

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



**EXPERT PANEL REPORT  
INSTITUTIONAL ACCREDITATION OF  
VARDENIS MEDICAL-HUMANITARIAN COLLEGE**

**Yerevan – 2020**

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## INTRODUCTION

The institutional accreditation of Vardenis Medical-Humanitarian College is carried on the initiative of the education institution and based on its application. The process of institutional accreditation was organised and coordinated by the “National Centre for Professional Education Quality Assurance” Foundation (hereinafter ANQA).

ANQA was guided by the Regulation on “State Accreditation of RA Education Institutions and Their Academic Programmes” set by the RA Government Decree N978-N, dated June 30, 2011, as well as the Decree N959-N, dated June 30, 2011, on “Approval of RA Standards for Professional Education Accreditation”.

The expertise was carried out by the independent expert panel formed in accordance with the requirements set by the ANQA Regulation on “Formation of the Expert Panel”. The expert panel consisted of 4 local experts.

Institutional accreditation is aimed not only at external quality assurance, but also at the continuous improvement of the quality of governance and study programmes.

The hereby report comprises the results of the evaluation of the institutional capacities of the college in accordance with the State Accreditation Criteria and Standards

## SUMMARY OF EVALUATION

### EXPERT EVALUATION OF INSTITUTIONAL CAPACITIES ACCORDING TO RA PROFESSIONAL EDUCATION ACCREDITATION CRITERIA

The expert evaluation was carried out by the independent expert panel formed in accordance with the requirements set by the ANQA Regulation on “Formation of the Expert Panel”<sup>1</sup>. The evaluation was carried out according to 10 accreditation criteria set by the RA Government Decree N959-N, dated June 30, 2011.

During the evaluation, it was taken into account that Vardenis Medical-Humanitarian College is an education institution whose mission is to provide the medical field of the region, through formal and further education, with specialists who, with their professional knowledge, skills and abilities, will support the development and establishment of important professions in healthcare and medicine: pharmaceuticals, nursing and medical cosmetology. Being an education institution operating in the border area, schoolchildren from 20 communities of Vardenis receive education in the college. Our socially disadvantaged compatriots deported from Azerbaijan have settled in some of the communities. As a rule, there is a serious shortage of medical staff in those villages. Given these circumstances, the college offers extremely low tuition fees and provides transportation for students. The mission emphasises that the college "seeking to train qualified professionals with basic and applied knowledge, practical skills, creates a student-centered environment where the student acts as a subject of the educational process." The mission of the college corresponds to Level 5 of RA National Qualifications Framework / approved by the RA Government on July 7, 2016 /. Internal and external stakeholders are aware of the importance of college activities in the region and the border area. The panel received a letter from the mayor of Vardenis stressing the mission and substantiating the potential of the college for the region.

The mission, vision, lasting values of Vardenis Medical-Humanitarian College and the principles of operation are presented in the strategic plan of the college. "Vardenis Medical-Humanitarian College" LLC is currently implementing 4 secondary specialty academic programmes.

Being a secondary vocational education institution in the field of medicine in the Eastern border zone of the Republic of Armenia, the college has developed mechanisms and procedures to evaluate the effectiveness of its activities and the progress of strategic goals, which take into account the opinions of both external and internal stakeholders. However, only accountability mechanism is used. For further development, it is vital that the college diversify its evaluation mechanisms and develop appropriate tools. In addition, the entire staff of the college (teaching and administrative) should share the values set out in the mission, and not just accept them as an existing reality.

The goal of the college administration is to improve the governance system, to have such human, material and financial resources that will contribute to the implementation of the strategic plan. The main part of the presented strategic plan does not contain risks in terms of feasibility.

Proper quality assurance in line with the PDCA cycle and continuous improvement are possible only with the participation of all staff, which requires further training of the teaching, administrative and support staffs, as well as trainings aimed at correcting the governance weaknesses. It is necessary to constantly analyse the internal and external factors that affect the quality of the college's work style. The introduction of electronic document circulation can be useful in this regard. This will ensure the continuous provision of information at the administrative level, and will improve the mechanisms for disseminating information about the college.

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<sup>1</sup> Appendix 1. CVs of Expert Panel Members.

The study programmes implemented in the college include one level – NQF Level 5. The college does not yet offer short-term paid and tuition-free academic programmes (APs) that can help enhance the college reputation, diversify financial income, and increase the number of applicants.

The academic programmes are described according to the State academic standards set by NCVETD, which are based on measurable outcomes in the areas of knowledge, skills and competencies, and are addressed to the main client, Vardenis town polyclinic, several pharmacies, medical cosmetology salons, rural medical services, etc. The outcomes of course programmes developed by the college are largely in line with the AP outcomes.

When developing APs, as well as teaching and learning methods, it is necessary to prioritise the most effective competencies required in the labour market among students. Such mechanisms have just begun to be developed in the college, which will allow to check the compliance of skills and competencies with the NQF. It is important to have a periodic update of the curriculum with the right combination of practical and academic elements provided.

The process of monitoring college APs has recently been launched. The weakness of the APs is the lack of preconditions for internationalisation, as well as student and staff mobility / but it is planned to carry out benchmarking, to introduce learning programmes taught in foreign languages /.

The college plans to establish a unified system of knowledge, skills and competencies assessment aimed at mastering the outcomes defined by the course descriptions and expected by the students.

There are clear mechanisms for the admission, selection, and education of college students. The college provides students with didactic support, additional consultation, and protection of students' rights. In general, the college supports students and ensures the effectiveness of learning.

There are no mechanisms yet in place to assist the students in research according to the requirements of NQF Level 5. The participation of college students in research is in fact limited to essays (previously, there were term papers). The overall research activity of the college is weak, so the student involvement is also low.

There are procedure rules for hiring college teachers, but they are not very clear, they are discretionary in nature and not academic. At the same time, most of the teachers and heads of chairs and departments have many years of professional experience in their field, which is an achievement.

An important factor in the governance of the academic staff is the existence of mechanisms that will allow to assess the quality of educational and research activities, in terms of both incentives and punishments / penalties. But they are not developed in college yet. One of the disruptive factors for international cooperation is the lack of knowledge of foreign languages among the college staff.

The research potential of the college is very limited. Some teachers are the initiators of research activities. They have interesting applied research. The lack of financial resources and clear mechanisms hinders the development of research work. In the strategic plan (SP), the college has not set any goals in the field of research, it does not attach importance to the development of this field, though providing a link between research and teaching is very important both for ensuring the relevance of educational content and for developing student critical thinking.

As a non-state education institution, the college does not receive funding from the RA state budget. Tuition fees are the only source of funding for college. Whereas financial resources play a very important role in achieving the mission and goals of the college. The presence of IT, specialised classrooms, operating rooms, pharmaceutical laboratories, medical cosmetology and other rooms in the college is essential. Although the college provides the resources it needs today, there is a need for further investment in the infrastructure.

In the same way, it is necessary to invest in the library, where there is an obvious need for professional books and journals, especially in foreign languages. There is a need for some material and technical equipment for the study programme on library work.

The internal processes of the college are not yet completely transparent to the public, although the college is planning to develop new ways of informing the public about its business trips, in particular to create and implement the website of the college. The annual reports of the college activities are submitted to the State Revenue Committee of the Republic of Armenia, local self-government bodies, and in superior order to the Ministry of Education, Science, Culture and Sports.

Information about the college is provided to the public through collaboration with external stakeholders, visits to local schools, and sometimes involvement in events in Vardenis.

The college has only recently begun to develop its external relations; attempts have been made to exchange best practices with colleges in the country. However, there are no attempts to cooperate with similar structures in the international arena.

From the point of view of internationalisation development, it is also important to enshrine in the college strategy a corresponding goal that will contribute to internationalisation and resulting issues, the consistent implementation of which will ensure the continuous development of the field for the college. One of the first important steps to promote internationalisation may be the establishment of contacts with international organisations operating in Armenia. Such connections are not particularly costly, and they can be a source of up-to-date knowledge.

A major obstacle to the development of the college international relations is the lack of an official website where relevant materials and information on the college's educational activities will be provided in Russian and English. The lack of information on international programmes and cooperation is an obstacle to internationalisation and reduces the recognition of the college by academic, scientific, international institutes and organisations that may be the future partners of the college.

The implementation of the quality assurance system in the college started in 2017. The college has a policy in the field of quality assurance and some procedures with necessary documents. There is no published quality assurance manual to guide the various structural units of the college. The college has sufficient human resources to manage its internal quality assurance operations, but the PDCA quality assurance cycle does not apply to all college processes; not all staff understand the quality culture. There is a need for mechanisms for the real involvement of internal and external stakeholders in quality assurance processes.

#### **THE STRENGTHS OF THE INSTITUTION ARE THE FOLLOWING:**

- 1) Exclusive role in meeting the educational needs of the region,
- 2) Attractiveness among applicants and employers of the secondary professional (medical) field of the region,
- 3) Existence of a favourable educational environment for the implementation of APs,
- 4) Existence of a teaching staff (TS) qualified in accordance with the APs, with the involvement of recognised specialists of medical institutions in the region,
- 5) Availability of TS consultation for students and alumni,
- 6) Existence of sufficient services aimed at maintaining the safety and health of the educational environment,
- 7) Availability of the resources necessary for the implementation of the educational process,
- 8) Sensitive approach to the social-economic peculiarities of the region, providing transport to students from remote villages,
- 9) Existence of the position of internal quality assurance officer in the college, launch of the process for developing an internal quality assurance system.

#### **THE WEAKNESSES OF THE INSTITUTION ARE THE FOLLOWING:**

- 1) When making decisions, the college does not rely on a comprehensive analysis of internal and external factors,
- 2) The expected results and performance indicators are not clearly stated in the strategic plan of the college,
- 3) The organisational structure of the college is not adapted to the implementation of strategic goals, there is an issue of optimal allocation of administrative resources,
- 4) The elements of modular training are not fully introduced in the implementation phase of the APs,
- 5) The college does not have a teaching staff development programme, which jeopardises the sustainability of human resources for the implementation of APs,
- 6) College resources need to be modernised,
- 7) The level of foreign language proficiency at the institution is very low among students and teachers, which hinders the process of internationalisation,
- 8) Most of the college processes are in the planning and implementation phase, the PDCA cycle is not closed.

#### **MAIN RECOMMENDATIONS:**

##### **Mission and Purposes**

- 1) To review the mission of the institution and include the clear role of the college in the region. To carry out research among external stakeholders to complete the mission.
- 2) To develop a plan-schedule for the implementation of the SP by years, making a clear distribution of measures, resources (including material and financial) needed for them.
- 3) To establish clear indicators for assessing the progress of the SP and carry out the effectiveness analysis of the implementation of strategic goals and tasks using those indicators.
- 4) To develop and apply the SP reporting format, set up a monitoring group to assess the SP.
- 5) To introduce mechanisms and procedures aimed at evaluating and improving the results of the mission and implementation of goals.

### **Governance and Administration**

- 1) To improve the organisational structure of the college and adapt to the strategic goals of the college.
- 2) To review the SP by setting progress indicators necessary for the college.
- 3) To ensure the clear distinction of the functions of the structural subdivisions deriving from the strategic goals, fixing them with relevant regulations and full implementation.
- 4) To carry out a joint systematic study of external and internal factors affecting the institution, and incorporate the results into the development of strategic plans.
- 5) To create a corresponding financial planning in accordance with the SP, linking the budget to strategic goals and objectives to avoid failure of the plan implementation.
- 6) To prepare SP-based mid-term and short-term clear plans for subdivisions, and analytical reports on the results.
- 7) To review the administration of the institution's policy and procedures by introducing the PDCA principle of quality management in all processes.
- 8) To create the necessary database for evaluating and analysing the effectiveness of the study programmes and management of other processes, make the database accessible to stakeholders.
- 9) To develop mechanisms to assess the awareness among stakeholders by providing information not only on the content of study programmes but also on their quality.

