

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



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

Yerevan – 2025

INTRODUCTION

Institutional accreditation of the Armenian Medical Institute (hereinafter referred to as AMI, TLI, or the Institute) was conducted in accordance with the institution's application.

The institutional accreditation process is coordinated and implemented by the “National Center for Professional Education Quality Assurance” Foundation (ANQA). Whilst carrying out its operations, ANQA was guided by the regulation on “State Accreditation of RA Institutions and their Educational Programs” set by the RA Government decree N978 of June 30, 2011, as well as by decree N959-Ն of June 30, 2011, on “Approving the RA Standards for Professional Education Accreditation”.

The expert panel, which consisted of four local and one international expert, was formed in accordance with the ANQA Regulation on the Formation of the Expert Panel and provided expertise.

Institutional accreditation is designed to evaluate the quality assurance and continuous improvement of an institution's management and educational programs. Hence, there were two important issues for local and international expert panel members:

To carry out an expertise of institutional capacities in line with the RA standards for state accreditation,

To evaluate the institution's quality, compliance with international developments, and integration into the European Higher Education Area (EHEA).

The report presents the results of the expertise on TLI's institutional capacity, as assessed according to the RA criteria for professional education accreditation and the peer review by an international expert from the perspective of integration into the EHEA.

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SUMMARY OF EVALUATION

EVALUATION OF INSTITUTIONAL CAPACITIES ACCORDING TO ACCREDITATION CRITERIA

The expertise of the Armenian Medical Institute was evaluated by an expert panel formed in accordance with the requirements of the ANQA Regulation on the Formation of the Expert Panel. The evaluation was carried out according to the ten criteria set by the RA Government on 30 June 2011 N 959Ն decree.

During the evaluation process, the expert panel considered the specific characteristics of the Armenian Medical Institute's activities, particularly the fact that the institution trains healthcare professionals to meet the needs of the national healthcare market. In this context, the location of AMI plays an important role. Being adjacent to the "Erebuni" Medical Center allows students to complete several phases of the academic cycle directly in a clinical environment, under the supervision of experienced physicians.

The Institute maintains close collaboration with the aforementioned medical center, which supports the professional development of students by integrating theoretical education with practical experience. Additionally, the founders of AMI are physicians who, leveraging their professional networks and reputation, ensure a qualified faculty by involving practising doctors from the field, who also participate in the educational process as lecturers. These factors contribute to a distinctive educational environment at AMI, where students engage with medical practice from the early stages of their studies, supporting the development of their professional identity and early acquisition of practical competencies.

The expert panel also acknowledged that in 2021, the institution underwent its first institutional accreditation process, resulting in a four-year institutional accreditation. Based on the identified shortcomings and recommendations in the expert report, AMI developed a follow-up plan along with a timeline for implementation. Compared to the previous accreditation outcomes, structural improvements have been made at AMI, particularly in areas such as the organisation of the educational process, the development of quality culture, and the enhancement of governance processes.

The credibility of qualifications awarded by the Armenian Medical Institute is ensured through the structural and content modernization of academic programs, engagement of a professional faculty, and the targeted use of institutional resources.

The academic programs are developed within a framework of continuous improvement, incorporating the clarification of learning outcomes, integrated teaching methods, case-based learning, and the development of clinical skills within hospital settings. The APs support the development of practical competencies through the direct implementation of clinical cycles in partner institutions, thereby enabling students to acquire professional skills in real-world environments.

The faculty is enriched by the inclusion of practising medical professionals, who not only participate in the instructional process but also contribute to the ongoing update of educational content and provide professional guidance and mentorship for students. This enhances the stability of the teaching process and supports the maintenance of high instructional quality.

The resource base is being developed progressively, with particular emphasis on ensuring environments suitable for clinical training and the provision of simulation laboratories. AMI also utilises the resources of partner hospitals to compensate for gaps in its own laboratory and technical infrastructure. Additionally, library enhancements, access to professional guidelines, and the provision of up-to-date information by experienced physician-lecturers contribute to the creation of a relevant and supportive environment for professional education.

At the Armenian Medical Institute, progress has been made in developing a strategic planning and governance culture. The institution's mission clearly articulates its core objective: to prepare professionals for the national healthcare sector. AMI's current operations are generally aligned with its stated goals.

Decision-making processes within the institution follow established procedures, including formal meetings, data analysis, and the involvement of relevant structural units. This allows for structured and consistent governance practices. However, the level of involvement of internal and external stakeholders in strategic decision-making, particularly in governance bodies, remains limited.

In addition, the lack of financial diversification poses a potential risk to the sustainable implementation of the strategic plan.

The QA system at the AMI has undergone structural reinforcement. A network of quality assurance responsables operates at the departmental and faculty levels, supported by a centralised Education Quality Assurance Centre. Data-driven tools are utilised, including surveys, classroom observations, and curriculum reviews. A positive trend has also been observed in the implementation of the PDCA cycle.

Nevertheless, quality assurance functions remain primarily focused on the educational component and do not yet extend comprehensively to other institutional domains such as governance and international collaboration. As a private medical education institution, AMI has the potential to develop a results-oriented management system and a fully integrated institutional quality assurance framework.

To achieve this, it is necessary to strengthen the alignment between strategic and financial planning, ensure the comparability and coherence of internal reporting, broaden the scope of quality assurance to cover all institutional areas, and deepen the engagement of external stakeholders across all phases of strategic processes.

Regarding the university's long-term development, AMI demonstrates encouraging trends in promoting student research engagement. A student scientific society is operational,

and scientific initiatives are being conducted with the participation of both faculty and students. In some cases, students are involved in actual research projects.

At the same time, there is an absence of a clear research policy to guide activities in alignment with the university's academic profile. Likewise, tools for coordinating, promoting, and systematically utilising research projects and outcomes remain underdeveloped.

In terms of internationalization, initial steps have been taken. There are collaborative initiatives with universities in Russia, Germany, and Italy. However, the institutional framework for international cooperation is limited, as there are no mobility programs, international courses, or educational projects in place, and a comprehensive internationalisation strategy has yet to be formulated. The lack of a dedicated coordinating unit hinders the consistent and structured development of internationalization processes.

Regarding public engagement and societal responsibility, cultural foundations are beginning to take shape. Awareness-raising and career orientation initiatives targeting school students are being implemented. Nevertheless, a coherent and systematic public relations policy is still lacking. Certain institutional reports, such as the Rector's annual report, are not publicly available, which limits transparency and access to information for external stakeholders.

In the area of student services, elements of a student-centred approach are in place, including academic advising, support services, the collection of student feedback, and individualised instruction. There are existing preconditions for the development of a Career Center, an alumni database, and an alumni association. However, these initiatives need to be formalized with clear structures, designated responsibilities, and established procedures.

Strengths of the Institution

1. Close collaboration between AMI and medical institutions, contributing to the strengthening of the practical component of education through shared use of resources and the involvement of practising lecturers as teaching staff.
2. Organisation of the teaching process within hospital environments, which facilitates the development of practical skills in real-life clinical settings.
3. Integration of assignments aimed at developing clinical reasoning, designed by practising physicians, thereby fostering the formation of a professional mindset.
4. Gradual implementation of student-centred learning elements, including active learning methods and limited-size study groups to support individualised instruction.
5. Development of a quality assurance culture, supported by departmental quality responsables, the Quality Assurance Center, and elements of the PDCA model.
6. Increased engagement in research activities, with participation of both students and faculty in conferences, definition of thematic research areas, and active functioning of the Student Scientific Society, contributing to the formation of a research-oriented academic culture.

Weaknesses of the Institution:

1. Absence of an internationalisation strategy and lack of mobility programs, limiting global engagement and cross-border academic cooperation.
2. Limited budgetary support for research activities constrains the institution's capacity to develop a robust research environment.
3. Dependence on tuition fees as the primary source of institutional funding poses risks to financial sustainability.
4. Restricted opportunities for external stakeholders to participate in governance processes, reducing inclusiveness and transparency in decision-making.
5. Incomplete implementation of accountability mechanisms, including the non-public nature of the rector's reports and inconsistencies in the structure and availability of institutional reports.

Main recommendations:**Mission and Purposes**

- Develop a business plan that includes a resource estimation for the implementation of the strategic plan, risk assessment, and clarification of funding sources, to ensure sustainable and realistic planning.
- During the next revision of the strategic plan, consider formally integrating the areas of research and internationalisation by defining specific objectives and actions to support their development.
- Review the KPIs included in the strategic plan to ensure their measurability and alignment with the reporting structures of institutional units and with the mechanisms for periodic evaluation of the strategic plan.

