Since 2012 she has been Associate Professor at the Chair of Biochemistry, Microbiology and Biotechnology, YSU. She has participated in exchange programs and a number of conferences. She has published about 22 scientific articles, books and textbooks. She has participated in about 12 grant programmes. She has been awarded a number of awards.

**Artem Grigoryan:** Studied at the Faculty of Preventive Medicine, Yerevan State Medical University, in 1997-2003. Since 2014 he has been Associate Professor at the Chair of Pathophysiology, YSMU. Since 2019 he has been Deputy Dean at the Faculty of General Medicine, YSMU.

**Pauline Gryss:** Graduated from Heidelberg University in 2005. She received her PhD degree in 2014. She has been the coordinator of the Education Department at Heidelberg Institute of Global Health and the responsible for Quality Assurance since 2012. She is a member of several professional associations. She has received a number of prizes and awards.

**Vache Gharibyan:** He is a 4<sup>th</sup> year student at the Chair of General and Pharmaceutical Chemistry, Russian-Armenian University. He participated in the training of student experts – «Student Voice» project – at ANQA.

## APPENDIX 2. SCHEDULE OF SITE VISIT

16–18.12.2019

	<b>16.12.2019</b>	<i>Start</i>	<i>End</i>	<i>Duration</i>
1.	Meeting with AMI Rector and Founders	09:30	10:20	50 mins
2.	Meeting with AMI Vice-rectors	10:30	11:30	60 mins
3.	Meeting with the work group in charge of SER	11:40	12:25	45 mins
4.	Lunch, Expert panel discussions			
5.	Meeting with the deans	12:35	13:35	60 mins
6.	Meeting with ANAU graduates (10-12 people)	13:45	14:25	40 mins
7.	Meeting with the representatives of AMI employers (10-12 people)	14:35	15:35	60 mins
8.	Closed discussions of the expert panel and review of the documents	15:45	16:45	60 mins

	<b>17.12.2019 p.</b>	<i>Start</i>	<i>End</i>	<i>Duration</i>
1.	Meeting with faculty chairs	09:30	10:30	60 mins
2.	Class observation	10:40	11:20	40 mins
3.	Meeting with the teaching staff (10-12 people)	11:30	12:30	60 mins
4.	Lunch, Expert panel discussions	12:40	13:40	60 mins
5.	Meeting with the representatives of the Student Council and Student Scientific Society	13:50	14:20	30 mins
6.	Meeting with students (10-15 people)	14:30	15:30	60 mins
7.	Study of Resources (auditoriums, offices, library, gym, first-aid room, cafeteria, visits to scientific centers)	15:40	16:40	60 mins
8.	Closed discussions of the expert panel and review of the documents	16:50	19:30	160 mins

	<b>18.12.2019p.</b>	<i>Start</i>	<i>End</i>	<i>Duration</i>
1.	Meeting with the staff of the Quality Assurance Center	9:30	10:20	60 mins
2.	Visits to deans offices and chairs /document review/	10:30	11:30	60 mins
3.	“Open meeting” with the expert panel	11:40	12:20	40 mins
4.	Meeting with the staff selected by the panel	12:30	13:30	60 mins
5.	Lunch, Expert panel discussions	13:40	14:40	60 mins
6.	Closed discussions of the expert panel and review of the documents	14:50	17:50	180 mins
7.	Final meeting with the AMI leadership	18:00	18:30	30 mins

### APPENDIX 3. LIST OF DOCUMENTS OBSERVED

N	Name of Document	Criterion
1.	Minutes of Scientific Council sittings (2018-2019)	2
2.	A sample of a completed work plan for a Chair	2
3.	Minutes of Faculty Council decisions	2
5.	Annual work plans and reports of the subdivisions	2
7.	Substantiation of the “Procedure for Dissemination of Public Information regarding Armenian Medical Institute” (Minutes of the sitting of the Scientific Council on 27.08.2019)	2
8.	Report on benchmarking results (example)	3
9.	Exemplary program for several courses taught at the Faculty of Medicine	3
10.	Portfolio (example)	3
11.	Student Papers (examples)	3
12.	Results of the survey on Academic Programmes conducted among students	3
13.	Results of the survey on Academic Programmes conducted among graduates	3
14.	Examples of revision and supporting documents of academic programmes	3
15.	Supporting documents regarding meetings at high schools in Yerevan, Marzes [Regions in Armenia] as well as in Armenian communities of Georgia	4
16.	Regulation on additional support and guidance for the students provided by the administrative staff	4
17.	Action plan developed following the surveys	4
18.	List of the employees with secondary employment with their main workplaces mentioned	5
19.	List of young lecturers	5
20.	Completed forms for class observations	5
22.	Certificates received by the teaching staff at international/local	5