### **Academic Programmes**

- 1) To develop and implement an AP review schedule, involving all internal and external stakeholders in the further development of APs.
- 2) To increase the involvement of alumni and employers in the development, review and implementation of APs.
- 3) To do benchmarking for all APs.
- 4) To reflect the peculiarities of learning and teaching methods and the link between assessment forms and outcomes in APs.
- 5) To develop and implement an anti-plagiarism and academic integrity policy specifically for APs in the medical field.
- 6) To clarify the methodology of the current assessment system, ensuring that the methods used are consistent with the outcomes.
- 7) To carry out special professional trainings with employers according to the approved modules.

### **Students**

- 1) To conduct qualitative studies of student recruitment and admission processes to assess the effectiveness of the policy applied and objectivity of the processes.
- 2) To improve the mechanisms for identifying students' educational needs and study their effectiveness.
- 3) To develop students' research skills, to strengthen the link between research and learning, which will contribute to the development of students' critical thinking required in the labour market.
- 4) To raise awareness about the functions of the Career Center among a wider range of students.
- 5) To develop clear regulations and schedules for students to apply to the administration.
- 6) To improve the mechanisms for quality assurance and assessment of student services.

### **Teaching and Support Staff**

- 1) To introduce a competitive procedure for the selection of teaching and support staffs to ensure transparency, publicity, as well as to attract the best candidates.
- 2) To clarify the requirements for the professional qualities of the teaching staff in accordance with the goals of the study programmes.
- 3) To develop and introduce a system of professional trainings for teachers.
- 4) To base the training programs of the TS on the results of internal and external evaluation, based on the priority needs of the study programmes; to evaluate the effectiveness of the trainings.
- 5) To develop mechanisms to encourage the recruitment of young teachers in the college.
- 6) To evaluate the effectiveness of the work done by the support staff.

### **Research and Development**

- 1) To clarify what research is for a medical-humanitarian college.
- 2) To develop joint research programmes with local and partner organisations, to intensify the implementation of applied research.
- 3) To develop clear mechanisms for the interconnectedness between research and teaching processes by involving students in research.

### **Infrastructure and Resources**

- 1) To create financial planning and allocation of resources of the college, taking into account the goals and objectives of the college, and the AP requirements.
- 2) To improve the library stock by adding new, more up-to-date literature, especially on study programmes.
- 3) For the purpose of financial independence and stability, to search for other financial sources, diversify financial income, participate in grant programme competitions.
- 4) To create and develop the official website of the college with the aim of ensuring the circulation of main documents.

### **Societal Responsibility**

- 1) To base the preparation of the institution's reports on an analytical approach, linking them to the objectives and issues of the SP, and to consider as a mechanism for evaluating the performance of strategic objectives.
- 2) To launch the college website by creating relevant sections of information and feedback mechanisms.
- 3) To introduce working mechanisms for studying public relations feedback and public needs.
- 4) To develop procedures for evaluating the effectiveness and achievements of the mechanisms used by the institution in building public relations.
- 5) To develop and introduce a sustainable system of services to the public.

### **External Relations and Internationalisation**

- 1) To review the attitude of the college towards internationalisation, to appoint a person responsible for internationalisation to coordinate and develop the field.
- 2) To take steps to cooperate with local and international organisations, similar structures, to conclude cooperation agreements and implement them according to the subject of the agreement.
- 3) To ensure a sufficient level of foreign language proficiency among the staff and students in order to promote international mobility.

- 4) To encourage and involve students in all possible experience exchange programmes, giving them the opportunity to find on their own and apply for international student programmes that are useful to them, and the college will support their participation in them.

**Internal Quality Assurance System**

- 1) To review the college quality assurance policies and procedures, mechanisms and tools used, targeting them at the development of college strategy, mid-term and short-term plans, to enhance capacity, evaluate effectiveness, and create data needed for improvement.
- 2) To intensify the cooperation between the quality assurance officer of the institution and other departments, by discovering and disseminating best practices.
- 3) To involve internal and external stakeholders in quality assurance processes, from passive participation to partner involvement.
- 4) To establish clear mechanisms for the collection of quality assurance data; to perform content analysis based on reliable data obtained as a result of the application of these mechanisms to improve the APs and other processes.
- 5) To introduce reliable mechanisms of transparency and publicity in quality assurance processes for internal and external stakeholders.

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Tigran Khachatryan  
**Chair of Expert Panel**

**Date: 05.02.2020**

## DESCRIPTION OF EXTERNAL REVIEW

### COMPOSITION OF EXPERT PANEL

The external evaluation of the self-assessment (SA) and quality assurance (QA) processes of the college was carried out by the following members of the expert panel:

1. **Tigran Khachatryan** - Head of the QA Department of the Police Educational Complex, RA, chair of expert panel,
2. **Roza Harutyunyan** - Deputy Director of Academic Affairs of Armavir State Industrial and Pedagogical College, RA, member of expert panel,
3. **Vahe Babayan** - Head of the QA Department of the Medical College of the Medical Institute after Mehrabyan, RA, member of expert panel,
4. **Nelli Karapetryan** – 4th year student of the Armenian Medical Institute, RA, student member of expert panel.

The works of the expert panel were coordinated by Lilit Zakaryan, Senior Specialist at ANQA Policy Development and Implementation Division.

The translation was provided by Kristine Ohanyan, Senior Executive Assistant at the Chair of Translation Studies, Yerevan State University.

The composition of the panel was agreed upon with the college and appointed on the decision of the ANQA Director. All the members of expert panel have signed independence and confidentiality agreements.

### PROCESS OF THE EXTERNAL REVIEW

#### **Application for State Accreditation**

The college applied for institutional accreditation on January 22, 2019, by submitting the application form to ANQA, and presenting the copies of its license and appendices.

The ANQA Secretariat examined the data presented in the application form, the attached documents and the ANQA electronic questionnaire completed by the institution. ANQA made a decision on accepting the application and approved the timetable of activities.

#### **Preparatory Phase**

The college submitted the self-assessment of its institutional capacities and the attached documents in accordance with the format set by ANQA

The ANQA coordinator examined the self-assessment and the attached documents in order to reveal the correspondence to the technical requirements of ANQA. The college self-assessment report and attached documents were approved after receiving positive feedback from the accreditation process coordinators.

For preliminary evaluation, the self-assessment report was submitted to the panel, the composition of which was agreed upon with the college in advance and approved by the order of the ANQA Director.

Having reviewed the self-assessment report and documents of the college, the expert panel conducted a preliminary evaluation, as a result of which the possible strengths and weaknesses of the college were revealed. According to the format, the lists of documents for further study, as well as questions and issues for corresponding departments and target groups were prepared.

The expert panel summarised the results of the preliminary evaluation within the set deadline, and the process coordinators together with the chair of the expert panel prepared the schedule of the site visit<sup>2</sup>. According to the ANQA Manual on External Review, the intended meetings with all the target groups, open and closed meetings, documentation review, visits to different departments of the institution, etc, were included in the schedule.

### **Preliminary Visit**

Taking into account the distance of the college from the capital, on December 9, 2019, the schedule of the expert visit was discussed online and over telephone with the Director of the college; the issues of organisational and technical support were also discussed. The preliminary visit took place the day before the expert visit, on December 10, 2019. A meeting was held with the Director of Vardenis Medical-Humanitarian College. The room provided to the expert panel and the meeting hall were studied, the issues of their furnishing and technical equipment were discussed.

Discussed and mutually agreed decisions were made on the organisational, technical and informational issues of the expert visit, as well as on the norms of ethics and behaviour of the participants during meetings.

### **Site Visit**

On the day before the scheduled visit (December 10, 2019), the members of the expert panel and the coordinator, Lilit Zakaryan, had a closed session in Vardenis. During the meeting, the expert panel agreed on the scope of expert evaluation, criteria evaluation scale, which, according to ANQA procedures, includes two levels: 1) meets the requirements of the standard, 2) does not meet the requirements of the standard. The issues to be studied during the visit, the strengths and weaknesses of the institution according to the criteria, the procedure of focus group meetings, the ethics of conducting the meetings, and the further steps were clarified.

The site visit took place from December 11 to 13, 2019. The expert visit launched and ended with a meeting with the college Director. The participants of the focus group meetings organised to clarify the issues - teachers, students, alumni, employers, and self-assessment group members - were selected by the expert panel from the lists provided in advance by the college. All scheduled meetings were held. During the visit, the expert panel reviewed the documents<sup>3</sup>, resources<sup>4</sup>, held focus group meetings, visited places for internships, and had a meeting with the mayor of Vardenis.

The panel appreciates the open and frank discussions with the participants of the meetings, which greatly helped to assess the institutional capacity of the college.

The information obtained during the meetings, as well as the main results of the document review and observations, were summarised at the end of each day, as well as during the final session at the end of the site visit. The panel discussed the main findings and reached a consensus, first on individual accreditation criteria and then on meeting the criteria requirements. The final conclusions on meeting the criteria were reached through an open discussion by all members of the group, applying the principle of consensus.

### **Expert panel report**

Following the site visit, the panel prepared an accreditation report as a result of the discussions. The report was based on the college self-assessment and site visit observations. The assessment was made according to 10 criteria of institutional accreditation approved by the RA Government Decree N959-N, dated June 30, 2011. The chair of the panel, with the assistance of the coordinator, prepared the initial version of the accreditation report. All the members of the expert panel contributed to the

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<sup>2</sup> Appendix 2. Schedule of Site Visit

<sup>3</sup> Appendix 3. List of Documents Observed

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

observation of each criterion of the report, as well as commented on the full version. The comments of the expert panel members were taken into account when summarising the preliminary version of the report.

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**Lilit Zakaryan,**  
**Coordinator**

**05.02.2020**

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA

### BRIEF INFORMATION ABOUT THE EDUCATION INSTITUTION

VARDENIS MEDICAL-HUMANITARIAN COLLEGE was founded in 2012. A license for an indefinite term was issued by the RA Ministry of Health / Կ-ԲԿ-000061 /. In 2014, Vardenis Medical-Humanitarian College was re-licensed by the RA Ministry of Education and Science and received a license of 0022 series for an indefinite term, by which it received the right to implement secondary vocational education programmes.

Currently, "Vardenis Medical-Humanitarian College" LLC has the following 4 secondary vocational education programmes.

1. "Pharmaceutics",
2. "Nursing",
3. "Medical Cosmetology",
4. "Library Work".

## 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 (hereafter NQF).**

"Vardenis Medical-Humanitarian College" LLC carries out its activities on based on the charter and the strategic plan (hereinafter SP). The mission, goals and objectives of the college are defined in the SP. The college, being an education institution operating in the border area, considers its mission to implement a secondary vocational education programme for schoolchildren in Vardenis communities, where there is a shortage of medical staff. The college offers relatively low tuition fees and provides transportation for students. The college mainly serves the needs of the region by training nurses, pharmacists, medical cosmetologists, librarians, but the mechanisms for identifying the needs are not clearly developed. During the site visit, it was found out that external stakeholders (mayor, medical institutions) attach importance to the role of the college, as there is a shortage of staff in the health sector in the region.

