

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



**EXPERT PANEL REPORT  
INSTITUTIONAL ACCREDITATION OF  
ARARAT STATE MEDICAL COLLEGE**

**Yerevan – 2024**

## **INTRODUCTION**

The institutional accreditation of Ararat State Medical College (hereinafter referred TLI or college) is carried out based on the application submitted by the College. The process of institutional accreditation is organized and coordinated by “National Centre for Professional Education Quality Assurance” Foundation (hereinafter ANQA), guided by regulation on “State Accreditation of Higher Education Institutions and Academic Programmes in RA” set by RA Government Decree N 978-Ն (dated June 30, 2011) and by Decree N 959-Ն on “Approval of RA Standards for Professional Education Accreditation” (dated June 30, 2011).

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

The accreditation process was funded by the College.

The institutional accreditation is aimed not only at external evaluation of quality assurance but also at continuous improvement of the quality of management and academic programmes at the institution. Special emphasis was paid to the cooperation of the institution and employers and its impact on the content of education.

The hereby report comprises the results of the evaluation of the institutional capacities of the TLI by the State Accreditation Criteria and Standards.

## SUMMARY OF EVALUATION

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

When conducting the evaluation, the expert panel took into account that the College is the only VET medical institution in the region. This circumstance emphasizes the mission adopted by the College and its important role in the region. The main mission of ASMC is to provide each student with individual personal and professional knowledge, abilities and skills. Within the framework of the state education development strategy, to train qualified, competitive specialists in the health sector, who will ensure a prosperous and dignified future with the education they receive, with secondary professional education that meets the requirements of the labor market and NQF. The expert panel considers positively the clarification of the definition of the college's mission in the 2020-2023 SP and its alignment with its field of activity. At the same time, it is necessary to emphasize that the college is aware of its important role in the health sector of the region, assuming the responsibility of training qualified and competitive personnel. The college implements secondary professional academic programs in "Nursing", "Midwifery", "Dental technical work", "Pharmacy", and "Medical cosmetology" specialities, guided by state educational standards. The college correlates the implementation of academic programs with the labor market of the region and the needs of the stakeholders, thus, in 2019, it introduced the part-time learning "Pharmacy" AP, and in 2021, the "Medical Cosmetology" AP.

It should be noted that the college provides the learning outcomes defined by the SES mainly through the joint use of resources with partners, and the active collaborative environment between the college and the employer contributes to the formation of student's professional skills and experience directly in practice, which is one of the college's strengths. During the site visit, it became clear that the provision of necessary resources by employers and partners to the college fully justifies their expectations, due to the training of knowledgeable professionals. This is also evidenced by the demand for college graduates and the high rates of employment in the profession.

In the implementation of academic programs, highly qualified faculty from the practical field play an important role, who connect the practical field with learning, and contribute to the formation of professional clinical thinking in students, through situational problems and analytical assignments. The College pursues monitoring of teaching and learning methods through class observations, paying attention to the use of active learning methods by lecturers, but these steps need to be strengthened by the introduction of uniform approaches and policies for the selection of teaching and learning methods. The expert panel also emphasizes the need to develop and localize evaluation criteria within each module, which will increase the credibility of the evaluation system.

Highly appreciating the implementation of APs in the college, the expert panel considers

it unnecessary for the college to develop AP outcomes, linking both with subject/modular learning outcomes and with teaching, learning and assessment methods. The development of this toolkit will allow the college to more efficiently manage and monitor the progress of academic programs, contributing to their continuous improvement to the changing needs of the labor market. In this context, it is also important to conduct comparative analyzes /benchmarking/ with similar academic programs to localize positive experiences and share them.

The expert panel considers it positive that the college has somewhat improved the educational environment necessary for the implementation of the APs in recent years, however, there is still a need to replenish some infrastructure and resources. The panel also highlights the fact that the college's financial income is limited to tuition fees, which does not allow the college to make large savings. From this point of view, the diversification of financial resources with the inclusion of alternative sources has an important strategic importance for replenishment of the material and technical base of the college, for modernization and ensuring the continuity of academic programs. The expert panel is concerned about the lack of mechanisms for linking financial resources and strategic goals, which may lead to ineffective financial and economic activities. In this context, the development and implementation of the financial distribution policy will allow the college to develop its strategic areas proportionately.