Governance and Administration

- Establish and implement an empowered governing board that includes external stakeholders, such as alumni, employers, and sectoral experts, to ensure multi-perspective deliberation on strategic decisions and to provide external oversight.
- Develop a financial diversification strategy, incorporating international grant acquisition, partnership-based programs, supplementary educational services, and potential investment avenues.
- Define a standardised structure and assessment format for annual reports of institutional units, ensuring inclusion of strategic plan implementation analysis and comprehensive evaluation every two years.
- Enhance mechanisms for analysing external factors (socio-economic, educational, legislative, and market-related), to support the evaluation of the external context in strategic planning and decision-making processes.

Academic programs

- Strengthen thematic and methodological integration within academic programs, reinforcing interdisciplinary coherence through joint teaching, aligned curricula, and harmonised pedagogical approaches.
- Introduce structured and comprehensive tools for assessing practical skills across educational programs, such as the Objective Structured Clinical Examination (OSCE).
- Ensure the systematic analysis and integration of recommendations from the final attestation (certification) committee chairs into the continuous improvement of academic programs.
- Expand the use of teaching methods aimed at developing clinical reasoning, with a focus on case-based learning in hospital settings and task design by practising physicians to simulate real-world scenarios.
- Continue the comparative analysis of academic programs with internationally recognised universities to incorporate best practices and expand mobility opportunities.

Students

- Evaluate the effectiveness of student recruitment activities, and based on the findings, develop a more systematic and long-term policy for applicant outreach and admissions strategy.
- Coordinate student support services, particularly in the areas of academic advising, social support, and career development, by clearly defining functions and assigning responsibilities to the appropriate units.
- Develop institutional mechanisms for alumni engagement, including the creation of an alumni database and career development guidance in collaboration with employers.
- Establish an alumni association to maintain strong connections with graduates and to support institutional advancement.

Faculty and staff

- Continue developing multi-dimensional mechanisms for evaluating teaching quality and ensure the analytical use of results to inform course updates and refine faculty training priorities.
- Develop and implement a structured faculty development system, based on regular needs assessments, including training in teaching methodologies, test design, foreign language proficiency, and research competencies.
- Create opportunities for experience-sharing activities among physician-lecturers to support peer learning and the dissemination of best practices.
- Promote the engagement of early-career professionals by establishing support programs such as research mentorship, peer exchange with experienced faculty, and clearly defined career development pathways.

Research and Development

- Develop and formally adopt a clear institutional research policy, grounded in existing capacities, including the scientific potential of faculty, collaborations with local and international research institutions, and the engagement and capabilities of students.
- Align the institution's financial policy to recognize research activity as a strategic investment priority, allocating appropriate resources to support its development.
- Integrate research as a mandatory component of academic programs, to foster students' professional development through the acquisition of analytical and research skills.

Infrastructure and Resources

- Develop a mid-term plan to improve laboratory support for pre-clinical and basic science subjects, including resource assessment, a list of necessary equipment, and a phased implementation mechanism.
- Engage alternative funding sources, particularly through the pursuit of grant programs, to support institutional priorities and development initiatives.
- Establish an accessible and regularly updated electronic catalogue to facilitate literature search for students and faculty and promote a culture of library use.
- Continue strengthening partnerships with clinical bases, with a focus on modernising simulation and mannequin-based training facilities.

Societal Responsibility

- Develop a public relations strategy and communication policy aimed at systematically presenting AMI's public benefit initiatives across various media platforms.
- Analyze and improve the management functions of the website and social media platforms, including metrics such as views, engagement, and communication effectiveness, to ensure accessibility of relevant information and targeted outreach to interested audiences.
- Publish annual institutional reports and key documents of academic programs, to ensure public accountability and transparency.

External Relations and Internationalization

- Develop a clear internationalization strategy aligned with the institution's mission, incorporating student and faculty mobility, the expansion of international cooperation, multilingual instruction, and the implementation of joint academic programs.
- Develop and apply measurable indicators for evaluating internationalization efforts, such as the number of international students, percentage participation in mobility programs, number of joint programs, and other relevant metrics.
- Establish a dedicated internationalization coordination unit or responsables, responsible for managing international programs, organizing mobility, supporting application processes, and ensuring systematic implementation.

- Review existing cooperation agreements to ensure their viability and the realization of active collaboration projects, including student and faculty exchanges, joint conferences, and research initiatives.
- Enhance instruction in English and other international languages for both students and faculty, including the development of professional language communication skills.

External Quality Assurance System

- Expand the scope of quality assurance processes to include continuous monitoring and internal evaluation in the areas of governance, financial planning, resource allocation, and international cooperation.
- Strengthen employer engagement in the evaluation and enhancement of academic programs by implementing not only regular surveys, but also systematic graduate career tracking, sector-specific consultations, and co-design of courses with employer participation.
- Develop and implement a mechanism for action planning and monitoring, through which the results of student, alumni, and employer surveys, as well as course observation analyses, are translated into concrete improvement actions, with defined procedures for tracking implementation and evaluating outcomes.

Hermine Grigoryan
Head of the expert panel
Date: 19.06.2025

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

The analysis is structured according to the 10 criteria presented within the framework of quality assurance of vocational education in the Republic of Armenia. For each criterion, the main strengths, identified shortcomings, and recommendations are presented.

Criterion 1: Mission and purposes

Strength: Ami has a clear and specific mission that represents the institution's intentions and objectives. The mission is operationalized in 5 years, the strategic plan (2022-2026). KPI are established for accountability. Internal stakeholders (and to a lesser degree) external stakeholders participate in the planning of AMI's action and the decision-making. The documentation and reporting at AMI are a positive asset. Internal assessments (surveys, reporting, etc.) make AMI's performances transparent and help the institution to enhance in the future. Recommendations of the accreditation process in 2021 have been taken into account.

Weakness: In the strategic plan a clear internationalization strategy is missing. Furthermore it would be an added value if the role and profile for research would be clearer depicted in the strategic plan. The strategic plan has to be in line with vision and mission of the institute and with the annual activities and provisions (education, research, services).

Recommendations: Formulate vision more specifically, develop an internationalization strategy, clarify the role of research

Criterion 2: Governance and Administration

Strength: An Organigram has been presented (management structure of AMI). Roles and responsibilities have been described. Students and faculty are part of the scientific and faculty council and can place their needs there. With the help of many surveys and a detailed reporting system a data bases has been created that can be used for the steering of the institute. The AMI website informs the public about the provisions and main activities of the institute.

Weakness: The Governing council is quite small, decision making is concentrated in few hands, the rector is rotating (each year a selected member from the governing council). A differentiated code of conduct is still missing. No financial details have been presented. The financial income of AMI is mainly dependent of student tuition fees. The collaboration between the two main departments (medicine and dentistry) appears to be weak, communication between the internal stakeholders and with external stakeholders takes place but is not systematic. Employment data are lacking, there is no follow up of graduates and of drop outs.

Recommendations: The Governing body might profit from a broader composition, including the direct views and opinions from relevant internal and external stakeholders (this was already a recommendation in the 2021 accreditation process). Communication at AMI should be formalized and professionalized. The code of conduct of AMI should be specified. Close

contact has to be build up with the Alumni of AMI, employment statistics have to be created. A Five- year financial business plan has to be established, financial income sources should be diversified.

Criterion 3: Academic Programmes

Strengths: Study programmes are clearly structured, Learning outcomes have been stated. Learning and teaching are in line with objectives. A variety of teaching methods is applied. Programme LO's are mapped against course learning outcomes. Simulation centers are built up. Policies have been formulated for internships and also for academic integrity. Outcomes of programmes have been benchmarked against national and international examples. Academic programmes are monitored by regular surveys. Relevant extracurricular activities are carried out.

Weaknesses: not all learning outcomes are formulated according to Blooms taxonomy, information about achieved learning outcomes is inconsistently provided, a variety of exams and assessments are used to measure the impact of clinical trainings and progress of students. Policies about the use of artificial intelligence in teaching, learning and exams is lacking. There is no systematic follow up of drops outs. There are only few international co-operations and hardly any mobility window for students.

Recommendation: Increase academic and professional exchange with other HE institutions in- and outside of Armenia. Exchange information on how best to measure student progress, especially with regard to clinical skill development. Establish policies with regard of artificial intelligence in teaching and learning. Set incentives for extracurricular activities that serve the society (credit points, monetary support etc.)

Criterion 4: Students

Strength: Study admission and recruitment policies do exist, incentives are created for very good students to come, support mechanisms to help “slow progress” students are in place. There are systematic evaluations of study programs and learning environment by students, students participate in the scientific council. Individual counselling is possible (but not systematic), annual meetings with top clinicians are organised. Some (but not all) students participate in research activities. Student council deals with students rights (but there are few activities). A student guide does exist. Alumnies are very engaged.