In line with the mission of the college, the SP envisages the following strategic priorities (directions): 1. applicants and students, 2. quality education, 3. financial stability, effective management, modern infrastructure, 4. quality assurance, 5. quality staff potential. In the SP, the steps needed to achieve each goal are defined, but there are no indicators for assessing the progress in solving the issues and reaching the objectives. The essence of some goals of the SP is partly the same (goal 2 - quality education, goal 4 - quality assurance). The SP presents the vision, lasting values, and principles of operation of the college. Although the need for ongoing SP monitoring was mentioned as a way to assess the SP performance, SP monitoring has never been done.

From the point of view of ensuring the compliance of the mission of the college with the NQF, state vocational education standards have been developed and approved by NCVETD, based on which vocational education is provided.

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

A number of surveys are conducted at the college to identify the needs of external and internal stakeholders. "Survey Regulations on Vardenis Medical-Humanitarian College Internal Stakeholder Satisfaction", "Observation Regulations on External Stakeholders' Opinions About Vardenis Medical-Humanitarian College Alumni", "College Mission, Goals and Objectives Review Policy", a number of internal and external surveys were conducted among stakeholders, but they have not been analysed. These policies and regulations reflect the principles and approaches of strategic planning in the college, as well as the procedure and ways of engaging stakeholders. Ways to involve stakeholders are mentioned, but the site visit showed that external stakeholders were not involved in the process of developing the college mission, goals, and objectives, although the college noted in its SA that "the revision of the college mission and goals stems from the goals of internal and external stakeholders, the demands of the labour market and the need to increase the number of student."

External stakeholders did not take an active part in the development of the SP. Involvement of internal stakeholders in the discussion process was carried out through their participation in the board of directors and pedagogical council. The issues are regularly discussed in the board of directors, pedagogical council.

During the expert meetings, it became clear that external stakeholders are interested in participating in various areas of the college activities.

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

In order to evaluate the implementation of the mission and goals of the college, the reporting system created for the subdivisions and collegial management (educational department, chairs, class teachers, board of directors, pedagogical council, etc) is used. Among the reports, the college attaches importance especially to the annual reports of the educational department on the quality indicators of the student progress and learning. The reports are discussed during the meetings of the board of directors and pedagogical council. However, during the site visit, it turned out that the reports under discussion were not always related to the performance of the SP.

The "Strategic Plan Implementation Review Policy" has been developed and approved, but has not yet been implemented in accordance with the established principles.

Although it is stated in the SA that "the mechanisms contributing to the implementation of the SP and quality assurance are the identification of the needs and requirements of internal and external stakeholders, the improvement of those requirements, which contributes to continuous improvement", during the expert visit it became clear that this mechanism does not work yet, there are no studies aimed at identifying the needs of external and internal stakeholders.

The reports mainly record the work done, the problems and the facts. The mechanisms or tools used to improve the recorded problems are not described. So far, it has not been assessed and analysed at what stage the implementation of the objectives and the mission fixed by the SP is.

**Considerations:** The mission of the college SP is generally clear: it is in line with the NQF, and institution policies and activities are in line with the mission of the institution. Being a medical education institution in the border area (the only one in terms of some professions) contributes to the achievement of the college goals and objectives, which are reflected in the 2016-2026 SP.

The panel welcomes the fact that an appropriate procedure has been developed for the analysis of the college SP, but it has not yet been implemented. At the same time, there is a lack of indicators for the implementation of SP goals, which makes the objectivity of assessing the college development risky. Clearly developed guidelines for the SP implementation, which will outline the programme implementation issues and steps that follow, will help the college act more purposefully.

The involvement of internal stakeholders in the development of the SP is somewhat emphasised, but the involvement of external stakeholders is not yet effective. If there is no consistent approach to the issue, this could lead to problems with increasing the effectiveness of the new study programmes of the college and cooperation with the regional labour market. The panel notes that employers and external stakeholders with whom meetings were held during the visit are well aware of the importance of the college mission for the region and they go into details about it.

In this regard, the college has also a problem in terms of reorganising the mission, as the mission does not fully cover the activities of the college. The expert panel positively assesses the fact that cooperation with employers in the field has already started. Surveillance procedures have been developed as a mechanism for identifying the needs of stakeholders, which need to be amended. Despite the fact that various regulations and procedures have been developed, the panel notes that the lack of procedures for evaluating and improving the results of the mission and achievements of the college, highlighting the specifics of the college, can be an obstacle to effective strategic development.

It is necessary to review the SP by defining progress indicators and resources necessary to achieve the goals, otherwise the further effectiveness of the SP will be jeopardised.

**Summary:** Taking into account the compliance of the college mission and goals with the NQF, as well as the existence of the mission, the resulting goals, the planned steps to achieve them, the feasible tasks for each step, the panel finds that the college activities are largely in line with the mission,

internal stakeholders participate in the development and implementation stages of the SP, external stakeholders attach importance to the mission of the college. Taking all this into account, the panel finds that the college generally meets the requirements of Criterion 1.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 1 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.**

The governance of the college is carried out in accordance with the RA legislation, by-laws and charter, on the basis of self-government, in combination with the principles of sole management and collegiality. The sole management of the college is carried out by the director, and the collegial governing bodies are the board of directors, the pedagogical council, which act as advisory bodies. The internal stakeholders of the college (teachers, students, etc) are represented in the governance system.

The college has subdivisions and structures necessary for the implementation of relevant functions: chairs, Career Center, Student Council, etc.

During the site visit, it became clear that some subdivisions and structures have regulations or charters, but are not guided by them (in particular, the Student Council and the Career Center). There is an Internship department in the organisational structure of the college, which should coordinate the internship process, but during the visit it turned out that the department does not really have the necessary human resources, and the head of the department was the librarian, which creates additional workload. The structure diagramme indicates the existence of the department head, which does not actually exist. The site visit showed that the organisational structure does not provide the appropriate hierarchy of management: in the organisational structure, departments and chairs, the methodologist, are superior for departments only in the field of cooperation, there is no systematic accountability mechanism by subordination.

The college provides human and material resources for the implementation of other educational processes, involving on a contractual basis teachers, medical specialists and other staff, if necessary. The funds necessary to the subdivisions are not revealed, the annual income and cost estimate is not presented to external and internal stakeholders.

There is no complete analysis of the human, material and financial resource satisfaction at the college. Analysis of governance performance assessment is also not performed.

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

According to the legal documents, teachers and students have the opportunity to participate in the decision-making processes of the college related to them. The competence and activity order of the college pedagogical council states that the chairperson of the Student Council must be included in the council. During the site visit, it was found out that students sometimes raise issues that are resolved, but this process is not regulated; the issues raised by students are not discussed in collegial

bodies. As a result of the study of the minutes of the sessions, the record books, the issues raised and discussed by the students were not found.

The SA states that "the involvement of teachers and students makes the governance process more effective, as their needs are identified, the interests and rights of employees and students are preserved, and the issues become more visible," but the site visit showed that the students were not informed about one (related to student issues) of the three committees, attached to the internal security infrastructure, so the committee was of a formal nature.

Only key staff members are involved in the governance process, and the participation of contractual teachers is low.

### **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.**

The college carries out planning at 2 levels. SP is considered as long-term planning. For mid-term activities, the college sets out a short-term strategic plan-schedule according to the academic years, which does not cover the objectives of the SP and the issues arising from them.

The short-term action plans of the college departments are reflected in their annual or semi-annual work plans, which, however, are not based on the SP. The implementation of the plans is reflected in the reports, which do not analyse the implementation of the SP, the implementation of strategic goals and tasks. Although the college states in the SA that "strategic plans regulate the functions and make them purposeful. There are work plans of all governing bodies, teaching and support staffs, which contribute to the effective implementation of the institution mission in a step-by-step manner", in fact, the college does not yet have a unified structure of accountability for structural units, the existence of which would significantly change the accountability process in the college.

The site visit revealed that there is no regulated process for monitoring the implementation of plans. College plans are monitored by reports that do not yet have an analytical component and are mainly descriptive in nature, with no suggestions for improvement.

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

The college does not yet conduct a study on the factors that affect its activities, but there are some surveys among external and internal stakeholders. Although there are several procedures for conducting surveys, however, the surveys are not regular; the expert panel was not provided with any analysis based on the survey results. There are no clear procedures in the college for planning and conducting studies of the factors that affect its performance. No other methods of studying the factors influencing the activity of the college are used to substantiate the degree of reliability of the surveys, in particular, comprehensive analysis of the current situation, open discussions recorded, etc. Although there are some mechanisms for obtaining and using data, their reliability is not assessed. External environment analyses are few. There is no labour market analysis for decision-making and planning of future activities.

Surveys were conducted among some groups of internal and external stakeholders to identify the factors that affect the quality of education in the college. The studies of the factors included in the surveys did not serve as a basis for the development of the SP.

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

In the SA, the institution claims that it manages its policies and procedures on the principle of quality management: plan-do-check-act. However, the review of the documents and the observations

made during the site visit showed that the PDCA cycle in the college is not embedded in the activities of the college. Management processes are in the planning stage, partially implemented.

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

Although it is stated in the SA that "the college has mechanisms for evaluating the effectiveness of academic programmes and other processes, as a result of which certain information is collected, and the relevant analysis of information reveals and assesses the effectiveness of the processes", the site visit showed that only certain surveys are carried out and they are not targeted according to the SP. Content and system analysis of survey results is not performed. Especially mechanisms for evaluating the effectiveness of surveys have not been introduced. There is also no evaluation of the effectiveness of the reports. The SA is not analytical yet, there are criteria on which the information provided does not address the required area.

The study programmes have not been monitored or reviewed at the college, and there is no procedure regulating the process.

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

The main tool for disseminating information about the qualifications awarded by the college APs is the Facebook platform; the college website does not operate yet. During the site visit, it was confirmed that "staff trips to schools, media announcements, information technologies and "Doors Open Days", distribution of booklets, are used for the professional orientation of the applicants." The reports of the college and the reports of the final attestation committee chairs are used for the quantitative and qualitative assessment of the quality of awarded qualifications, but there are no clear and objective mechanisms for assessing the publication of quantitative and qualitative information on the study programmes and quality of qualifications.

**Considerations:** The panel welcomes the fact that some changes have been made in the organisational structure of the college (IQA, Career Center), which are aimed at improving the governance system, but the system still requires further reform. The governance system is not directly related to strategic tasks and goals.

Despite the fact that there are major departments typical of a secondary vocational institution, there is an inefficient allocation of organisational structures, which is risky for the implementation of the college mission and core objectives. In particular, it is not effective to have an under-resourced department (Internship Department) or redundant management units (legal discipline committee).

The weak involvement of external stakeholders in college decision-making structures may limit the awareness of external demands and developments. Few analyses of external environment will lead to improper planning of college activities and further risks of strategic development. The low activity of teachers and especially students in the college decision-making process in turn reduces their involvement in identifying problems and solving them and affects the motivation.

The expert panel considers several surveys conducted at the college a positive side, through which certain problems were identified. However, in addition to the surveys conducted, the lack of other reliable methods and analyses to study the factors influencing the performance of the college greatly narrows the possibilities for the realistic assessment of the situation. Based on the goals of the SP, the college needs to improve its governance system, optimise the organisational structure making the subdivisions more efficient, more in line with the strategy and activities. Lack of information analysis collected at the college is risky in terms of improving the study programmes.

The college governance system formally enables teachers and students to participate in decision-making. A key role is assigned to the board of directors, pedagogical council, where all

important decisions are discussed and made. However, the observations showed that the actual participation of students in the decision-making process is quite passive. Incomplete expression of students' voices can jeopardise the direction of the decisions made for their needs and student-centeredness in general. On the other hand, the expert panel welcomes the efforts of the institution managerial staff to establish direct contacts with students and bring them to the field of open discussions.