Turning to the strategic plan, the expert panel emphasizes the more targeted use of strategic planning tools in the 2023-2028 SP, in contrast to the previous 2018-2023 SP. However, the SP, as a long-term planning document, still does not contribute to the improvement of the college's management processes. It is particularly worrying that the goals aimed at improving both management and quality assurance systems are missing in the SP. The expert panel also emphasizes the positive changes in the management system, which are correlated with the positive effects of the implementation of QA mechanisms, but the QA culture in the college is still in the formative stage.

On the other hand, the management structure chart shows a centralized management system. Almost all divisions (departments) are directly subordinated to the director, which leads to a weak expression of horizontal connections and reduces management efficiency. It is worth noting the need for management decentralization and clarification of functions, which will allow the college to effectively distribute its human resources, and increase management efficiency in all processes. It is worth special attention to the work and role of the Quality Assurance responsible (department) as a link that evaluates the effectiveness of management, providing the necessary operational connections and environment for conducting objective and impartial studies.

Quality assurance in the college is mainly related to the quality of education. From this point of view, the college has managed to record positive progress, but this experience needs to be extended to other processes as well. In particular, QA processes do not address the effectiveness of management, it is not visible to ensure the PDCA cycle in all institutional processes. All this leads to the rudimentary implementation of document administration, many documents are not applicable or do not correspond to their legal and normative meaning, which can negatively affect the management of all processes. Monitoring and evaluation of long- and short-term planning of

documents, as well as the interconnection of planning and accountability mechanisms and the application of the analytical component of reports, are out of focus in QA processes. It is positive that the college has managed to ensure the periodicity of surveys conducted among students and lecturers, but it should be emphasized that the evaluation tools are still very limited and do not apply to institutional processes, the surveys do not contribute to the identification of needs, and the analytical tools are still weakly applied leading to a partial analysis of the results. In general, mechanisms for process monitoring and efficiency evaluation are missing, all of this hinders the making of data-based decisions based on the principle of quality assurance.

The expert panel considers positively the implementation of several steps promoting the development of the college, such as the introduction of structures for the involvement of internal and external stakeholders in collegial management bodies, the effective use of applicant recruitment mechanisms, the active participation of students and lecturers in social work, additional professional knowledge and counselling for students, where employers are also involved. All this contributes to the effective organization of education and the formation of a student-centered environment. Nevertheless, the autonomy of the SC is still not fully ensured in the college, which leads to the reduction of its role as a body for the protection of students' rights. The mechanisms of linking research and learning are also weakly applied in the college, the implementation of research works is not regulated by procedures.

From the point of view of continuous development or improvement of academic programs, it is important to valorize research in the SP, defining it as a goal, with the introduction of effective mechanisms for linking research and learning. The college's research-oriented processes do not promote and encourage faculty involvement in collaborative research with students. It is necessary to spread the positive experience of the "Pharmacy " AP in other academic programs as well.

The expert panel emphasizes the manifestation of the societal responsibility of the college, which is expressed by the transfer of knowledge and values to different circles of society, by the active involvement of the students. All of this contributes to the increase of the college's reputation in the region. However, the lack of a college website limits the dissemination of information and the publication of objective and updated information on institutional processes making it available to a wider range of stakeholders. The expert panel highly appreciates the external relations formed by the college and the effective cooperation with the sector partners and employers of the region and the republic, however, the lack of a website and policies and procedures for the establishment of external relations may hinder the further expansion of external relations by the college both in the republic and at the international level. From the perspective of internationalization, the college should pay the necessary attention to increasing the level of foreign language knowledge of the stakeholders, for this purpose, introducing effective mechanisms that will promote the opportunities to be involved in the mobility programs of students and faculty.

#### **Strengths of the Institution:**

1. Carrying out an important mission in the region by training qualified professionals in line with the demands of the healthcare labor market.
2. Professional faculty with the involvement of doctors-lecturers from the practical field.