Weakness: Studies are only offered in Armenian language so far, very few international students, No personal mentor, no career center. Student satisfaction with services is moderate (60%). No robust data about employability of graduates does exist, work of students besides participation in study programmes seems difficult. Extracurricular activities of students does exist but there is a lack of incentives. High withdrawal rate of students. Recommendations: Put incentives for extracurricular activities that serve society, take preparation steps to become ready to invite international students in the future (language courses, welcome

packages for non-Armenian students, Special efforts to integrate Armenian students from Diaspora ,etc. Assess reasons for high withdrawal rates of students.

Recommendations: Collect systematically information about employment of graduates. Profit from high engagement of employers.

Criterion 5: Faculty and staff

Strengths: Number of faculty and staff are sufficient to reach goals, there is a highly qualified faculty body. Young talented lecturers are promoted, policies of selection and recruitment do exist, award for best teachers is handed out every year, salary increase for faculty members over the last years is provided, professional development of faculty is promoted, faculty is involved in internal quality assurance, faculty participates in decision making faculty council, former students of AMI are acting later on as teachers.

Weaknesses: Some talented faculty members leave, research options at Ami are low, trainings for faculty do exist but response rate could be improved, so far trainings had to be payed by faculty members themselves.

Recommendations: Further push and enhance retainment policies for excellent teachers, create incentives for teachers to participate in trainings and in extra-curricular activities, increase options to do research at Ami, create further incentives for faculty to do research and to publish, pay for the teacher training .

Criterion 6: Research and Development

Strengths: Ami promotes research, many small steps have been accomplished towards this goal, young teachers are given incentives to do research. Bridge between research and education is assured, there are many renowned faculty members and lecturers, doing research at other institutes. Ami has a favorable environment to do good research (clinics, infrastructure, staff, etc.)

Weaknesses: A clear research strategy is still lacking, there is no clear research profile, no research center does exist, no/low budget is allocated to research, no master thesis integrated in study programs, there are only very few cooperation agreements in research. Research output and visibility is still low (but there are some good contributions in textbooks and manuals). Only few students are involved in research so far.

Recommendations: Develop research strategy and corresponding action plan, collaborate with national and international partners in research, search for external research money, create research budget, set incentives for faculty to do research and help them publishing articles in high caliber journals. Motivate teachers to involve students in research.

Criterion 7: Infrastructure and Resources

Strengths: Many investments at AMI have been made in favor of a modernized infrastructure, there are also modern clinic rooms and labs, simulation labs are planned/partly established. The salaries of faculty were increasing every year, financial spending is aligned with nr. of new students (tuition fees), currently there are >800 students at Ami, student numbers are stable. There is a good documentation system at Ami. A health care program does exist, safety/security measures have been taken on the campus. A multidimensional monitoring system is in place for the evaluation of effectiveness of resources spent to students and teachers.

Weaknesses: Money income at Ami is mainly dependent on student tuition fees, there is no diversification of income yet, there is a lack of third party money, no 5 years business plan does exist.

The yearly salary increase for faculty is a clear incentive for good teachers to stay, but the sustainability of this incentive measure has to be questioned.

Recommendations: Continue and finalize modernization efforts concerning infrastructure. Strive for a diversification of income sources, look for options to generate third party money (e.g. in domain of research and services), establish a 5 years business plan. Further develop a management information system and use results from there and from QA to steer the development of the institution

Criterion 8: Societal responsibility

Strengths: Accountability is regulated by legal documents, Annual reports create transparency. Internal accountability is given by progress data of students, midterm and graduation data. External accountability is supported by admission documents, AMI periodicals and reports to ministry. Website is an important communication and transparency tool, also “Erbuni news” and information of the local “group Viber”. Know-how to society was directly provided by AMI during Covid-19 pandemic and during the past war, and other examples of relevant community actions have been provided. There is an Ami anatomy museum, which is open to the public guided tours.

Weaknesses: Visibility of AMI in Society is still limited, the potential of knowledge transfer and services is not fully exploited by the institution. Motivation of teachers to be involved in such community services on volunteering basis seems limited. There is no marketing concept yet for Ami. Measurement of impact is not done yet.

Recommendation: Develop and implement a marketing concept to increase visibility of Ami. Develop a concept and indicators to measure impact of AMI on society. Expand services with benefits for the population, create incentives for teachers and students to be involved. Further develop and update website, translate content and information into three languages. Set incentives for students and faculty members to be involved in societal activities.

Criterion 9. External relations and Internationalization

Strengths: The mission of Ami has a strong national focus, some openness exists against the international Armenian diaspora. There are admission rules for foreign students and since 2019 foreign students can be admitted to Ami (still rare). Few successful cooperation projects have been launched with Russia, Georgia, Germany.

Weaknesses: Internationalization movements are seen with some sceptics by the governmental bodies of AMI, and subsequently an Internationalization strategy does not exist, only few measures have been taken in this direction, Studies at Ami are only provided only in Armenian language so far, no joint programmes or joint research projects with other higher education providers have been created yet.

Recommendation: Expand collaborations on local, national and international level. Develop an internationalization strategy and integrate corresponding actions into the 5 years strategic plan of Ami. Create options for an international exchange of students and teachers with other higher education institutions (Russia, Europe, etc.). Create national and international joint projects in the domain of education and research. Prepare for international opening in a step by step manner start first with internal preparation measures (establish language courses for teachers and for students, create mobility windows, organize international meetings and conferences, establish MOCs with other higher education institutions and industry, etc.)

Criterion 10: Quality Assurance

Strengths: A long tradition in internal QM does exist at Ami and annual progress has been made in this domain. QA policies have been developed, implemented and assessed. Functioning PDCA cycles do exist. A detailed QA manual has been written and encompasses all processes and QA measures that are applied at Ami. A strong internal QA structure has been established. Various survey are carried out regularly under the lead of the internal QA center (students, teachers, Alumni, employers, etc.). A strict reporting system has been established, that supplements the QA driven Management Information System. Students and Teachers can express their needs, consequences and actions are taken in case to serious problems. Trainings are offered by the QA-center.

Weaknesses: The number of employees of the QA-center is quite small, given the many task they have to fulfill. QA feedback loops are closed in many but not all cases. The use of QA data and reporting information should be pushed, they serve the steering of the institution. A Quality culture has not yet been reached but Ami is on a good pathway to that.

Recommendations: Close QA feedback loops, use results from QA for steering, maintain close networks with internal and external stakeholders, move forward towards a QA-culture at Ami

Overall impression: The international expert got a positive overall picture of the performances of AMI. Many things have been improved since that past accreditation visit.

The provision at AMI are much liked by the students, teachers are highly qualified and highly motivated. The management and also the employers showed enthusiasm. Taken all these information together the international expert is in favor of getting to an overall positive accreditation decision for AMI. This is the suggestion to be given to the ANQA accreditation committee.

Rolf Heuser, international consultant in the field of quality assurance and accreditation in higher education, Switzerland.

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

During the on-site visit, the active engagement and cooperation of the university staff significantly facilitated the evaluation process, making it much clearer and more straightforward. More specifically, the university's strengths and areas for improvement became more clearly identifiable. Despite the previous experts' visit, the university's governance and structure still require further refinement. Decisions must be made strictly based on evidence, rather than on the personal discretion of specific individuals- this is particularly crucial in the area of budgeting. Financial allocations should be made according to actual resource needs, which must also be clearly reflected in the strategic development plan. For example, decisions regarding whether the university should or should not purchase certain items must be based on research and needs assessments, not on individual preferences. Faculties and structural units should be granted greater autonomy in decision-making processes.

It is also essential to highlight that for post-Soviet countries implementing medical education programs, the most significant challenges typically lie in the availability of clinical training bases and qualified academic personnel. However, these two critical components-essential for delivering high-quality medical education—are notably well developed at the university. This provides a solid foundation for students to acquire both theoretical knowledge and practical skills in a comprehensive and effective manner.

It is encouraging to note that the university administration recognizes the need for change. Accordingly, infrastructural improvements have already been initiated: new simulation mannequins have been acquired, and the development of a simulation center is underway to support the implementation of OSCE (Objective Structured Clinical Examination) assessments.

Another noteworthy aspect is the growing emphasis on the development of the university's research component. During the visit, we had the opportunity to engage with young researchers and students who demonstrated a strong interest in participating actively in scientific research. The university has already taken promising steps in this direction, such as the establishment of a Student Scientific Council led by a highly competent early-career researcher. Moreover, the academic staff's expertise and research potential further support the view that the university possesses considerable capacity for advancing scientific work.