The planning process at the college is not regulated. The vague link between the SP and short-term plans, the lack of indicators of SP progress, and the lack of analysis of college progress indicate that the SP is not yet the main guiding document. For subdivisions, the SP is not yet perceived as a strategic development document. The lack of an analytical component in the reports of the subdivisions hinders the effectiveness evaluation.

Although the college does not yet conduct a comprehensive systematic review of the internal and external factors that influence it, the personal efforts of the managerial staff contribute to providing reliable data on the challenges faced, so the panel believes that these processes need to be targeted and regulated.

The PDCA principle of quality management has not yet taken root in the administration of college policies and procedures due to the absence of documentation on the requirements of that principle. The assessment and improvement stages are not visible in almost all procedures, which does not allow the institution to substantiate that management decisions are made on the basis of sufficient and reliable data analysis, and there are ongoing improvement processes.

The college has still not conducted a regulated process to gather, analyse, and apply the information on the effectiveness of study programmes and other processes.

While recognising the imperfection of the information collection and analysis mechanisms for the quality of the qualifications awarded in the study programmes, the college has not yet taken any active steps in this direction. Publishing objective, sound information about the quality of APs and qualifications awarded would help increase the public trust in the college.

**Summary:** The expert panel considers that Vardenis Medical-Humanitarian College does not meet the requirements of Criterion 2, taking into account that the organisational structure is not in line with the implementation of strategic tasks of the college, there is a problem of optimal allocation of management resources, and there are no analyses of governance system efficiency. Stakeholder participation in management processes and feedback mechanisms are weak in the governance system, and the developed documents need to be revised in order to work more effectively.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 2 as **unsatisfactory**.

### III. ACADEMIC PROGRAMMES

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

#### Findings

**3.1 The academic programmes 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.**

4 secondary education programmes are implemented in Vardenis Medical-Humanitarian College. There are established state educational standards for these professions. The college considers its mission, regional requirements and compliance with the NQF as a basis for developing the AP. College APs are generally in line with the mission, in defining which the college emphasises the

medical professions that are most in-demand in the labour market and in the general public. During the expert panel meeting with the mayor of Vardenis, it became clear that the region really needs health professionals, as both the war and social distance between the settlements in the region, the inaccessibility during the winter months, make it necessary to have medical specialists in places. The visit to the military hospital showed that the mentioned concern is appropriate, as in case of outbreaks, they do not have an adequate number of staff, and in 2016, during the outbreak of the epidemic in the region, the volunteers from different villages who were college alumni helped them. More than 10 volunteers took part in interventions at the military hospital during the April War.

The existence of the "Library Work" speciality is justified by the study of the needs of the region. The department was established when the inspection of the Ministry of Education and Science revealed that 70% of the schools in the region did not have librarians.

The APs do not present overall results according to the qualifications awarded. The document on "AP Benchmarking Policies and Procedures" has been developed, which does not reflect the specifics of the medical college APs, and is of a general nature. Although it is mentioned in the SA that "the college has made a comparative analysis of best practices", during the site visit, it became clear that there have been some visits to several similar institutions in Armenia, but no comparative analysis of the AP has been carried out.

In SAS (State academic standards), the outcomes are presented according to the qualifications awarded. In the college APs, there is no mapping of programme content sequencing and interconnectedness among subjects.

There are some outcomes in the college curricula, but they are not entirely consistent with the SAS outcomes and module appendices.

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

The teaching and learning methods in accordance with the learning outcomes of the college APs are mainly presented in the document "Policy and Procedures for Regular Upgrading of Teaching and Learning Approaches and Methods". They are generally described in the APs, but the teaching and learning methods are missing in the course descriptions. During the site visit, it became clear that the lecturers use a number of effective methods that satisfy the student and alumni needs and are effective from their point of view.

Taking into account the specifics of the medical professions at the college and the experience of skilled physicians who teach at the college, the panel notes that the used methods are generally in line with the expected learning outcomes of the programmes. During the visit to the military hospital, it was found that during the internship, the college students demonstrate high abilities based on their theoretical knowledge, and the hospital management is satisfied with both the college students and alumni.

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

In 2018, at Vardenis Medical-Humanitarian College, documents on "Student Assessment Procedure", "Student Assessment Policy" were developed, which stipulate that the assessment in the college is carried out according to the AP learning outcomes; and the assessment criteria and components are set out. During the meetings, it became clear that the mentioned policy does not work yet, the stakeholders are not aware of the mentioned procedures.

The final attestation at the college is also conducted in accordance with the established procedure. The awarding of qualifications is carried out by a special committee, which includes the representatives of the teaching staff and external specialists in the professional field. Exam paper

samples submitted to the expert panel mainly include theoretical questions. At best, one question for the assessment of an ability or a skill is included in the papers. Whereas in the outcomes of medical vocational education programmes, professional abilities and skills prevail. The college fills that gap by organising internships in potential workplaces. Meetings with student, alumni and internship supervisors confirmed that students are gaining the skills and abilities needed for the job.

The college was attaching importance to reviewing the student assessment system and further improving it. To achieve these goals, the "Mechanisms for Ensuring the Effectiveness of Student Assessment Policy Review" and "Comparative Analysis of Best Practices in Assessment Approaches" procedures have been established and are gradually being implemented by the college. During the site visit, it was found out that according to the mentioned procedures, surveys had been carried out for the review of the system but they were analysed yet.

The "Academic Integrity Policy and Procedures" have been approved, but they do not specify the mechanisms for detecting plagiarism - clear tools, software or other methods. During the meetings, it was found out that some of the teachers are guided by the provisions of the policy of maintaining academic integrity.

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

The College seeks to ensure that ongoing programmes are consistent with other similar APs. Based on these goals, several visits were made to the RA secondary vocational institutions implementing similar study programmes, and the bases of AP implementation and mobility were studied. However, during the site visit, it became clear that the institution does not yet have existing agreements on student and TS exchange and mobility based on the coordination of programmes (it should be noted that no relevant mechanisms have been developed by the authorised body).

Taking into account the specifics of the medical specialties and already established SAS, the panel believes that the college has a basis for providing mobility in line with the APs of other similarly recognised specialties.

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

In 2018, to organise and coordinate the AP review process, the document on "Policy of Regular Evaluation of Vocational Education Programmes, Monitoring and Review Procedures and Mechanisms" was approved, which does not provide clear monitoring mechanisms and time interval to complete the process.

Mainly internal stakeholders are involved in the monitoring and effectiveness evaluation of APs, and the involvement of external stakeholders is not yet active. The participation of external stakeholders in the evaluation of the AP effectiveness is limited to their participation in the final attestation. Surveys (especially among alumni) are one of the important mechanisms for monitoring APs in the institution, which provide an opportunity to identify issues and present them to chairs.

In order to identify the needs of internal stakeholders, surveys were conducted by IQA among the students and TS. There are no reviews based on the results yet. The current results of the study programmes are regularly discussed in the meetings of the board of directors and chairs.

**Considerations:** College study programmes are generally in line with the mission. One of the four programmes has not yet been reformed ("Library Work"). There are no labour market analyses underlying the development of APs, but the direct coordination of APs and subject programmes with the SAS has helped to define the outcomes and structure of the programme.

The use of student-centered teaching methods and IT (some teachers used IT tools) alongside with traditional teaching methods is a positive side. The students were mostly satisfied with the

teaching and learning methods. The panel believes that internship and its assessment processes need to be regulated and clarified. The organisational structure scheme mentions the existence of the Internship Department, but the latter is actually absent. Whereas having a separate internship officer for the college is important, as it will further regulate the internship process. Due to the specifics of the medical specialties, the expert panel considers that there is a need for improvements in the organisation of special professional courses. In particular, the experience of similar medical institutions can be studied and modular courses can be conducted at the military hospital, at the Vardenis polyclinic, and at other specialised institutions. Moreover, stakeholders and employers mention the need to increase the efficiency of practical classes and internship organisation for training specialists in the field. The assessment system in the college needs some clarification and substantiation, which will contribute to the maximum mastery of the educational outcomes expected by the students. The lack of justification for the compliance of assessment methods with the outcomes is partly due to the immeasurable formulation of the results. Considering the need to clarify the internship assessment, the panel finds that the current assessment system does not guarantee a proper assessment of competencies and skills.

The existence of regulatory mechanisms and tools for monitoring APs can help identify the internal issues and improve the APs.

**Summary:** Considering the compliance of the APs based on expected learning outcomes to the NQF, college mission, demand for medical specialties in the region, use of student-centered teaching and learning methods, involvement of the recognised medical professionals in the TS, it can be concluded that college APs generally meet the requirements of Criterion 3.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 3 as **satisfactory**.

#### 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.**

The college has developed a "Student Recruitment (Professional Orientation Policy) Procedure" based on which the college recruits applicants. During the site visit, it was found out, however, that the Professional Orientation Council envisaged in the procedure is not clearly defined, and does not perform relevant functions.

The college uses a number of information dissemination mechanisms to recruit applicants: print media, TV (via "Geghama TV"), Facebook page, as well as awareness-raising and professional orientation visits to schools. Representatives of the TS also take part in the visits. The effectiveness of the recruitment mechanisms has not been analysed.

The process of selection and admission of applicants is carried out through clear mechanisms defined by the authorised body (Ministry of Education, Science, Culture and Sports).

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

The college identifies the needs of its students through regular meetings, surveys, and students involved in different councils. The meetings are organised by the managerial board and TS. The students who met with the expert panel mentioned that some of the issues raised by them in the questionnaires and during the meetings were solved. Student needs are also identified by the Student

Council, which conducts surveys, performs various activities, and is involved in student affairs and needs assessment processes. The observation of the college charter showed that it did not contain relevant governance provisions regarding student involvement in governing bodies. According to the expert panel, the charter needs to be reviewed in accordance with the model set by the authorised body.

During the site visit, it became clear that the students were not interested in identifying their needs and participating in the processes taking place in the college. The document on "Student Needs' Identification Policy and Procedures" was developed, on the basis of which the IQA structure conducted surveys to assess the needs of students. However, the document needs to be amended as it does not cover the full range of student needs.

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

In college, students can receive consultation from teachers, class teachers (there is a schedule for consultation conducted by class teachers), chairs, but mostly students receive consultation from teachers: the communication between students and teachers is more intensive, but institutional mechanisms for consultation are lacking. While monitoring the resources, it was found out that the chairs, apart from pre-exam consultations, do not have a fixed schedule for conducting consultation. The students who participated in the meeting stated that the teachers were available to provide consultation.

The college established a document on "Description, Purpose and Schedule of Additional Consultation Classes". During the site visit, it was found out that the processes described in the document do not work yet, except for class teacher consultations.

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

Students are assisted and guided by various departments (chairs, Career officer, IQA). Although the college does not have clear procedures and schedules for applying to the administrative staff for guidance, the principle of open doors applies to all students and they can ask all departments of the college any question and get their questions answered. The college tried to regulate the process of providing additional support. In this regard, the document on "Procedure for Additional Support and Referral of Students by the Administration" was created. During the visit, it turned out that the document was not known to the college, so no processes were carried out.

The college values the effectiveness of support and assistance mechanisms for conducting surveys. The students who met with the expert panel were satisfied with the support of the administrative staff, emphasising the friendly atmosphere created in the college.

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

In order to promote the students' careers, Vardenis Medical-Humanitarian College continuously increases its staff with TS working in the professional field, medical specialists, ensuring their direct contact and cooperation with students. The Career Center has been operating since 2018 to support college students / alumni. Student surveys and site visit showed that despite the steps taken, the work of the Career Department is still at the formation level, and only some students are aware of career support services.