3. In the framework of cooperation, full use of the resource base of partners, connecting learning with the practical field.
4. A clear policy implemented by the college for professional orientation and career guidance.
5. Applying clear mechanisms for the recruitment of applicants.
6. High demand for graduates in the region.
7. Existence of mechanisms for transferring knowledge and values to society with the active participation of students.
8. Wide range of partnership relations in the region.

#### **Weaknesses of the Institution:**

1. Being in the process of forming a culture of strategic management and planning.
2. Absence of quantitative and qualitative indicators of indicators for evaluating the results of the strategic plan.
3. Lack of a unified system of interrelationship of research or analytical and educational processes.
4. Lack of incentive mechanisms for the professional advancement of the faculty.
5. Lack of alternative financial inputs.
6. Lack of an official website and weak mechanisms for providing feedback to external stakeholders.
7. Weak expression of the analytical component in the reports.
8. Being in the process of forming the quality assurance system.
9. Incompleteness of the PDCA cycle in management and quality assurance processes and weak implementation of monitoring mechanisms.

#### **Main recommendations:**

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

- Revise the college's strategic plan, clarify strategic priorities, linking sectoral directions with goals and objectives.
- Revise the schedule of the SP, defining clear responsibilities, deadlines, resources for implementation, and the form of accountability.
- Develop and define realistic and measurable quantitative and qualitative indicators for the evaluation of the relevant results of the SP goals, which will express the degree of achievement of the goals.
- Develop effective mechanisms for expressing the needs of stakeholders in the SP goals.

##### **Governance and Administration**

- Align the short-term planning documents of the departments with the long-term plan of the SP, defining the expected mid-term results and their evaluation indicators, paying attention

to the improvement of the quantitative and qualitative indicators of the degree of achievement of the result, as well as the accountability processes.

- Clarify the scope of responsibility of the administrative staff, and faculty of the TLI, reviewing the passports of positions and the regulations of the departments, avoiding duplication of functions and overloading of positions, and ensuring the expression of vertical and horizontal connections between departments.
- Clarify and improve the documentation process, assess the operational significance of college documents, and review them ensuring the uniformity of legal form and content, based on the principle of quality assurance.
- Encourage the active participation of internal and external stakeholders in the decision-making process related to them, developing and implementing appropriate procedures and mechanisms.

### **Academic programs**

- Develop an academic program framework package by defining the outcomes of the APs, linking them to the learning outcomes of the modular programs defined in the SESs and the NQF characteristics, and expressing the needs of internal and external stakeholders.
- Develop and implement policies for the selection of teaching and learning methods, by ensuring unified approaches.
- Develop and implement a policy for the selection of assessment methods and forms aimed at achieving the outcomes of the APs, specify the assessment criteria (according to the nature of the tasks), ensuring their application in the assessment process.
- Develop and implement benchmarking policies and procedures, by localizing best practices.
- Develop and implement policies and procedures for the monitoring evaluation and improvement of APs, ensuring the use of APs monitoring and evaluation mechanisms.

### **Students**

- Review the provisions of the regulation of the SC and ensure the actual operation of the SC by the provisions of the regulation.
- Develop and implement effective mechanisms to involve students in research works.
- Diversify a clear toolkit for highlighting students' needs.

### **Faculty and staff**

- Review the criteria for the selection and qualifications of administrative staff and faculty by profession.
- Develop and diversify the mechanisms for raising the needs of administrative staff and faculty by connecting them.
- Ensure the professional progress of administrative staff and faculty, organizing professional training based on the identified needs.

- Develop and implement faculty evaluation and incentive procedures, paying attention to the promotion of research activities and professional advancement.

### **Research and Development**

- Clarify the college's vision in the field of research by developing and implementing a policy and strategy that ensures the development of research, by defining clear directions and tools for the implementation of research.
- Expand the opportunities for the implementation of research-oriented assignments, contributing to the development of students' analytical and research abilities.
- Introduce clear mechanisms to involve lecturers in research activities and clear indicators evaluating the effectiveness of research activities in the college.
- Develop and implement procedures that facilitate the implementation of research work with the learning process.
- Develop and implement clear criteria for evaluating research works.