From an infrastructural standpoint, the university administration should place greater emphasis on creating an inclusive environment, particularly by facilitating the smooth adaptation of individuals with disabilities to the physical setting. Although the building is equipped with elevators and accessible restrooms, these facilities do not fully comply with international standards—for instance, entrance doorways are too narrow for wheelchair access.

Additionally, the university library requires significant upgrades, not only in terms of its physical infrastructure but also with regard to integration into electronic library networks. Improving both aspects is essential to ensure students and faculty have adequate access to up-to-date academic resources.

It is particularly commendable that students are actively involved in various volunteer initiatives on behalf of the university. Their engagement during the COVID-19 pandemic was especially impressive, reflecting a strong sense of social responsibility and commitment to public health.

Equally noteworthy are the activities of dental faculty students, particularly their outreach efforts in regional areas, where they collect statistical data aimed at preventing the development of dental caries. These data are also utilized for the preparation and publication of scientific articles, which further enhances the academic and practical relevance of their work.

Moreover, the university has implemented a flexible tuition payment system that takes into account the current economic conditions in Armenia. This student-centered approach allows for customized payment schedules when needed, thereby supporting access to education for a broader range of students.

At this stage, internationalization and the advancement of international partnerships remain the university's most significant areas of weakness. Although several members of the university administration have expressed that attracting international students is not among their current priorities, this does not exempt the institution from fulfilling the obligations set forth by institutional accreditation standards. Moreover, strengthening internationalization would greatly enhance the professional opportunities available to Armenian students by enabling them to access a broader academic and professional landscape—comparable to that experienced by their peers in European universities.

Importantly, the desire for greater international exposure was also voiced during interviews with students. It is also evident that the academic staff would benefit from increased participation in international exchange programs, which would facilitate the integration of innovative teaching methods into the curriculum and enrich the educational process. Furthermore, involvement in international research projects would significantly enhance the visibility and recognition of both faculty and students within global academic circles—an essential factor for long-term institutional development.

Therefore, it is crucial for the university to develop clear strategies and concrete approaches to promote internationalization. This includes leveraging existing relationships with partner institutions, signing new memoranda of understanding to support student and staff exchange programs, actively participating in international research collaborations, and allocating the necessary human and financial resources to support these efforts. Strengthening this dimension will play a pivotal role in increasing the university's competitiveness within the regional higher education landscape.

With regard to the internal quality assurance system, the Quality Assurance Office has developed a set of questionnaires and regularly conducts surveys to assess student and staff satisfaction. The results are used to inform program improvement. Additionally, while not yet fully systematic, there are efforts to monitor program outcomes. However, this aspect requires further refinement and the introduction of standardized procedures.

For instance, the Quality Assurance Office should define clear criteria for assessing the achievement of program-specific learning outcomes and establish relevant Key Performance Indicators (KPIs). Benchmarking these indicators—especially in comparison with partner universities—would provide valuable insight and foster continuous improvement.

To ensure the effective implementation of the full PDCA (Plan–Do–Check–Act) cycle, the Quality Assurance Office must be involved not only in monitoring activities but also in the development and follow-up of recommendations. Moreover, it should take responsibility for monitoring the implementation of strategic development objectives, which necessitates the identification of measurable indicators and target benchmarks.

The role of the Quality Assurance Office should be further emphasized and its structural independence strengthened, enabling it to carry out its mandate objectively and effectively. Its recommendations must be evidence-based and treated as strategic priorities by the university administration. This approach is critical to ensuring sustainable improvement in the quality of institutional processes and aligning with international standards of quality assurance.

During the visit and interviews, it became evident that the university is genuinely striving to cultivate a culture of quality, which is highly commendable. Taking into account the recommendations provided will further support and accelerate the effective and sustainable implementation of this culture across the institution.

Over the years, the university has been home to some of the most prominent scientists and physicians of the Republic of Armenia, individuals who laid the foundation for the development of various medical disciplines and served as a source of inspiration and motivation for generations of successful doctors and educators. This rich history places an even greater responsibility on the institution to uphold and advance the standard of high-quality education it has established.

It was particularly encouraging to observe that the university's academic staff remains one of its strongest assets. Highly qualified professors, invited practitioners, and subject-matter experts contribute directly to students' academic achievements. The key moving forward is to ensure that these professionals are further supported and provided with opportunities to gain international experience. This would enable them to enrich their teaching by incorporating new perspectives, methodologies, and innovations- achievable through sustained efforts in internationalization and expanded access to faculty development programs, especially in teaching methodology and international research collaboration.

Ultimately, the most important indicator of a university's success is its students and their level of satisfaction. It was truly gratifying to see that not a single student interviewed spoke without pride and enthusiasm about their university. Their level of academic preparedness was also commendable. The one recurring wish expressed by students was the desire for increased access to exchange programs and international exposure.

In this regard, special attention should be given to strengthening English language instruction. Enhancing language proficiency will ensure that AMI students have equal opportunities to participate in international projects, engage with current global literature and academic publications, and benefit from the same academic resources available to students at European universities.

The Armenian Medical Institute (AMI) demonstrates a clear commitment to providing quality medical education and shows strong potential for further development.

Nino Chichiveishvili, expert at the National Center for Education Quality Improvement in Georgia, lecturer at Geomedi University, Georgia.

DESCRIPTION OF EXTERNAL REVIEW

The following expert panel conducted the external evaluation of the institutional capacities of the Armenian Medical Institute¹.

1. **Hermine Grigoryan** - PhD in Physical and Mathematical Sciences, Dean of the Faculty of Natural Sciences at Vanadzor State University, Armenia, head of the expert panel.
2. **Nino Chichiveishvili** - Expert at the National Center for Educational Quality Enhancement of Georgia, Lecturer at the University "Geometri", Georgia, international member of the expert panel.
3. **Rolf Heuser**- International Consultant in Quality Assurance and Accreditation in higher education, Switzerland, member of the expert panel.
4. **Naira Hunanyan**- PhD in Biological Sciences, Senior Researcher at the Institute of Physiology of the National Academy of Sciences of the Republic of Armenia, Lecturer at Mkhitar Gosh Armenian-Russian International University, Armenia, member of the expert panel.
5. **Astghik Hambardzumyan**- Student at Yerevan State University, Armenia, student member of the expert panel.

The composition of the expert panel was agreed upon with the Institute and was appointed by the ANQA director.

Varduhi Gyulazyan, Head of the Institutional and Programme Accreditation Department at ANQA, coordinated the work of the expert panel. Vardanush Baghdasaryan provided the translation. All the members of the expert panel have signed impartiality and confidentiality agreements.

PROCESS OF THE EXTERNAL REVIEW

Application for state accreditation

For institutional accreditation, AMI submitted its application to ANQA, along with the application form, copies of the license, and the required appendices. The ANQA secretariat checked the data in the application form and the adjacent appendices.

After deciding to accept the application request, ANQA and TLI signed a bilateral agreement. The timetable of activities was also prepared and approved.

Self-evaluation

Within the timeframe defined by the schedule, the institution submitted its institutional capacity self-evaluation in both Armenian and English, following the format

¹ APPENDIX 1.CVS OF EXPERT PANEL MEMBERS

established by the National Center for Professional Education Quality Assurance (ANQA), along with the accompanying package of supporting documents.

The ANQA coordinator reviewed the report to verify its compliance with ANQA's requirements. The self-evaluation complied with the standardised format, included the necessary justifications, and contained the required annexes specified by the template.

The self-evaluation report, the accompanying documentation package, and the electronically completed questionnaire by the institution were provided to the expert panel. The panel's composition had been previously agreed upon with the institution and approved by an official order of the ANQA Director.

Preparatory phase

To ensure the effective implementation of the evaluation process and prepare the expert panel for its tasks, the ANQA organised a series of capacity-building and training sessions for the experts.

Upon reviewing the institutional self-evaluation report and its accompanying documentation, the expert panel conducted a preliminary analysis. In line with the established format, the panel compiled a list of additional documents to be reviewed and identified a set of issues and questions, specifying the relevant structural units or target groups to be addressed. As part of the preliminary phase, the experts also conducted classroom observations.

Following the initial assessment, the expert panel consolidated its findings and developed a detailed site visit agenda and schedule ².

Guided by the ANQA's Manual for External Evaluation, the schedule included planned meetings with all key stakeholder groups, both open and closed discussions, document reviews, and other evaluation activities as required by the external review process.

Preliminary visit

On April 15, 2025, a meeting was held with TLI's management staff. Throughout the visit, a plan and schedule were agreed upon, and discussions and mutual decisions were reached regarding organisational, technical, and informational questions, as well as the conduct and ethics of meeting participants. The conditions for the focus group meetings and the expert panel's work were also discussed.