During the meetings with the expert panel, the college students mentioned that they chose the education institution and profession taking into account the lack of nursing staff in their places of residence.

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

The college notes in its SA that “a great deal of attention is paid to the students' individual, especially research work. Individual and group research work is carried out in all courses under the guidance of teachers, but mainly the work is presented by the final year students of "Pharmacy" and "Nursing" specialties. They submit relevant essays." During the site visit, it became clear that due to the specifics of the subject, the teachers instruct the students to work individually. However, these individual works are not yet part of the student assessment, they are done at the teacher's discretion.

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

The college has various mechanisms for protecting students' rights. The rights and responsibilities of students and college are defined by the contract signed between the college and students. The college has a Student Council that advocates for and represents the interests of students in the college governing bodies. The students who are involved in those governing bodies are elected from the Student Council. The Student Council raises students' concerns, problems and suggestions, and offers solutions if necessary. The meetings with the students proved that the Student Council is actively working both to protect the rights and to make the educational process better. The "Student Complaints Monitoring" procedure was established, but it does not work, and it became clear from the meeting with the students that they are not familiar with the procedure.

The rights of students in the college are not defined by the college charter, but in case of complaints, students have the opportunity to apply to the college administration.

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

The most frequently used quality assurance mechanisms of the educational, consultation, and other student services at the college are surveys conducted by both IQA and career officers with students of different years. Based on the received data, no improvements have been made yet.

Apart from the surveys conducted at the college, there are no educational, consultation, assessment or monitoring mechanisms for other services provided.

**Considerations:** Student recruitment procedures at the college are clear, and they are taking into account the specifics of the college. This is due to the high reputation of the college gained over the years in the region, as evidenced by employers from health facilities, students and the mayor of Vardenis. Events with the involvement of potential applicants contribute to the effectiveness of the recruitment process.

Due to the specifics of the college, each student gets relevant support and individual approach from the administration and teachers; the students have the opportunity to participate in additional classes, which helps to increase student motivation and improve the educational environment.

Considering the friendly atmosphere for applying to the administration as positive, however, the panel considers it necessary to regulate the process, have approved schedules, which will increase the responsibility of the administrative staff, and help clarify the application process for various issues among the students.

The expert panel assesses positively the existence of the Career Center. The college has a lot of work to do in terms of disseminating information about the center, as most of the students are not aware of its activities and almost do not use its services. Raising awareness about the center and more activity will contribute to the cooperation of students and employers: this can have an impact on solving the problem of alumni employment.

Assessing the presence of the Student Council in the college and considering that it actually works in the college, however, the expert group is concerned about the indifference of the majority

of students to the activity of the above-mentioned bodies, which does not help identify the needs and interests of students.

The surveys currently used to assess the various services provided to students are not very effective, which puts the mechanism at risk.

**Summary:** Due to the fact that the college has a clear student recruitment and admission procedure, as well as some mechanisms aimed at identifying students' educational needs, students have the opportunity to participate in additional classes, get consultation, the college has bodies that support students and contributes to meeting their educational needs, the expert panel believes that in general the college provides an effective educational environment for students.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 4 as **satisfactory**.

## V. TEACHING AND SUPPORT STAFF

**CRITERION: The Institution has a highly qualified teaching and support staffs to achieve the set goals for academic programmes 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 programmes.**

The human resources and management processes at the college are based on the Labour Code of the Republic of Armenia, the charter of Vardenis Medical-Humanitarian College, the "Policy and Procedures for Ensuring TS Professional Development", the "Policy and Procedure on Main Staff Sustainability", college SP (goal 5, quality staff potential). In addition to the main TS, knowledgeable specialists from Vardenis polyclinic, military hospital, specialised pharmacies and medical cosmetology salons are invited to teach at the college.

There is no competitive selection of the TS. Vacancy announcements are not made, candidates are found through personal contacts.

The college established the document on "Teacher Incentive Policy and Procedures", but during the expert meetings, it turned out that the document is not implemented yet, there are no incentives among the ST.

The effectiveness of the approaches used in the selection of teaching and support staffs has not been assessed. The students participating in the site visit meetings were satisfied with the existing TS.

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

Although the "Professional Qualification Requirement Review Policy" has some implications for the general requirements for the TS professional qualifications, the study programmes do not yet define the professional qualification requirements for the TS.

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

With its SP, the college intends to introduce an effective procedure for evaluating the effectiveness of scientific and pedagogical activities of the teachers: "To develop and implement an effective system of evaluation indicators for teachers' pedagogical activity." (goal 5 of the SP, quality staff potential, task 5.1).

The actual assessment is carried out by individual (assessment by the head of the chair based on the results of the teacher's individual work plan and lessons) and collective (lesson observations

conducted by the college managerial staff and study of the teacher's individual record book) methods. In the reports of the chairpersons, however, there is no analysis of the results of the TS assesment. During the visit, record books on lesson observation were reviewed, and no problems were identified, no suggestions were made for further improvement.

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

The college considers the following to be one of the most important steps of its SP: "To take steps to encourage, support, retain promising staff, and recruit new staff." (goal 5 of the SP, quality staff potential, task 5.1). In this regard, the college has involved in the teaching process famous professionals from local and regional institutions, who teach specialised subjects, and the rest of the subjects are taught by full-time teachers of the college.

In the SA, the college states that "in accordance with the needs identified as a result of regular internal and external evaluations, the college conducts professional pedagogical and methodological measures for the improvement of the TS according to the teacher improvement plan, which outlines the topics and schedule, which emphasise the TS improvement processes." During the site visit, it was found out that the mentioned process is not yet taking place at the level of identifying needs. Some teachers are trained because they teach at school as well and participate in trainings within the framework of school programmes.

The effectiveness of the teacher improvement mechanisms used has not been evaluated.

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

In order to ensure the staff stability of the study programmes in the college, the document on "Policies and Procedures for Ensuring the Stability of the Main Teaching Staff" has been developed, only some provisions of which are still applicable in the college, and the representatives of the teaching and support staffs are not familiar with it. At the same time, the college enables its main teachers to teach in schools, thus ensuring the social stability of the TS.

Based on the syllabus required for the profession, skilled professionals from various regional institutions teach at the college, sharing their rich experience with students, as well as engaging them in their institutions as interns, transferring practical skills and abilities to students on the spot.

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

From the point of view of ensuring the professional development of the TS, a clear policy is not applied in the college yet, although the document on "Policy and Procedures for Ensuring TS Professional Development" has been developed.

The college has developed an established policy and procedures for mentoring novice teachers, with the help of which an attempt is made to share the experience of skillful teachers with young specialists. The SA states that "serious work is being done with novice teachers to ensure professional development. The mentor (head of the chair or an experienced teacher) and the methodologist introduce them to the internal order of the college, the work of the chair, study programmes, thematic plan, types of classes, accepted teaching methods, available resources and bibliography." During the site visit, it was found out that mainly guidance work is carried out in the chairs and by the college methodologist.

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

The Deputy Director of Educational Affairs, methodologists and the chairs organise and directly coordinate the educational process. HR department, IQA officer, Career officer, etc, assist

and contribute to the teaching and learning processes. All units operate on the basis of regulatory documents, applying ethical norms when administering the teaching and learning processes.

**Considerations:** Vardenis Medical-Humanitarian College has been able to recruit the necessary staffs for the implementation of study programmes, as well as to involve teachers on a contractual basis, some of whom are also employers. However, the lack of competition-based vacancy announcements hinders the transparency of hiring new staff, limits the scope of candidates, and may hinder the constant influx of qualified staff. The expert panel appreciates the involvement of experienced healthcare professionals in the teaching staff, which enabled them to transfer their practical knowledge and experience to students. The requirements for the professional qualities of the TS are general in APs, they are not specified according to the AP features. This gap does not allow the education institution to analyse the quality of the existing TS and to reasonably guarantee the achievement of the AP outcomes based on the AP requirements. Individual and collective methods of assessing the composition of the TS provide a certain image, but not according to the qualities required in the AP. As such, there are no in-depth analyses of assessments that could identify the main achievements of the teaching staff and the reasons for the shortcomings. The surveys used were not evaluated in terms of reliability, which may affect the objectivity of the evaluation.

The expert panel positively assesses the efforts of the college to ensure the participation of the TS in trainings and courses in Armenia. However, not being based on internal and external evaluations, the purpose of these trainings and cost-effectiveness is endangered.

The College has been able to ensure the sustainability of its APs with the TS, despite significant reliance on contractual partners. However, the workload of the TS and the scarcity of narrow specialists can jeopardise the normal course of the educational process if they need to be replaced.

The administrative and support staffs of the college contribute to the mission and study programme goals, but in some areas the expert panel sees the need for clarification of administrative functions to increase development effectiveness.

**Summary:** Taking into account the provision of teaching and support staffs in accordance with the goals of the study programmes, the direct involvement of specialists with rich practical experience in the educational process, the expert panel considers that the college is provided with qualified teaching and support staffs in accordance with its mission and APs.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 5 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.

The college states in its SA that "the college carries out research activities with appropriate strategic plans and by validating the results. In the field of research, the college links its interests and ambitions with education, and does not expect research work from students, but requires research work in general professional, special professional, pedagogical-methodological and statistical directions." However, during the site visit, it turned out that there are no research interests in the college, some teachers carry out certain research on their own initiative, which is not introduced in the educational process in the college.

The college has developed a "Research Ratification Mechanisms" document, the review of which has revealed that it is not yet embedded in the college research activities. In particular, the document assumes that the "ratification of research results is a process that enables to submit the work and be assessed.

The ratification mechanisms are:

1. Intra-chair discussions for the teaching and support staffs, approval of the results in the educational-methodological or governing boards." However, during the site visit, it turned out that the college did not have a governing board; it did not discuss such issues in another similar board or in the teaching-methodological board.

The college does not have defined research priorities yet.

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

The long-term strategy, goals and objectives of Vardenis Medical-Humanitarian College in the field of research were attempted to be reflected in the document "Long-Term Strategy of the Institution in the Field of Research, Mid-Term and Short-Term Programmes".

Short-term and mid-term programs do not include institution interests and aspirations in the field of research. In the long-term strategic plan, the college envisages the introduction of methodological manuals, test collections, collections of study materials, the scope of research activities, as well as the development of short-term training programmes, the introduction of the latest information technologies. The mentioned programmes are more of a list of different issues than a sequence of targeted steps, they do not reflect a clear strategy of research activities, and there are no indicators for assessing the progress.

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

According to the college SA, the managerial staff attaches importance to the research activities of the teachers and students, seeks to improve the territorial and material-technical conditions necessary for the implementation of the research process, to develop and modernise the educational and laboratory conditions of the college.

In the SA, the following mechanisms are mentioned as elements of research activities:

- roundtable discussions,
- conferences,
- presentations,
- publications,
- published teaching manuals,
- essays.

In addition to the above-mentioned, the college has a regulation for the preparation and defense of term papers.

During the visit to the institution, it became clear that now the research work is limited to essays written by students.

Due to the personal interests of teachers and students, research is not documented.

The expert panel states that there is some research activity in the college (due to the individual efforts of several teachers), but a clear policy for conducting research and development has not yet been formulated and there are no appropriate procedures. The college has developed "Measures to Improve Research" that have not yet been implemented in the field of in-college research.

The college seeks to improve the territorial and logistical conditions necessary for the implementation of research process, to develop, to modernise the educational and laboratory

conditions to provide the staff members and students with the necessary resources for the conducting research.

#### **6.4 The Institution emphasises internationalisation of its research.**

The college lacks the regulation of research activities, so the possibility of internationalisation is not considered by the college.