### **Infrastructure and Resources**

- Develop and introduce a policy for the distribution and management of finances, clarifying the distribution of financial flows according to the priorities of the SP, and introducing financial risk assessment mechanisms.
- Introduce mechanisms to diversify financial inputs and search for alternative sources, ensuring the financial stability of the college and the continuous replenishment of the material and technical base.
- Coordinate the internal documentation of the college, developing and introducing appropriate procedures, to form a unified information base.

### **Societal Responsibility**

- Ensure the connection with the goals and actions of strategic planning in reports, by giving them an analytical nature.
- Assess, clarify and improve mechanisms for providing feedback to society, including the launch of the website and public relations (PR), and a public engagement strategy developed.
- Develop and implement additional paid educational services for society to provide new financial flows.

### **External Relations and Internationalization**



- Develop and implement externalization and internationalization policies and procedures.
- Introduce mechanisms that promote and encourage the study of external relations, and local and international experience.
- Contribute to the continuous improvement of the language proficiency level of internal stakeholders.

#### **Internal Quality Assurance System**

- Review the quality assurance policy, clarifying the College's vision, goals, documents and their relevance to the activities carried out in the QA processes, considering the priorities of the College's SP.
- Introduce effective mechanisms for raising needs with the involvement of internal and external stakeholders.
- Introduce a clear methodology for developing surveys and other tools used in the QA process, and improve surveys by making them meaningful and problem-revealing.
- Introduce mechanisms for evaluating the effectiveness of the processes implemented in the College, collecting data and analyzing them, based on the PDCA cycle.
- Ensure publicity and transparency of QA processes for both internal and external stakeholders.

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**Asya Simonyan, Chair of Expert Panel**

**09.02.2024**

## **DESCRIPTION OF EXTERNAL REVIEW**

### **COMPOSITION OF EXPERT PANEL**

External evaluation of the institutional capacities of Ararat State Medical College was carried out by the following expert panel.

1. **Asya Simonyan**-lecturer of the Department of Physical Education Theory and Methodology of SUSH, Candidate of Pedagogical Sciences, artistic gymnastics coach, head of the expert panel.
2. **Narine Sirakanyan**- Candidate of Pedagogical Sciences, National Center for Innovation and Entrepreneurship of the Ministry of Economy of the RA, head of programs, member of the expert panel.
3. **Karine Mnatsakanyan** – Lecturer and methodologist of the chair of "General medical modules, microbiology, hygiene and ecology, infectious, skin, sexually transmitted diseases" of Yerevan Base Medical College, member of the expert panel
4. **Suzanna Hakobyan** - Student of the Yerevan Base Medical College, student-expert of the expert panel.

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

The works of the expert panel were coordinated by Lilit Ghazaryan, a specialist of the Secretariat Department of the ANQA.

All the members of the expert panel and the coordinator have signed independence and confidentiality agreements.

### **PROCESS OF THE EXTERNAL REVIEW**

The College applied for state institutional accreditation by submitting to ANQA (13.01.2023) filled the application form, presented copies of the license, and respective appendices.

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

After deciding to accept the application (27.01.2023) an agreement was signed between ANQA and College. The self-evaluation of the college was carried out by the working group formed by the order of the director of the College.

#### **Self-evaluation**

Considering that the educational institution is going through institutional accreditation for the first time and is in the initial stage of the formation of the culture of quality assurance in college, ANQA has conducted online workshops with accredited VET institutions. The workshops aimed to prepare colleges for the organisational stages of the accreditation process. The workshops took place between February 21-22 and March 3-4, 2023, and were attended by TLI's employees. During the workshops, the interpretations of the institutional accreditation criteria and standards, the electronic questionnaire to be filled in for applying for institutional accreditation, and the features of self-evaluation and SWOT analysis were presented. The educational institution carried out a SWOT analysis, which was discussed with the employees of the ANQA. During the implementation of the self-evaluation, current discussions were organized by the ANQA to clarify the issues.