Site-visit

The site visit took place from April 28 to May 1, 2025. The work of site visit started with a closed meeting, the purpose of which was to discuss and agree on the assessment framework with the international expert, the issues to be studied during the visit, the strengths and weaknesses of the TLI per criteria, the procedure of the focus group meetings, and clarify the next steps. All the expert panel members attended the visit, including the ANQA coordinator

² APPENDIX 2.SCHEDULE OF SITE VISIT

and the interpreter. The site visit began with a meeting between the head of the TLI and concluded with a meeting with the institution's management staff. All scheduled meetings were held. During the planned visit, the expert panel also conducted a study of documents³ and a review of resources⁴.

During the closed meeting of the expert panel held at the end of each working day of the visit, the interim results of the assessment were presented. At the end of the visit, the main results were summarised in a closed discussion. The evaluation was conducted within the framework of the State Criteria and Standards of Accreditation and ANQA procedures, following which the assessment is divided into two levels: **satisfactory and unsatisfactory**.

Expert panel report

The expert panel prepared a preliminary expert panel report based on the electronic questionnaire completed by the university, the review of the self-evaluation, the documents attached to it, the auditions conducted, and the observations made during the site visit, following regularly organised discussions. Based on several findings of the discussions, the expert panel and ANQA coordinator prepared the preliminary expert panel report. The international expert prepared a separate peer review. The documents were translated and handed over to the expert panel. The peer review is fully included in the report. After the expert panel members approved the preliminary report, it was provided to the TLI.

The AMI did not submit any observations on the preliminary expert report. The expert panel finalised the report and provided it to the Institute on June 19, 2025.

Varduhi Gyulazyan
Expert panel coordinator

19.06.2025

³ APPENDIX 3. LIST OF DOCUMENTS OBSERVED

⁴ APPENDIX 4. RESOURCES OBSERVED

EVALUATION ACCORDING TO ACCREDITATION CRITERIA

BRIEF INFORMATION ABOUT THE EDUCATION INSTITUTION

History: The Armenian Medical Institute (AMI) was established in 1990 as the first private medical higher educational institution in the post-Soviet region. From its inception, the institution set out to create a high-quality professional educational environment by integrating science with education.

In 2001 and 2021, AMI received state accreditation, reaffirming its stable position within the Republic of Armenia's higher education system.

AMI has achieved significant progress through collaboration with research institutions throughout its key developmental stages. This collaboration has led to the establishment of academic departments that foster interdisciplinary educational experiences and advance scientific inquiry.

Education: The Armenian Medical Institute comprises two faculties: General Medicine and Dentistry.

The institute hosts 16 academic departments, located within its facilities and across 27 leading clinical bases. The primary educational and clinical training base remains the “Erebuni” Medical Center, where students acquire both theoretical knowledge and practical skills.

Over the years, AMI’s lecture halls, laboratories, and phantom rooms have been equipped with modern instruments and technology. Since 2017, construction has been underway to establish new laboratory classrooms on the second floor.

The academic staff comprises approximately 150 highly qualified specialists, including academicians from the National Academy of Sciences of the Republic of Armenia, Doctor of Science, Professors, and Associate Professors. The stability and expertise of this faculty significantly contribute to ensuring the delivery of a high-quality educational process.

Research: The institute emphasizes the active involvement of students and faculty members in research activities. Students are engaged extensively in laboratory work under the direct supervision of academic staff.

Additionally, AMI organises scientific conferences and publishes academic journals to promote and disseminate research outcomes.

Internationalization: Within the framework of its strategic objectives, the Armenian Medical Institute strives to enhance its international visibility by developing benchmarking practices for academic programs, ensuring a modern and up-to-date learning environment, and promoting faculty mobility.

Quality Assurance: To ensure quality assurance, the institute continues to implement contemporary educational and research models, systematically monitoring the effectiveness of the learning process and its compliance with professional standards.

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).

The mission of the Armenian Medical Institute (hereinafter referred to as AMI) is defined in the university's 2022–2026 Strategic Development Plan (hereinafter referred to as the SDP). According to this plan, "The Armenian Medical Institute is a higher education institution with a focus on medical education. Its core mission is to be a competitive and reputable institution in the field of medical sciences in Armenia, providing high-quality education to its students and preparing well-rounded medical professionals who possess a strong sense of responsibility, are guided by national and universal values, and are committed to serving society."

AMI's vision is to continuously enhance and develop its educational, research, advisory, administrative, and information systems. To achieve this vision, the SDP outlines seven strategic priorities:

- Provision of high-quality education
- Human resource management
- Modern research and innovation
- Recruitment of well-informed applicants and students
- Effective governance, financial sustainability, and development of modern infrastructure
- Public engagement, social collaboration, and community services
- Expansion of external relations and international cooperation

AMI delivers educational services at Level 7 of the Armenian National Qualifications Framework (hereinafter referred to as ANQF). Upon graduation, students continue their education in clinical residency programs, which are designed to ensure readiness for professional medical practice. The Armenian Medical Institute emphasises its significant role as a medically oriented higher education institution with a local focus, organising its educational process in the Armenian language. The review of documentation and the expert site visit revealed that during the development of the new Strategic Development Plan, an analysis of the previous plan was conducted, including a performance evaluation. Actions that were not implemented under the previous SDP were incorporated into the 2022–2026 SDP. Under the strategic directions, the action plan and timeline specify objectives, necessary

implementation steps, expected outcomes, responsible units or individuals, and implementation deadlines. The SDP includes both mid-term and long-term planning for the execution of strategic actions.

In line with recommendations provided during the previous accreditation process, key performance indicators (KPIs) have been integrated into the new SDP for monitoring and evaluation purposes.

However, the plan lacks a corresponding budget or financial estimates that reflect the financial resources required to achieve the strategic objectives. Furthermore, the strategic plan does not articulate clear approaches for the development of research activities and internationalisation. Consistent steps are being undertaken to implement the objectives outlined in the SDP. Specifically, based on the outcomes of the expert report developed during the previous accreditation process, two academic programs have been revised, including updates to the subject syllabi and clarification of the intended learning outcomes of the programs.

In alignment with its institutional objectives, the university has conducted benchmarking of its academic programs to ensure their ongoing enhancement and alignment with relevant standards. Classrooms have been constructed and renovated, equipped with the necessary furnishings and instructional materials. Equipment for simulation centres has been provided, and the construction of these centres is currently underway.

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

In 2022, the Armenian Medical Institute developed and approved the “AMI Stakeholder Engagement Regulation,” which outlines the modes and mechanisms of communication with both internal and external stakeholders. Internal stakeholders include students, academic staff, and administrative and support personnel, while external stakeholders include alumni, prospective applicants, postgraduate training centers, and employers (medical institutions and their management). The regulation also defines how the result of stakeholder needs assessments are utilised, specifically in the development of institutional strategic plans and vision, as well as in the evaluation of the university’s core areas of activity. During the site visit, it was confirmed that the methods used to identify stakeholder needs include surveys, meetings, and focus group discussions. Surveys among external stakeholders have been conducted via the Google Forms platform, and in recent years, efforts have been made to distribute questionnaires directly to medical centers.

Expert panel interviews also revealed that the university’s founders hold weekly meetings to review the progress and challenges related to implementing the Strategic Development Plan. When necessary, heads of relevant units are invited to participate in these discussions.

During the site visit, it was revealed that the TLI, by strengthening collaboration with stakeholders and considering the recommendations received during the previous accreditation process, has successfully formed a shared understanding of the university’s

mission and objectives. As a result, both internal and external stakeholders generally support the institution's adopted mission, which emphasises the preparation of competitive medical professionals for the local labor market. The university's defined goals are aligned with the effective implementation of this mission.

At the same time, the expert discussions highlighted that internal stakeholders place importance on the university taking more active steps toward internationalisation, such as participation in international programs and ensuring academic mobility, which are currently not explicitly emphasised in the institutional mission.

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

The university has implemented certain mechanisms for evaluating and enhancing the outcomes related to the realisation of its mission and objectives. According to the self-evaluation report, one of the main tools for assessing the results of the Strategic Development Plan is the accountability process, which is conducted based on a bottom-up approach, starting from faculty members and progressing up to the rector. Expert analysis revealed that the institution has a mechanism for evaluating the outcomes of the previous strategic plan, which identifies both the goals that were achieved and those that were not. Reporting practices are also considered part of the SDP evaluation mechanism. However, due to the annual rotation of rectors, the format and structure of these reports vary from year to year.

Some of the reports explicitly link institutional performance to the objectives set in the SDP, presenting levels of achievement and identifying ongoing challenges. Nevertheless, the faculties' annual reports often replicate documents prepared by the Academic Affairs Department, without establishing a clear connection to the strategic goals.