Teachers and students are not involved in any international research initiatives, as at present the financial resources of the institution are not enough to establish contacts with international organisations, draw up relevant contracts, conduct reciprocal visits, and carry out research.

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

The institution considers the methodological and organisational work carried out by the teachers as a mechanism of interconnection between the educational process and research activity. Student-centered term papers and essays are considered by the institution as elements to ensure research implementation and development.

Each final year student is obliged to write a term paper. The college intends to use the collected materials (during all the years) as a material for further research.

The college notes in the SA that "research activities are interrelated with the educational process, which makes it effective for teachers / providing professional development, enriching the teaching and methodological complex /, for the administrative staff / improving the educational process, archiving of statistics /, for students / acquisition of advanced knowledge and skills, manifestation of independence, development of analytical, logical, creative thinking, expansion of worldview /." The above-mentioned does not contain research elements and has nothing to do with research activities.

The college does not offer additional courses aimed at developing the research skills of students.

**Considerations:** Vardenis Medical-Humanitarian College has tried to develop research directions, but these directions do not reflect the professional directions of the college, and the lack of a comprehensive strategy for pursuing research interests weakens the development of research activities.

The small number of articles and theses (2 teachers) published by the college should be of concern to the college as it indicates the low level of research activity.

The college does not do anything in terms of internationalising the research. Given the specifics of the medical profession, it should be noted that in case of publishing the experiments and studies in the field, the college will gain recognition and may be of interest to external stakeholders.

Despite some existing works, student research is still not an integral part of learning, which can negatively affect the achievement of learning outcomes. The lack of clear mechanisms for linking research activities in the college to the educational process affects the development of the research component in the APs. One of the peculiarities of modular education in secondary vocational education is the organisation of research-based education, which is not implemented in the college in terms of modular education.

**Summary:** Given that the college does not currently have a strategy to express its interests and aspirations in the field of research, the resources provided by the college are not sufficient to conduct research activities, the internationalisation of college research activities is weak, and there are unclear links between research and study, the panel considers that the college does not provide research activities and links to learning.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 6 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.**

Vardenis Medical-Humanitarian College operates in buildings located in Vardenis, with an area of 419.1 m<sup>2</sup>. The college has the necessary number of classrooms, specially equipped laboratories. There is a classroom equipped with computer technology. There is one library.

Improving the logistics and the educational environment is one of the strategic tasks of the college, which is enshrined in objective 3.2 and objective 3.3 of the SP goal 3. The implementation of college study programmes requires an environment that matches their characteristics, which includes laboratories equipped with modern equipment, a library, etc. Most APs are practical in nature and require special cabinet and laboratory equipment. The resources required by SAS for AP implementation are generally described.

Institution carries out its activities in a two-storey, free-use educational area with appropriate classrooms, laboratories, computer room, library, administrative and auxiliary areas. There is a contract with the stadium. Classrooms and laboratories are equipped with enough equipment to carry out training. During the visit, models, didactic materials, medical equipment and other materials used in the implementation of study programmes were observed. The library was partially supplemented with professional and non-professional literature. The work of the library was regulated. Nevertheless, the library lacks literature, especially for the medical profession. There is also no e-library. Work was being done on information about books, the list of available literature. The existing property, in particular the desks and chairs, was threadbare and needed to be restored or replaced with new ones. The college grounds were fully heated. The college website is still under development. The lack of laboratory and other necessary equipment is supplemented by the rich conditions of the local polyclinic and military hospital.

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

The financial resources of the college are formed from student tuition fees, there are no state budget allocations or other sources.

From the point of view of financial distribution policy, the college has annual financial planning and accountability (tax body, regional administration, Ministry of Education, Science, Culture and Sports).

A review of recent financial flow documents shows that college revenues have declined, largely due to the number of students. Meetings with external stakeholders during site visit revealed that the flow of applicants to the college had decreased, mainly due to the issue of a non-state diploma, which hindered the employment of alumni.

Given the fact that in recent years the financial inflows are decreasing, the financial means for the provision and operation of the equipment are insufficient. For example, the library is mainly replenished with relevant literature exclusively through donations, without financial investment by the institution. According to the study of the budgets made in recent years, the financial means of the institution are mainly intended for the payment of salaries, taxes, duties, utility payments, practical training. The 2018 tariffication is intended for 36 employees. Thus, the financial means are very

limited, as a result of which the salaries are also low. There is no grant funding, just as there is no income from other activities. The budget is formed exclusively from tuition fees.

Mechanisms for monitoring, evaluating and improving the use of financial resources are not used.

### **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.**

In general, there is no effective system for allocating financial resources to ensure the implementation and continuity of the goals of academic programmes. But there are positive examples. Employers, who are also college lecturers, use their resources and conditions to provide students with practical knowledge (pharmacy directors, medical cosmetology salon owners). Although the college has tried to establish a procedure on the "Mechanisms for Managing the Financial Resources for the Implementation of Education Goals of the Institution and Their Distribution According to the Goals" based on the priorities and needs, during the site visit, it turned out that the college is not guided by the document.

The draft budget is based on the actual performance of previous years, taking into account the steps taken to develop the college, the pre-calculated revenues, and the total incurred expenses. The draft budget is not discussed by the college managerial board or other advisory bodies. The college does not have a clear resource allocation policy, which envisages submission of applications by different departments, their discussion / marketing, acquisition of necessary materials.

Due to the lack of finances, there is no planning, monitoring policy, and as a consequence, there are no mechanisms guaranteeing the practicability of using financial resources. There is a procedure on the "Mechanisms for Assuring the Practicability of Using Financial Resources (Audits, Reports)", which, however, does not regulate the allocation of financial resources to ensure the implementation and continuity of the AP objectives.

### **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.**

Studies conducted during the site visit show that the college resource base and additional resources enable the implementation of the academic programmes. As a positive fact, students are involved as interns in institutions where some employers work, and where the conditions and technical equipment meet the requirements of the time.

Very few resources are allocated for research. Although it should be noted that the institution has not yet conducted a full resource compliance analysis for the effective implementation of the SP and APs, resource provision issues are identified among internal stakeholders through surveys. As a result, some cases of classroom renovation have been reported: in the past year, classrooms were equipped with models.

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

The circulation of internal and external documents and information is carried out in accordance with the procedure on the "Management System of Vardenis Medical-Humanitarian College Paperwork, Information and Document Circulation", which, however, does not completely cover the field of information and document circulation, and needs improvement. Although the college mentions in its SA that "the college has the information, and there is a clear system of document management", during the site visit, it turned out that there is no functioning system, no legal revisions have been registered yet.

Dissemination of information about the institution is carried out through announcements, print and electronic media, Facebook page.

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

The college has a security and first-aid room – a first-aid post. The clinic is provided with the necessary first-aid medications, which are regularly updated. For security reasons, the college has fire extinguishers.

The "Civil Defense and Emergency Issues" subject is taught to raise student awareness and develop the ability to respond quickly to emergency situations.

The institution policy and procedures for the protection of health and safety of students with special needs are not developed, there are no relevant services. The building conditions of the college are not adapted for students with special needs.

During the talk with the college students, it was found out that the environment was safe for them, otherwise they would not have chosen that education institution.

## **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.**

In order to assess the applicability, availability and effectiveness of the resources, the college IQA officer conducted surveys among students and teachers, who identified issues of resource applicability and availability. There are no survey analyses yet.

It should be noted that the surveys conducted do not include a complete assessment of the applicability, availability and effectiveness of the resources provided. Except for the conducted surveys, no other analytical mechanisms are used, for example, periodic monitoring, etc. The panel did not notice any surveys about resources available among other college stakeholders (administrative and support staffs).

Students have the opportunity to raise questions about the resources available and to receive answers during meetings with the managerial staff. Almost all councils of the institution have members from the SC. The issues under discussion are presented to the students.

Necessary resources were available for teachers and students to conduct the lessons. In particular, all the necessary didactic materials, posters, classrooms, etc, were available for the teachers, students; class timetables were posted in the corridor, in a visible place, according to the specialities.

It was found out that during the lessons, discussion methods were used with the active participation of the students.

It became clear that the teachers, being a stable resource for the institution, provided continuous communication with both students and alumni. For example, alumni who worked in pharmacies could be in constant contact with their teachers, receiving the necessary information and advice on this or that medication.

The complexes of the college are used effectively; the students have their practical classes there. During the meeting with the students, it was found out that the obstetrics and gynecology, general therapy and surgery rooms of the three-storey polyclinic in Vardenis are not only accessible for students, but are also used quite effectively during their studies.

During the visit to the military hospital in Vardenis, it was observed that this complex is also used effectively, it is interested in replenishing its staff with new healthcare professionals. The assessment given to the students by the internship supervisor was used as an assessment mechanism.

The library fund was available to the students and was used effectively at the same time. There were registers, which testified to the effective use of the library resources.

**Considerations:** The panel considers that, in general, the college resources support the implementation of study programmes and sustainable operation of the college. At the same time, it should be noted that despite the available educational resources, there is still a need for technical

replenishment, as evidenced by the participants during the meeting with the expert panel. College surveys show that students and teachers are still dissatisfied with library resources, which is a concern for the AP implementation.

Expenditures are not detailed according to the strategic goals and study programmes, which would make more targeted financial investments in the future. Mechanisms for evaluating the effectiveness of existing funding planning and allocation policies are not yet available, which may reduce the effectiveness of fund allocation.

In the field of information and document circulation management, the college has made some attempts to regulate the field. The dissemination of certain information through Internet platforms promotes this, but the college does not yet have a complete system for document circulation management.

The college has created a safe environment through health and safety services. It is facilitated by the unique status of the medical professions and provision with the necessary equipment. The first-aid post can ensure the proper quality of health care with the available medications and equipment.

The college uses the survey mechanism for educational environment assessment. This circumstance can be beneficial in terms of identifying needs and further improvement of the educational environment. A large (80%) share of salaries in the budget limits the opportunity to invest in other key areas (for example, research, library, internationalisation), weaken the effectiveness of the strategic plan, so the salary reduction can be risky in terms of attracting quality human resources. So the way out is not to cut salaries, but to raise new funds.

The college managerial staff, in good faith and involving external sources, provides minibuses to transport students from remote villages, thus providing an opportunity for those students to get education.

**Summary:** Taking into account that in recent years, Vardenis Medical-Humanitarian College has been making efforts to improve and enrich resources by attracting external sources, and there are necessary conditions for the implementation of study programmes, a safe and secure environment has been created for organising the educational process, the expert panel considers that Vardenis Medical-Humanitarian College has the resources to create an educational environment, to fulfill its defined mission and goals.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 7 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.

One of the strategic goals of the college is accountability, which is: "To develop the information systems necessary for the implementation of the educational process." (goal 3, objective 3.3).

The college has an internal reporting system. It starts with the TS, then the reports submitted by the chairs and departments, based on which the complete report of the college Director is formed. The reports reflect the activities provided in the annual or semi-annual plans. Information about the work and activities carried out or being carried out by some departments of the college is posted on the college Facebook page.

Throughout the year, the institution submits reports to the RA Ministry of Education, Science, Culture and Sports, the RA State Revenue Committee, and other state agencies in accordance with the law. These reports reflect almost all areas and issues of the Vardenis Medical-Humanitarian College (annual and quarterly financial reports, staff list, business trips, etc).

The college has certain social connections, which, however, are not systematic. As a result of the meeting with the external stakeholders, employers, supervisors of practical work, it was found out that the latter are well aware of the processes carried out in the institution, they attach importance to the role of the college in the educational and health spheres of the region. The expert panel visited and had meetings with the mayor of Vardenis and municipality staff, the heads of the military hospital, physicians who taught practical classes practicing, physicians conducting practical classes at the polyclinic, the school directors and teachers cooperating with the institution, the head of the NGO, the heads and staff members of the pharmacy and medical cosmetology salon. As a result of contacts with the latter, it was found out that the external stakeholders were informed about the college activities.