The revised self-evaluation of the college's institutional capacity was presented on 10.03.2023. The self-evaluation was carried out by the employees of the institution. External stakeholders did not participate in the self-evaluation process. Each criterion was analyzed by a college staff member considering the work orientation and criterion requirements. The self-evaluation was mainly descriptive and general, which did not allow the experts to get an idea of the real situation in the college during the preliminary evaluation.

### **Preparatory phase**

After the submission of the self-evaluation report and the attached documents by the TLI, the ANQA coordinator observed the package to reveal its correspondence to the requirements of the ANQA. The self-evaluation and the attached documents were provided to the expert panel for the preliminary evaluation. The composition of the expert panel was agreed upon with the College and was confirmed by the order of the ANQA Director.

To prepare the expert panel members and ensure the effectiveness of the activities, training on the following topics was conducted:

- The main functions of the members of the expert panel,
- The ethics and techniques of holding meetings and doing inquiries,
- Defining the specifics of the VET sector and interpretation of accreditation criteria according to the VET sector
- Preliminary assessment as a stage of preparation of the expert report, the main requirements for the report.

Having reviewed the self-evaluation report and documents of the college, the expert panel conducted the preliminary evaluation. According to the format, the lists of questions and objectives for different departments and target groups, as well as additional documents have been prepared.

Within the scheduled time, the expert panel summarized the results of the preliminary evaluation, and the Chair of the expert panel, together with the process coordinator, set the schedule of the site visit<sup>1</sup>. According to the ANQA manual, the intended close and open meetings with all the target groups, documents observation were included in the schedule, professional meetings etc. The members of the expert panel also had professional meetings with the AP responsible presented by the College, faculty, and students. Before the professional meetings, the experts studied the assignments given to the students and conducted class observations to understand the extent to which these assignments are aimed at achieving the expected outcomes.

### **Preparatory visit**

Because ASMC is located in the Ararat region, the preparatory visit of the College was done online before the site visit. The ANQA coordinator, the head of the institutional program accreditation department and the head of the expert panel were present at the meeting. During the meeting, the schedule of the site visit was introduced and agreed upon with the college as well as discussed and mutually agreed decisions were made regarding the technical, organizational, and information issues of the site visit, the behaviour, and ethical norms of the meeting participants.

### **Site visit**

The expert panel site visit took place from October 30- November 3, 2023. One day before the scheduled visit (30.10.2023), all members of the expert panel and the coordinator had a closed meeting. The purpose of the meeting was to highlight the strengths and weaknesses of the College according to the standards, clarify the questions to be asked to the target groups, and discuss the procedure of the meetings and the next steps. The site visit started and ended with meetings with the director of the College. All the participants of the meetings were selected at random from a pre-provided list. All scheduled meetings were held. During the visit, the expert panel conducted a study of documents. At the end of each working day, the expert panel closed meetings were held to discuss the results of the interim expert assessment, and at the end of the visit, the main results were summarized.

The conclusion on the criteria was reached by the expert panel because of discussions and analyses

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<sup>1</sup> Appendix 2. Schedule of the Expert site visit

of all members, always applying the principle of consensus.

### **Expert panel report**

The expert panel members and the ANQA coordinator prepared a preliminary version of the expert report. After approval by the members of the expert panel, the preliminary report was provided to the college on January 12.

On 22.09.2023, the College sent its response to the report to ANQA. The ANQA provided observations of the College to experts. The college did not submit any comments on the preliminary report. The expert panel prepared the final version of the report, which was approved by the group on 09.02.2024 and provided to the college.

**Lilit Ghazaryan**

**Coordinator of the Expert Panel**

**09.02.2024**

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA

| <b>CRITERION</b>                                       | <b>CONCLUSION</b>     |
|--|-----------------------|
| <i>I. Mission and Purposes</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. Faculty and 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 Internationalization</i> | <b>Satisfactory</b>   |
| <i>X. Internal Quality Assurance System</i>            | <b>Unsatisfactory</b> |