In addition, the KPIs used in the Strategic Development Plan are predominantly descriptive and, in many cases, are not expressed through quantitative or measurable indicators. For instance, data on training activities, the number of cooperation agreements, the organisation of student conferences, updates to the library collection, and similar actions are presented factually, without clear mechanisms for measurability or outcome-based evaluation.

Considerations:

The expert panel positively evaluates the fact that, because of the previous accreditation, the university has demonstrated notable progress in developing a culture of strategic planning. The Strategic Development Plan has been formulated based on the institutional mission, and current operations are generally aligned with the adopted goals. Regular consultations between the Rectorate and various structural units provide a foundation for the systematic management of institutional processes.

The active involvement of internal stakeholders in implementing strategic objectives is particularly noteworthy, indicating a high level of stakeholder engagement and strong potential for further institutional development.

To enhance strategic management, it is important to establish a clear link between the strategic plan and the budgeting system. Each strategic direction or action should have defined financial support and resource allocation calculations. For this purpose, it is noteworthy for the institution to develop a business plan, which would include resource assessment, risk analysis, forecasting, and possible models for resource mobilisation and cost-effective management.

The current version of the mission statement reflects the university's core function: training professionals for the local labour market. However, considering the institution's growing need to advance in the areas of research and internationalisation, the university should revisit and reinterpret its mission during the next revision of the Strategic Development Plan, integrating these key priorities.

Although KPIs are in place and the institution attempts to adhere to the SDP implementation timeline, not all activity reports demonstrate a clear connection to the strategic goals. Furthermore, the indicators currently used in the strategic plan are largely generic and lack measurability, which limits the ability to form a clear picture of progress and outcomes.

It is recommended that the university revise the structure of its KPIs to ensure they are measurable and directly aligned with strategic objectives. This will enable a more realistic and effective assessment of the implementation and impact of strategic goals.

Summary:

Considering the evident development of strategic planning processes at the institution following the previous accreditation results, the establishment of an institutional culture aligned with the mission and objectives, the involvement of stakeholders, the fact that some reports are linked to the achievement of strategic goals, and the presence of mechanisms for scheduled consultations, the expert panel concludes that the Armenian Medical Institute meets the requirements of Criterion1.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 1 is **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 Armenian Medical Institute is implemented in accordance with the Constitution of the Republic of Armenia, the charter of the higher education institution, and internal legal acts, following the principles of both individual and collegial leadership.

According to the Institute's charter, its governing bodies include the Founders' Council, the Rector, and the Academic Council. The supreme governing body of the Armenian Medical Institute is the Founders' Council, which holds the ultimate authority to make final decisions on any matters related to the management and operations of the Institute. Expert panel meetings revealed that the Founders' Council convenes weekly to deliberate on significant academic, organisational, and financial issues concerning the institution. Following the previous accreditation process, in 2022, the Institute revised the document entitled "Frameworks of Governing Bodies," which clarified the rights and responsibilities of the governing bodies. According to this document, the Founders' Council consists of four members. However, expert panel discussions revealed that it currently includes nine members, none of whom are external stakeholders. Additionally, the four members of the Founders' Council serve on a rotational basis, assuming the position of Rector each year.

Studies of the organisational structure of the Armenian Medical Institute revealed the presence of horizontal collaboration among all its subdivisions. In particular, the Quality Assurance Center collaborates with all departments for data collection and for the implementation of continuous improvement processes. There is also vertical, bottom-up cooperation within the institution.

In 2023, the institution carried out structural reorganisation, eliminating the positions of Vice-Rectors for Academic Affairs and Clinical Affairs. Currently, the core functions of the Vice-Rector for Academic Affairs are handled by the Academic Division, while the coordination of clinical activities is carried out by the Head of Practical Training, who also serves as an advisor to the Chief Medical Officer of Erebuni Medical Center. All subdivisions of the Institute are adequately equipped with the necessary material and technical resources to carry out their functions (office space, technical equipment).

A review of the financial documentation revealed that the Armenian Medical Institute's financial resources are primarily generated from the provision of paid educational services, with tuition fees accounting for 98.31% of the income.

The main expenditure categories of the institution include salaries (55.35%), tuition fee discounts (1.17%), expenditures on acquisition of educational equipment and property (a total of 11%), utilities (5%), as well as travel and representational expenses.

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 charter of the TLI, both academic staff and students are granted the opportunity to participate in decision-making processes relevant to them. As stipulated in the charter, 25% of the Academic Council membership should consist of students elected by the Student Council. However, upon reviewing the composition of the Academic Council, it was revealed that there are currently only four student members out of a total of 31. Members of the Academic Council, drawn from the academic staff, are elected by the Faculty Councils. Each Faculty Council is composed of nine members, including two student representatives.

During expert panel discussions, it became clear that faculty and student involvement in decision-making processes is mostly informal, occurring through direct communication, individual requests, and periodic meetings.

For example, students expressed concerns about a problematic course, noting that the applied teaching methods did not ensure sufficient effectiveness. Upon addressing the issue with the Dean's Office, a discussion was organised with the course instructor, who subsequently revised their methodological approach.

Although there is ongoing communication with students, the lack of systematic mechanisms, for instance, the full engagement of the Student Council in educational processes, remains apparent. The needs of academic staff are discussed within Faculty Councils.

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.

In 2022, the Armenian Medical Institute developed and approved a long-term Strategic Plan for the years 2022–2026 and subsequently prepared an action plan and timeline for its implementation. The Institute also developed an interim action plan and timeline for implementing the Strategic Plan, primarily covering activities scheduled for 2022–2024.

During the site visit, it became clear that the Institute's faculties, departments, and other subdivisions also have their own short-term annual work plans, which are largely not aligned with the objectives of the Strategic Plan.

The Institute has an accountability mechanism for monitoring and implementing planned activities. However, there is still no standardised format developed for submitting documentation and recording performance results. The faculty present summaries of their completed activities during department meetings, based on which the department head prepares a consolidated report to be submitted to the Faculty Council. The data submitted by departments serves as the basis for summary documents prepared by the deans, which are then forwarded to the Rector and the Academic Administration. These, in turn, report to the Rector and the Academic Council.

The Center for Quality Assurance is also accountable for fulfilling its functions, reporting directly to the Rector.

The annual reports of the Rectors for 2022–2023 and 2023–2024 are generally linked to the activities and outcomes identified in the Strategic Plan’s action timeline. However, the annual reports of the faculties essentially duplicate those of the Academic Division, and their connection to the Strategic Plan remains unclear.

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

According to the self-evaluation report, key factors influencing AMI’s overall and educational activities include: the number of applicants per academic year, which directly impacts financial inflows as tuition fees are the institution’s sole source of income; changes in academic and administrative staff; efforts to attract and retain young professionals; and the condition of the material and technical infrastructure.

During the site visit, it was revealed that the factors influencing institutional performance are primarily identified through internal stakeholder surveys and focus group discussions, which provide insights into internal drivers. However, systematic and planned studies on external influencing factors and structured data collection are lacking. External factors are mainly explored through informal discussions with practising lecturers who teach at the institution.

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

AMI has adopted the PDCA (Plan–Do–Check–Act) cycle as part of its approach to policy implementation and procedural administration. Several institutional documents have been revised based on the outcomes of the previous accreditation and the findings from stakeholder surveys conducted by the Quality Assurance Center.

Specifically, the Regulation on the Organisation of the Educational Process, initially approved in 2015, was revised in 2022 and underwent further modifications after its implementation during the 2022–2023 academic year. The previous strategic plan was evaluated, serving as the foundation for the development of the 2022–2026 Strategic Plan.

The university's organisational structure was also revised, and its academic programs were updated accordingly.

Based on document analysis and findings from the expert site visit, it was concluded that the processes outlined in the strategic plan are mainly in the improvement phase, except library modernisation and increased participation in international collaboration programs, which are still in the planning stage.

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

According to the self-evaluation report, information regarding the effectiveness of academic programs and other institutional processes has been collected from external stakeholders and alumni. Activities have included benchmarking of academic programs and evaluation of the efficacy of practical training arrangements. During the 2022–2023 academic year, the university's Academic Department and the Quality Assurance Centre conducted a review of the university's academic programs and compiled a report. Based on this review, objectives were established to gather student and alumni feedback on program quality, assess employer satisfaction with graduates, evaluate the impact of recent structural changes on program quality, and initiate program modifications based on the findings.

However, it is worth noting that the mechanisms for evaluating program effectiveness remain underdeveloped. There is a lack of comprehensive post-cycle self-evaluation of programs that systematically incorporate feedback from employers, graduates, and students, aiming to guide evidence-based program improvements.