	scientific and teaching-methodological workshops and conferences	
24.	During the academic year the Institute employees receive bonuses, aids (decrees)	5
25.	The best lecturers are provided incentives, such as certificates and cash prizes (example, decree)	5
26.	The plan of the scientific and publishing activities of the Institute for the current calendar year	6
28.	Monographs, textbooks and methodological manuals have been published since the establishment of AMI (examples)	6
29.	“Erebuni” monthly newspaper (example)	8
31.	QAD annual report and Action plan	10
33.	List of international organizations the Institute cooperates with	9
34.	Personal files of international students	9
35.	Questionnaire sample /student, lecturer/	4
36.	Means of disseminating information about the Institute (flyer, booklet)	8
37.	Financial report /annual/	7
38.	Example of student research work (article, research paper)	6
39.	Personnel reserve	5
40.	Staff list	5
42.	Attendance registers / analysis	2
44.	Questions and answers to the received letters (for 2019)	8
45.	Internship diary	3
46.	Internship program	3
47.	Sample of a student survey questionnaire	10
48.	Report of the Final Attestation Commission for 2017	2
49.	Scientific Research Strategy of AMI	6
50.	Curriculum 2012-2019	3
51.	Alumni Association Charter of AMI	4
52.	Minutes of the SC sittings	4
53.	List of students	4
54.	List of alumni	4

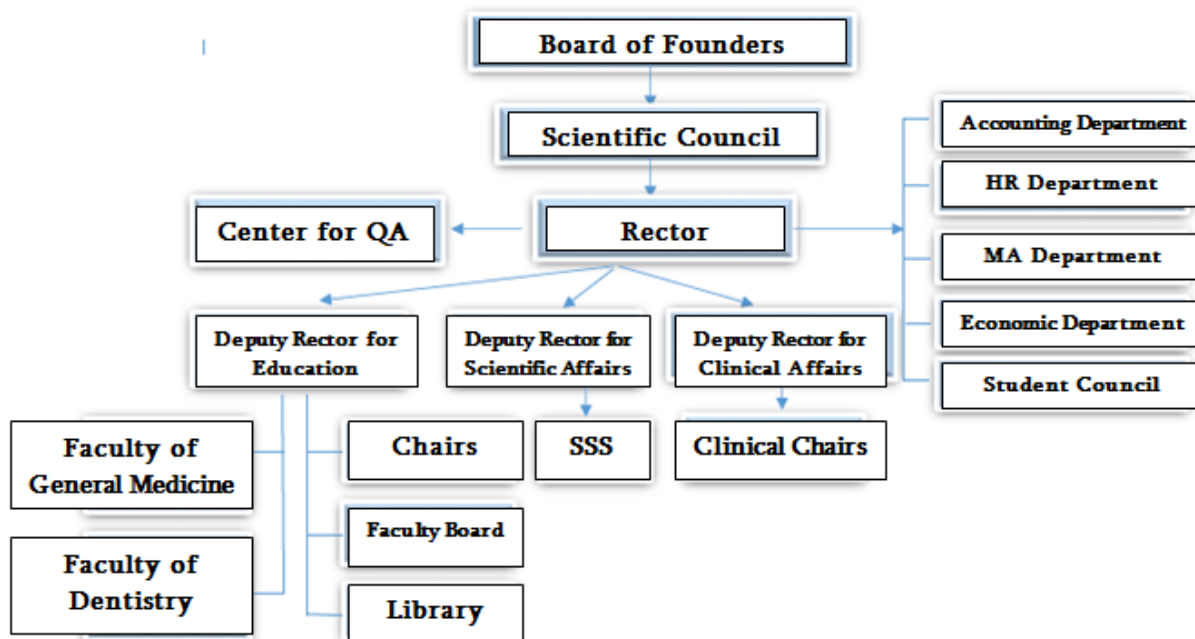


55.	Work plan: English language and medical terminology	3
56.	Documents related to transfers	2

#### **APPENDIX 4. RESOURCES OBSERVED**

1. Clinical units
2. Auditoriums, classrooms, laboratories, specialized classrooms
3. Computer lab / E-library
4. Library
5. Chairs
6. Deans' offices
7. Structural Units
8. Hall

## APPENDIX 5. ORGANIZATIONAL STRUCTURE OF THE EDUCATION INSTITUTION



## APPENDIX 6. LIST OF ABBREVIATIONS

1. RA – Republic of Armenia
  2. AMI - Armenian Medical Institute
  3. AP – Academic Programme
  4. TLI – Tertiary Level Institution
  5. QA – Quality Assurance
  6. ANQA - “National Centre for Professional Education Quality Assurance” Foundation
  7. TSS – Teaching and support staffs
  8. SP – Strategic Programme
  9. ST – Strategic Plan
  10. SC – Student Council
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