The college does not have a website, but through its Facebook page, it regularly presents its work through photos and texts.

The college notes in its SA that "the reporting mechanisms at the institution contribute to improved governance, as the reports provide an opportunity to assess the work done by the relevant bodies and their effectiveness." During the site visit, it was found out that it is not possible to evaluate the work done by the relevant units according to the reports, as the reports are not of analytical nature, they have a simple and descriptive narration.

The college does not yet have a unified reporting system.

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

Information about the college activities, procedures, orders, procedures, manuals and other coordinating documents are published on the Facebook page, printed newsletters, TV, print media. According to the SA, the College uses the following measures to ensure external accountability:

- Informational videos presented on regional television
- Conferences, seminars, and other events organised by the institution, as well as the ones in which the institution participates
- Spyur Information Center
- Social network

The institution conducts various meetings, study visits to schools in the region.

During the visit, the expert panel found out that in accordance with the decision of the authorised body, Vardenis Medical-Humanitarian College organised the state final attestation process for alumni of previous years at two colleges (Northern University College and Armenian-Greek State College), the aim of which was to award the alumni a state diploma to overcome further problems in the labour market. 65 students took part in those exams. The initiative has received a positive feedback from alumni and students.

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

The feedback provided by the public about the college activities is mainly received through the Facebook page. The feedback received from the public is collected mainly by the Career officer, whose activity started in 2018.

There are no sustainable feedback mechanisms, results analyses, the site is not ready yet.

Although there are regulated mechanisms in the institution to ensure accountability to external stakeholders, there are no feedback mechanisms in place to evaluate their effectiveness and present results. Therefore, still weak, incomplete evaluation processes by external stakeholders do not allow to evaluate the effectiveness of the institution accountability.

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

During the visit, the expert panel found out that the students of Vardenis Medical-Humanitarian College, alumni of different years, regularly (on a voluntary basis) take part in the prevention of acute infectious outbreaks in the military hospital, provide first aid during emergencies (during the April war, etc). It was also found out that although college alumni do not have a constant job, they are in demand in their villages as nurses or first aid providers; the population often applies to them for various questions.

The college plans to implement short-term, additional study programmes. The college provides consulting services, but mechanisms for evaluating their effectiveness and tools are not yet in place.

**Considerations:** The existing accountability mechanism in the college contributes to the quality of accountability, makes the activities of the college transparent. There are some mechanisms in the college to ensure the transparency of procedures and processes (Facebook page, print media, TV, etc). From this point of view, the college should do its best to disseminate information among external and internal stakeholders. The weakness is that the college website does not operate yet; information about the college is not fully disseminated.

Although it is a positive side that college alumni are in demand by the society, and they provide services in the villages, volunteer to help the hospital when needed, the panel notes that these processes need institutional arrangements which could enhance the college reputation in the region. It is necessary to develop mechanisms which will allow to evaluate and coordinate the services provided.

**Summary:** Taking into account that Vardenis Medical-Humanitarian College has an accountability system, which mainly identifies the problems in the college, the information provided to the public is generally available, there are mechanisms for transferring knowledge to the public, the expert panel considers that the college is sufficiently accountable to the public.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 8 as **satisfactory**.

## **IX. EXTERNAL RELATIONS AND INTERNATIONALISATION**

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

The college has a policy and a regulation of activities for promoting external relations with the public, which is approved by the Director and envisages the active involvement of the college in public processes in the near future, the establishment of external relations, the organisation of exchange programmes for teachers and students. The institution does not yet have a subdivision responsible for external relations and internationalisation.

According to the SA, the college has a Public Relations Department and a procedure on the "Regulations of Public Relations Department", but the site visit revealed that such a department does not yet exist. The "Policy for Public and External Relations " presented in the SA does not work either. The college SP does not envisage steps to promote external relations and internationalisation.

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

The college notes that *"the institution does not yet have the subdivision responsible for external relations and internationalisation."* The process of internationalisation is not yet underway at the college, but the panel witnessed the rich external relations of the college. The college collaborates with key players in the field. During the site visit, it was found out that the college has an awareness of the development of external relations. Study visits have been made to some colleges in Armenia.

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

The institution has signed several agreements with local institutions, in particular, with the military hospital, polyclinic, pharmacies, medical cosmetology salon, school, library.

During the visit to Vardenis Medical-Humanitarian College, the expert panel had meetings with the heads of the above-mentioned organisations, and those in charge of practical trainings: the latter highly appreciated the prospects of cooperation with the institution and the student involvement and knowledge.

During the site visit, the heads of Vardenis Garrison Military Hospital and Vardenis Psychiatric Hospital (as employers) expressed willingness to involve and hire college alumni, provided that the college is accredited and the alumni have a state diploma.

This fact is important from the point of view of effective cooperation with local structures.

Cooperation with local institutions is carried out mainly for the organisation of student internships (Vardenis YMCA Medical Cosmetology Salon, Vardenis Garrison Military Hospital, Vardenis City Library, etc). There is no systematic cooperation with other similar education institutions of the Republic of Armenia.

During the site visit, it was found out that the academic mobility of the teachers in Vardenis Medical-Humanitarian College is not carried out, there are no examples of cooperation with international organisations.

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

The college notes in its SA that "Vardenis Medical-Humanitarian College, unfortunately, does not have mechanisms to promote foreign language proficiency among teachers, and foreign language courses for the staff", which was confirmed during the site visit. During the visit, it was found out that the institution employs a high-level English language teacher, who is currently undergoing training, and expresses willingness to teach English to the staff. Vardenis Medical-Humanitarian College has not made a comparative analysis of best practices.

**Considerations:** The expert panel considers the lack of steps to promote the internationalisation of the college and the absence of the subdivision in the organisational structure to be risky. The absence of steps aimed at internationalisation and external relations in the SP jeopardises the future of the college cooperation with similar international or other structures.

The panel believes that a full review and implementation of the policies and procedures encouraging the establishment of the external relations, the establishment of a coordinating department (or a position for the officer) will increase the efficiency of the college internationalisation process and activate mobility among teachers and students.

Mastery of foreign languages by college teachers and students will provide prospects for activating foreign relations. The level of foreign language proficiency is still insufficient for conducting professional classes and exchange of students within the framework of study programmes, so additional foreign language courses should be conducted, which, according to the expert panel, can be a contributing factor for the internationalisation of the college.

The expert panel considers a positive fact that the SAS envisages the study of two foreign languages within the framework of professional programmes for students. However, it is worrying that the college does not yet offer events or other programmes in a foreign language with the participation of students. The lack of cooperation with international institutions is also a matter of concern.

The college does not offer courses in order to increase the level of foreign language proficiency (English, etc) among the staff and students, which is one of the most important ways to solve the problem of learning a foreign language. Foreign language proficiency rates are still low and remain one of the main obstacles to internationalisation. No targeted policy is implemented to address the issue.

**Summary:** Due to the fact that Vardenis Medical-Humanitarian College does not have a department or structure promoting internationalisation, which will carry out activities aimed at internationalisation and development of external relations, policies and procedures promoting external relations have not been developed, the college is not involved in international programmes, does not take action to activate the internal and external mobility of students and teachers, no steps are taken to increase the level of language ((proficiency among teachers and students, the expert panel considers that Vardenis Medical-Humanitarian College does not meet the requirements of the standard.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 9 as **unsatisfactory**.

## 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 general quality assurance policy of the college is defined in several documents, such as "The Mission and Goals of Vardenis Medical-Humanitarian College IQA Subdivision", "Vardenis Medical-Humanitarian College QA Policy and Procedures", etc.

Since the appointment of the QA officer (2018), several documents have been developed to assess the activity areas of the college (functions to be monitored by the IQA structure, procedure of the activity of in-college quality control committee, review policy on the mission, goals, and objectives of the institution, regulations of surveys on internal stakeholder satisfaction), but these documents are not yet fully operational or need to be substantiated.

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

In 2018, the position of QA officer was created at the college, which is aimed at supporting the QA processes of the institution. The activities of the IQA are regulated by the Deputy Director, who has the instructions of the defined position. The QA officer, however, is not independent and is not directly subordinate to the Director, which, according to the panel, may jeopardise the effectiveness of the IQA officer work. An annual plan is developed, but the list of resources attached to the plan and the budget allocated to QA processes is not provided.

The college states in its SA that "administrative and student committees have been established, which mainly carry out monitoring, awareness-raising, detection, control, and perform statistical and analytical work." During the site visit, it was found out that such works are not carried out yet, and

the presence of some groups confirmed that their existence is formal, they are not aware of the quality assurance works.

During the site visit, there was a lack of knowledge and experience of the college staff on the quality assurance functions.

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

According to the document on "Vardenis Medical-Humanitarian College QA Policy and Procedures", internal and external stakeholders should also be involved in QA processes. Internal stakeholders participate partly in the surveys conducted by the QA officer because relevant surveys or focus group meetings are not conducted among all internal stakeholders in the college, and an attempt has been made to assess the effectiveness of APs based on the surveys among alumni and employers, the result of which, however, has still not been analysed.

Apart from surveys, there are no internal and external stakeholder engagement mechanisms and examples. The college SA states that the students participated in the self-assessment process, but during the site visit, it was revealed that the students were unaware of the self-assessment format.

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

Vardenis Medical-Humanitarian College has not yet studied the QA best practices.

At the present stage, the activities of the QA Officer are focused on the planning of quality processes and implementation of activities in the college. The PDCA cycle is not yet completed in the main processes of the college, in particular the development of APs, research activities, internationalisation, professional development of the teaching staff, etc. The internal quality assurance system has undergone some reforms over the past year, but the policy of regular system reviews is not yet in place. In particular, there is no established need to review the system, the planned changes, to what extent these changes will improve the study programmes, student satisfaction, their involvement in research, etc.

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

Numerous regulations and other documents have been developed to regulate the college QAS, such as "Internal Quality Assurance System Review Policy, Procedures, Regular Review Mechanisms and Tools", etc. However, both the mentioned document and other approved procedures do not correspond to the implementation of the processes in terms of content, they are in need of revision.

Some works have been done to organise the external evaluation process (surveys, self-assessment), but there is no analysis of the survey results.

### **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.**

One of the most effective mechanisms for ensuring transparency in the internal quality assurance system may be the college website, which is not yet operational. Enough work is not being done at the college to raise awareness of the IQA system among internal stakeholders, which became clear during the site visit.

External stakeholders do not participate in IQA activities.

**Considerations:** The introduction and development of the college quality assurance system in recent years (2018-2019) have created some favourable conditions for the introduction of an internal quality system.

Activities of the college QA officer and numerous regulations developed generally serve as a basis for the implementation of quality assurance functions, but there is a problem of optimising the developed documents, their implementation and review.

Involvement of college teachers and students in quality assurance processes is ensured mainly through surveys and few events. Their activity level still needs to be increased in order to ensure more targeted and effective activities.

The human, financial, and logistics resources involved in quality processes generally do not provide the implementation of relevant functions, and the Quality officer's mediated relationship with the college Director may jeopardise the reliability of the quality assurance functions. Lack of involvement of external stakeholders (who are willing to participate in the college processes) in the quality assurance system can weaken the effectiveness of the QAS, and the college has some work to do in this regard. The college website is the environment designed to ensure the transparency of information on quality functions, but which does not work; the dissemination of information on the quality of study programmes is at stake.