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

The institution primarily uses its official website (www.armedin.am) and the *Erebuni* monthly newsletter as the main channels for information dissemination.

During expert meetings, it became clear that although some quantitative data are available in internal reports, such as student admission and graduation outcomes, there is a lack of systematic, objective, and publicly accessible information. Reports are not published on the official website and updated and comprehensive information is absent regarding academic programs and qualifications. For example, data on graduate employment rates, labor market feedback, and other relevant indicators are not publicly presented.

Considerations:

The expert panel positively evaluates the fact that, following the previous accreditation process, positive shifts have been recorded in the institution's governance

system. The institution has an operational governance model, and decision-making mechanisms for planned activities have been developed. The leadership demonstrates an open attitude toward the views of internal stakeholders. For example, students can raise their educational concerns directly through personal communication, which in some cases leads to changes in course content.

Nevertheless, the expert panel observes that the institution still lacks governance mechanisms that would promote the systematic involvement of external stakeholders, including alumni, employers, and representatives of the professional field, in governance processes. Although the Founders' Council, whose members include institutional leaders on a rotational basis, ensures continuity of decision-making and internal stability, the absence of an external perspective limits the potential for multi-dimensional evaluation of strategic objectives.

In this regard, the formation of an authorised governing council with external stakeholder participation could not only contribute to more transparent and balanced decision-making but also serve as a new platform for attracting resources. The formal participation of external stakeholders could open new perspectives for partnership cooperation, alternative sources of funding (e.g., donations, foundations, targeted programs), and development opportunities, thereby supporting the diversification of the institution's financial resources.

The institution visibly has the potential to expand its mission, particularly in strengthening its research component and internationalisation efforts. However, sustainable financial foundations are required for strategic development. Approximately 98% of the institution's financial resources come from student tuition fees, creating a high dependency on limited income sources and increasing risks in the event of changes in the external environment. Currently, the institution employs short-term financial planning, which enables operational control but restricts strategic investment policy.

The institution does not yet have a strategy for diversifying alternative funding sources, which may hinder the feasibility of implementing its long-term strategic planning.

Additionally, the current system for evaluating strategic objectives is based on the annual reports of the subdivisions. However, the periodic changes in Rectors have resulted in variations in the format and structure of these reports. This may impede the consistency of strategic outcome analysis and the comparability of data.

Therefore, it is necessary to establish a standardised reporting format that will enable a strategic program review every two years based on comparable data.

Summary:

Considering that the institution does not have a strategic-level governing body with multi-dimensional oversight that includes external stakeholders (such as alumni, employers, and sectoral experts), and that these functions are currently performed solely by the Founders' Council composed of internal representatives, combined with the fact that financial planning remains short-term in nature and there is no strategy for the diversification of funding sources, resulting in a high dependence on tuition fees, as well as the lack of systematic analysis of external factors, the expert panel concludes that the Armenian Medical Institute does not meet the requirements of Criterion 2.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 2 is **unsatisfactory**.

III. ACADEMIC PROGRAMS

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

Findings

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

At the Armenian Medical Institute, the academic programs in General Medicine and Dentistry are delivered in the full-time mode of study through continuous and integrated curricula. The awarded qualifications correspond to Level 7 of the National Qualifications Framework of the Republic of Armenia. Graduates are conferred with the qualifications of Doctor and Doctor of Dental Medicine, respectively.

Considering the recommendations from the previous accreditation, the institution has defined, under Objective 1.1 of its strategic plan, the implementation of structural and content reforms of the academic programs in line with the Armenian National and Sectoral Qualifications Frameworks.

The profiles of both professional education programs have been reviewed, along with all course descriptions, and the intended learning outcomes of the programs have been clarified. Based on these, a new curriculum map has been developed, illustrating the alignment between the intended learning outcomes of the programs and the taught courses.

In August 2024, the Academic Council approved the program packages for General Medicine and Dentistry, which comprehensively present the program profiles with their respective intended learning outcomes, program aims and objectives, skills and competences,

teaching and learning approaches, assessment methods, curriculum structures, and course descriptions.

The program profiles at AMI also outline the professional fields of activity and employment opportunities associated with these qualifications.

Expert evaluations have demonstrated that the contact hours of several courses have been revised; for instance, the contact hours for the *Family Medicine* course have been increased. Based on demand, the delivery of specific subjects has been reinstated, in particular the *Virology* course. The teaching of *Human Anatomy* has been rescheduled from the first year to the second year. In its place, a new *Introduction to the Profession* course has been developed and approved for first-year students to prepare them for a more effective understanding of *Human Anatomy* in the second year.

The course descriptions outline the purpose of each course, the expected learning outcomes, interdisciplinary linkages, teaching and learning methods, assessment approaches and verification methods, course content areas, and recommended literature.

A unified lesson plan template has been developed and implemented. This template includes the purpose of the lesson, its objectives, methods of delivery, and the expected learning outcomes. There are no elective courses currently included in the academic programs.

According to the self-evaluation report, the academic programs are structured as integrated curricula, and the study revealed that thematic integration between courses is not yet fully achieved. However, expert meetings and discussions confirm that the institution has taken concrete measures to further develop this aspect. Specifically, the institution aims to ensure integration within the academic programs through the organisation of joint sessions between different subjects and through assigned cross-disciplinary tasks.

Additionally, to promote the early development of clinical skills, students undertake the *Nursing* course starting in their second year, during which they become familiar with the structure of various clinical departments and explore patient care features, thereby building links between theoretical and practical components.

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

For the General Medicine and Dentistry professional educational programs approved in 2024, the university has developed a standardised format for course descriptions, which also includes the teaching, learning, and assessment methods.

A review of the academic programs has revealed that faculty members employ a range of methods for knowledge transfer and skills development, including lectures, seminars, practical sessions, and the formulation of assignments and independent research projects. The choice of methods is generally made by individual instructors, depending on the specifics of

each course. During the expert site visit, it was observed that instructors teaching the same course to different groups sometimes use other methods.

To develop clinical reasoning skills, situational problem discussions are conducted within the framework of various courses. To stimulate active student participation, open classes are also organised, during which students present pre-selected topics and respond to questions from the audience. In some courses, the CBL (Case-Based Learning) methodology is applied, supporting the development of clinical reasoning through case discussions.

In cases of rare pathologies, where students do not have the opportunity to directly observe medical interventions, instructors employ methods that involve the demonstration, explanation, and analysis of video recordings. For example, such approaches are used in the Obstetrics and Gynaecology course.

In 2022, the Armenian Medical Institute established guidelines for calculating academic workload in practical classes: study groups in years 1–3 consist of 12–14 students, while clinical courses have groups of 3–5 students.

Students enrolled in the General Medicine program are engaged in various medical interventions, including bandaging, natural childbirth, cesarean section, induced abortions, autopsies, dialysis, and surgical procedures. Clinical subjects are predominantly taught at the “Erebouni” Medical Center. Students interact with patients, collect anamnesis, perform physical examinations, and formulate preliminary diagnoses, thereby developing practical skills.

Within the Dentistry program, students work on dental simulators, perform local anaesthesia, select and justify prosthodontic options, and develop filling skills by working on extracted teeth. At certain stages of the courses, students are also given opportunities to work directly with real patients.

Observations conducted during the site visit indicate that instructors employ methods such as explanation, video demonstrations, atlas-based demonstrations, question-and-answer sessions, in-depth individual questioning, situational analysis, and discussions. The teaching process appears to build on prior knowledge and foster interdisciplinary connections.

According to the institution’s self-analysis, to ensure integrated learning, joint sessions have been introduced. These integrated classes have already been implemented in the following subject pairs: Introduction to the Profession and Human Normal Anatomy, Pathophysiology and Pharmacology, Microbiology and Pharmacology, Epidemiology and Microbiology, Anatomy and Physics, and Russian Language and Cultural Studies.

To support the dissemination of effective teaching and learning methods, AMI regularly organises professional development training for faculty, including courses on “Artificial Intelligence as a Supportive Tool” and “Characteristics of Problem-Based Learning.”

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

In 2025, the university adopted a newly revised "Regulation on Organising the Educational Process at AMI under the Credit System," according to which the student assessment system is based on a multi-factor evaluation model. The assessment of students' knowledge includes the following components: evaluation of student participation in the course, ongoing monitoring and assessment of subunits of the course and the program-specified assignments, final evaluation of the entire course (or module) during the examination period, and the integration of these results.

The university has established a 100-point grading system, which is distributed as follows: class attendance accounts for 25 points, participation in seminars (including oral questioning and testing) accounts for up to 25 points, independent work accounts for up to 20 points, and final examinations account for up to 30 points. Examinations are graded on a 10-point numerical scale, where a grade of 10 corresponds to 30 points.