The lack of quality assurance policy and benchmarking procedures did not allow the college to make a comparative assessment of their effectiveness and identify areas for review of the IQA system.

The existing mechanisms of the IQA system do not yet provide sufficient grounds for external evaluation, which is due to the lack of reliable IQA data collection mechanisms and analytical practices.

The expert panel assesses positively the steps taken by the IQA officer to discuss the IQA issues with internal stakeholders. However, information on the quality of the college processes is not yet available to external stakeholders, which leads to the isolation of the IQA officer's work.

**Summary:** Due to the fact that the internal quality assurance system of Vardenis Medical-Humanitarian College is not sufficiently integrated in APs and other processes, its impact on the processes is weak, IQA measures are not carried out systematically, qualitative analyses and improvement steps based on them are missing, and there is an urgent need to collect full information and publish quality results of the activities, it can be stated that the quality assurance system does not yet sufficiently contribute to the continuous improvement of processes and formation of a quality culture.

**Conclusion:** The expert panel evaluates the compliance of Vardenis Medical-Humanitarian College institutional capacities with the requirements of the Criterion 1 as **unsatisfactory**.

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA

<b>CRITERION</b>	<b>CONCLUSION</b>
<i>I. Mission and Goals</i>	<b>Satisfactory</b>
<i>II. Governance and Administration</i>	<b>Unsatisfactory</b>
<i>III. Academic Programmes</i>	<b>Satisfactory</b>
<i>IV. Students</i>	<b>Satisfactory</b>
<i>V. Teaching and Support Staff</i>	<b>Satisfactory</b>
<i>VI. Research and Development</i>	<b>Unsatisfactory</b>
<i>VII. Infrastructure and Resources</i>	<b>Satisfactory</b>
<i>VIII. Societal Responsibility</i>	<b>Satisfactory</b>
<i>IX. External Relations and Internationalisation</i>	<b>Unsatisfactory</b>
<i>X. Internal Quality Assurance System</i>	<b>Unsatisfactory</b>

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**Tigran Khachatryan,**  
**Chair of Expert Panel**

**05.02.2020**

## APPENDICES

### APPENDIX 1. CVS OF EXPERT PANEL MEMBERS

**Tigran Martin Khachatryan:** In 2011, he graduated from the “History” Department, Faculty of History and Law of ASPU (Bachelor’s Degree), and in 2013, completed a master’s degree of the same department. In 2013-2017, he did post-graduate studies in the same department in the field of World History (Է 002). In 2013-2015, worked as an Assistant to the Dean at the ASPU Faculty of History and Law. In 2009-2015, he was twice elected the Chairperson of the Student Council of the same faculty. In 2016-2017, worked in the Police Educational Complex of the Republic of Armenia as a Leading Specialist of the Education Quality Assurance Group. Since 2017 up to present, he has been working in the Police Educational Complex of the Republic of Armenia as the Head of Education Quality Assurance Department. He has the rank of the Police Senior Lieutenant. He has participated in many conferences on enhancing the quality of vocational education. In 2018, participated in the Forum on “Internal Quality Assurance in the Sphere of Professional Education of the Republic of Armenia”. Since 2017, he has been an expert in the accreditation processes of the RA vocational education institutions. In 2019, he coordinated the process of institutional accreditation of the Police Educational Complex of the RA Police

**Roza Meruzhan Harutyunyan:** In 1992, she graduated from the Faculty of Pedagogy and Methods of Primary Education of ASPU. In 2015, graduated from Yerevan State Armenian-Greek College of Tourism, Service and Food Industry in speciality “Public Food Technology”. In 1991-2000, she worked at the secondary school of Lukashin village, Armavir region, as a primary school teacher and teacher of Armenian language and literature. Since 2000, she has been working at Armavir State Industrial and Pedagogical College. Since 2016, she has been the head of the college educational department, and since 2018, has been the Deputy Director of Academic Affairs.

**Vahe Henrik Babayan:** In 1991, he graduated from the Faculty of Computer Science / Cybernetics / of Yerevan State Polytechnic Institute with a degree in engineering and system-engineering. In 2011, he graduated from the Faculty of Pharmacology of the Medical Institute after Mehrabyan with a bachelor's degree in pharmacology. In 2015, graduated from the University of Management with a master's degree in law. In 2003-2011, he worked at the Mehrabyan Medical Institute as a Vice-Rector for Development and Financial-Economic Affairs, was responsible for organising educational processes. He is the responsible for the quality of the medical college of the Medical Institute after Mehrabyan, and since 2019, has been the head of the QA subdivision.

**Nelli Karapetyan:** In 2013-2017, she studied "Nursing" at the Armenian-American "Erebuni" State Medical College in Yerevan. Since 2017, she has been studying at the Faculty of General Medicine of the Armenian Medical Institute, now she is a 4<sup>th</sup> year student.

## APPENDIX 2. SCHEDULE OF SITE VISIT

11.12.2019-13.12.2019

	<b>11.12.2019</b>	<i>Launch</i>	<i>End</i>	<i>Duration</i>
1.	Meeting with the Director	09:00	09:30	30 min
2.	Meeting with the Deputy Director of Academic Affairs	09:40	10:20	40 min
3.	Meeting with the self-assessment group members (8-10 representatives)	10:30	11:30	60 min
4.	Meeting with the heads of administrative departments	11:40	12:20	40 min
5.	Break, session of the expert panel	12:30	13:30	60 min
6.	Meeting with alumni (8-12 representatives)	13:40	14:30	50 min
7.	Meeting with employers (8-12 representatives)	14:40	15:30	50 min
8.	Visit to Education Quality Assurance Department	15:40	16:40	60 min
9.	Closed session of the expert panel	16:50	18:10	80 min

	<b>12.12.2019</b>	<i>Launch</i>	<i>End</i>	<i>Duration</i>
1.	Meeting with the heads of chairs	09:00	10:00	60 min
2.	Meeting with teaching staff members (including 3 APs presented in the self-assessment) (8-12 representatives)	10:10	11:10	60 min
3.	Visit to college departments and review of documents	11:20	12:20	60 min
4.	Break, session of the expert panel	12:30	13:30	60 min
5.	Visit to chairs and review of documents	13:40	14:40	60 min
6.	Visit to Students' Career Support Department	14:50	15:50	60 min
7.	Review of documents	16:00	17:00	60 min
8.	Closed session of the expert panel	17:10	18:10	60 min

	<b>13.12.2019</b>	<i>Launch</i>	<i>End</i>	<i>Duration</i>
1.	Meeting with members of Student Council and Student Scientific Society (8-12 representatives)	09:00	10:00	60 min
2.	Meeting with students (8-12 representatives)	10:10	11:30	60 min
3.	Expert panel discussions	11:20	12:20	60 min
4.	Break	12:30	13:30	60 min
5.	Open meeting with expert panel	13:40	14:10	30 min
6.	Meetings in College departments	14:20	15:50	90 min
7.	Observation of resources (classrooms, gyms, laboratories, cabinets, library, first-aid post, canteen)	16:00	17:00	60 min
8.	Meeting with members chosen by the expert panel	17:10	17:40	30 min
9.	Closed session of the expert panel	17:40	18:40	60 min
10.	Meeting with the college Director	18:40	19:00	20 min

### APPENDIX 3. LIST OF DOCUMENTS OBSERVED

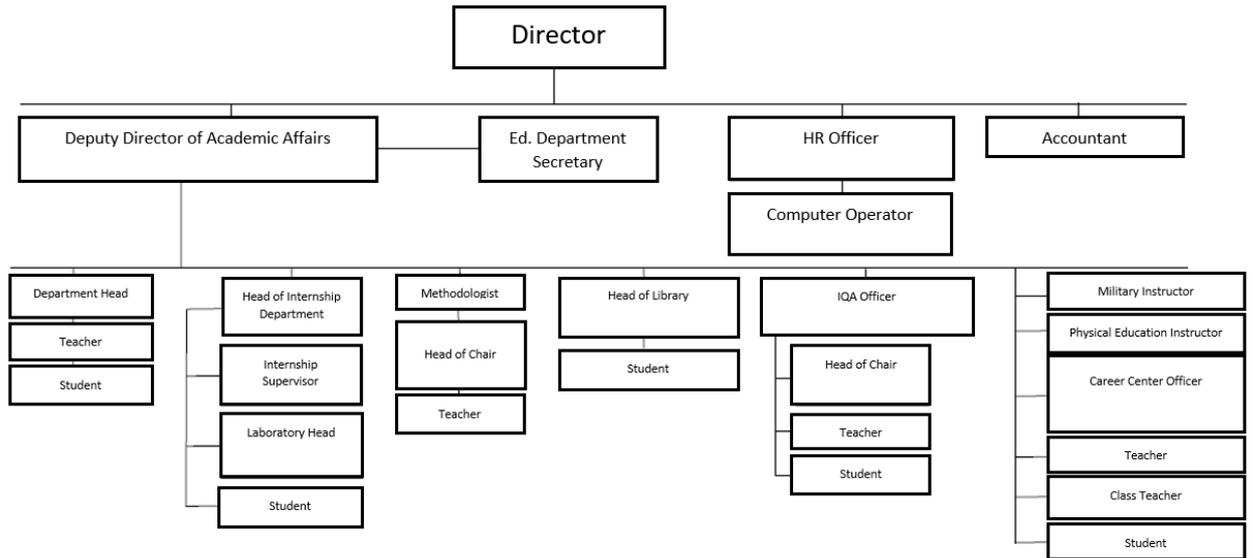
N	NAME OF THE DOCUMENT	CRITERION
1	Members of the SP development team approved by the order of the director	1
2	SP shor-term plan	1
3	Staff list	2
4	Tarification	2
5	Minutes of college council meetings	2
6	Employee personnel files	2
7	Curricula	3
8	Chair work plans	3
9	Minutes of chair sessions	3
10	Chair minutes on lesson obesravtions	3
11	Personal record books of the teachers	3
12	School visit schedule	4
13	Work plans of class teachers	4
14	Internship diaries	4
15	Essay samples	4
16	Reports of the Admissions Committee on the admission of applicants	
17	Grounds for teacher trainings / lists, programmes, schedules /	5
18	Annual plans and reports of chairs and departments	6
19	Annual planning estimates	7
20	Ownership certificates	7
21	Lease agreements	7
22	Financial reports	7
23	Basis of the conducted surveys / completed questionnaires /	10
24	Functional responsibilities of the Quality officer	
25	Department reports	10

#### APPENDIX 4. RESOURCES OBSERVED

1. Classrooms
2. Computer classroom
3. Biology laboratory
4. Cosmetology classroom
5. Cosmetology centre
6. Library
7. First-aid post
8. Vardenis Garrison Military Hospital
9. Vardenis town polyclinic
10. Vardenis Psychiatric Hospital

**APPENDIX 5. ORGANISATIONAL STRUCTURE OF THE EDUCATION INSTITUTION**

**VARDENIS MEDICAL-HUMANITARIAN COLLEGE**  
 Scheme of Organisational Structure by Subordination and Communication Links



## **APPENDIX 6. LIST OF ABBREVIATIONS**

1. **AP** - Academic Programme
2. **AS** – Administrative Staff
3. **IQA** - Internal Quality Assurance
4. **IQAS** - Internal Quality Assurance System
5. **NCVETD** – National Center for Vocational Education and Training Development
6. **NQF** – National Qualifications Framework
7. **PDCA** – Plan-Do-Check-Act
8. **SA** – Self-Assessment
9. **SAS** - State Accreditation Standard
10. **SC** - Student Council
11. **SP** - Strategic Plan
12. **TS** – Teaching Staff