Courses are assessed in two modes: with a final assessment (exam) or without a final evaluation (pass/fail credit-based courses). Ongoing assessments during the semester, laboratory work, practical tasks, seminar performance, and similar assignments are graded on a numerical scale of 1 to 10.

Final examinations are conducted orally. During the expert site visit, it was found that the examination tickets in specific clinical courses, such as Rheumatology and Endocrinology, include situational problem-solving tasks. However, this approach is not consistently applied across all classes.

It was further identified during the visit that if a student is absent for up to 30% of the course, they are allowed to make up the missed topics under conditions defined by the instructor. For example, make-up classes may be scheduled after regular class hours or, in the case of cyclical courses, in the evenings. Alternatively, students may submit essays or presentations. Suppose a student's absences exceed 30%. In that case, they are not permitted to take the final exam or pass/fail assessment, and according to point 8 of the "Regulation on Organising the Educational Process at AMI under the Credit System," extensive absences are grounds for dismissal.

Students are also not allowed to advance to the next year with examination debts; they have the right to retake an exam or pass/fail assessment once, and then a second time during the retake period. Failure to use these opportunities will result in the student repeating the same academic year.

To develop clinical skills, academic programs also include practical placements. Professional internships are scheduled for the 2nd, 3rd, 4th, and 5th years of study. For the *General Medicine* program, a total of 10.5 credits is allocated for internship practice. Students consecutively rotate through nursing, emergency care, professional practice in internal medicine, surgical diseases, obstetrics, and gynaecology.

For the *Dentistry* program, a total of 9 credits is allocated for internship practice. Students rotate consecutively through nursing, emergency care, and professional practice in therapeutic and pediatric dentistry, surgical dentistry, and prosthetic dentistry.

To evaluate the effectiveness of these internships, several tools are used: the internship logbook, the practical skills certification booklet, and the internship attendance register. The internship attendance register is maintained by the internship supervisor, who records the students' attendance. During the internship, each student keeps a personal internship diary summarising the activities performed (diagnoses, interventions provided). The certification booklet supports the student in tracking the thematic plan of the internship, with appropriate notations on the completion status of specific tasks (completed/not completed).

At AMI, internships conclude with a pass/fail assessment (credit), awarded only to students who have attended the internship, completed their diaries, submitted the internship report, and successfully defended it.

The institution has updated its "Regulation on State Final Certification Examinations". Still, it intends to revise it further, as AMI plans to operationalise simulation centres as soon as possible for both professional programs and to introduce practical skills assessments through an Objective Structured Clinical Examination (OSCE).

For the *General Medicine* continuous and integrated program, final qualification examinations for the *Doctor* qualification are conducted in *Internal Medicine*, *Obstetrics and Gynaecology*, and *Surgical Diseases*. For the *Dentistry* continuous and integrated program, final qualification examinations for the *Doctor of Dentistry* qualification are conducted in *Therapeutic and Pediatric Dentistry*, *Surgical Dentistry*, and *Prosthetic Dentistry*.

According to the institution's self-analysis, the question banks for the state final certification examinations are developed by the relevant professional departments and approved by the AMI faculty councils. Expert analysis revealed that the state final certification examinations are held using examination tickets, which include both theoretical questions and situational problem-solving tasks. The results of the state final certification examinations are graded on a 10-point scale.

During the meeting, it became clear that the university plans to organise the final examinations in a three-phase format: assessment of knowledge through testing, oral examination, and evaluation of practical skills. In the previous academic year, preliminary pilot assessments were conducted, during which approximately 40–45% of participating students surpassed the threshold. The Academic Affairs Department is currently developing tests for various subjects with the aim of implementing a test-based format for final examinations systematically.

The institution has in place regulations such as the *Procedure for Reviewing Student Complaints*, the *Procedure for Appealing AMI's Final Certification Results*, and the *Procedure for Ensuring Academic Integrity and Preventing Plagiarism*, which establishes the

measures to be applied in cases of academic dishonesty detected during research activities, examination periods, interims, and final certification (including state examinations).

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

In 2023, AMI carried out a comparative analysis of the General Medicine professional educational program by the “Regulation on the Principles, Objectives, Tasks, Policy, Procedures, and Schematic Structure of Benchmarking the Effectiveness of AMI’s Activities.” For this process, a working group was established, with designated responsible staff and deadlines set by the regulation.

The intended learning outcomes of AMI’s General Medicine professional educational program were examined and compared with those of similar programs at leading universities in other countries. Additionally, AMI’s state final certification processes were compared with those of similar programs at leading international institutions, and recommendations were presented for implementing best practices at AMI.

The procedures for conducting AMI’s state final certification examinations were also subject to comparative analysis. According to the documentation reviewed, the final examination processes were analysed concerning examples from Russian and European medical universities, including detailed features of theoretical questions, situational tasks, and the phase-based structure of final examinations. The document concludes with recommendations from the working group, particularly concerning possible changes to the state final examinations: introducing a test-based examination in the General Medicine program, supplementing the Dentistry faculty’s pre-state oral examination with test-based tasks, and implementing the possibility of concluding internships for both faculties with an Objective Structured Clinical Examination (OSCE).

According to the institution’s self-evaluation, AMI’s academic programs in General Medicine and Dentistry offer students the opportunity to continue their studies at medical educational institutions in the Republic of Armenia, if needed, by passing examinations on curricular differences at the host institution. However, as the university notes, AMI primarily aligns its programs, curricula, and final examination formats with those used in medical universities of the Russian Federation, as well as with the programs and approaches of Yerevan State Medical University after Mkhitar Heratsi.

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

At AMI, procedures for Monitoring, evaluating, and improving the Effectiveness of professional education programs, as well as the Procedure for Monitoring and reviewing academic programs, are in place to ensure continuous oversight, evaluation, and enhancement of professional educational programs. According to the latter regulation, the

monitoring process is initiated and implemented by the faculty every two years, in line with the established monitoring schedule.

The primary mechanisms for monitoring academic programs at the institution include class observations, discussions held with students and faculty, and surveys conducted among these groups. During the site visit, it was revealed that faculty suggestions are first discussed at departmental meetings and then presented to the Academic Council for consideration. Students involved in the Faculty Council also submit their suggestions to the Dean, which are forwarded to the Academic Affairs Department and subsequently reviewed by the Academic Council.

During the expert visit, it was found that the issues and shortcomings identified during the state final examination process serve as a basis for implementing corresponding changes to the academic programs. After the examinations, the chair of the examination committee submits recommendations aimed at the continuous improvement of the program. However, a review of the reports from the final certification committees revealed that the scope of recommendations for further quality enhancement was largely limited to suggestions for including more narrowly specialised experts (e.g., rheumatologist, infectious disease specialist, haematologist, nephrologist) in the examination committee. Notably, there has been a repeated recommendation over three consecutive years to include a haematologist.

Through expert meetings and document analysis, it was found that in recent years, several revisions have been made to the professional education programs, based on conducted studies, sectoral trends, and stakeholder feedback. Considering the importance of Family Medicine, its allocated hours have been increased. Within the Faculty of Dentistry, the course Dental Materials Science was introduced, based on international experience. Following the COVID-19 pandemic, the Virology course was reinstated. At the request of students, and after a previous reduction in its hours, the allocated hours for Gynaecology were restored. Additionally, based on the results of final examinations and student expectations, an extra one-week cycle was added for the Rheumatology course.

Considerations:

The expert panel positively evaluates the fact that, following the previous accreditation process, the institution has undertaken significant structural and content reforms within its professional educational programs. These reforms are reflected in the clarification of intended learning outcomes, the revision of course descriptions, the modernisation of curricula, and the introduction of integrated forms of instruction.

The formulation of tasks aimed at developing clinical reasoning by practising physicians, as well as the organisation of the educational process directly within the hospital environment, creates a strong link between theoretical knowledge and practical experience, viewed as significant factors in enhancing the quality of teaching. This approach provides

students with the opportunity to study real-world cases, apply the knowledge they have acquired during their studies, and develop professional competencies.

It is also positive that the institution is gradually expanding the implementation of student-centred teaching principles, including active methods such as CBL, open classes, and case analysis. The adjustment of academic workload and the formation of small study groups contribute to a more individualised approach to learning.

The revision of the assessment system, the introduction of multi-layered assessment, and the piloting of new formats represent a positive trend. However, a systematic approach to assessing practical skills is necessary to ensure consistency with the learning objectives. The steps being taken toward implementing the OSCE (Objective Structured Clinical Examination) are viewed as strategic progress; however, this should become a universally applied and fully integrated component in both the interim and final assessment phases.

The university has also strengthened its processes for reviewing academic programs, drawing on sectoral trends, stakeholder feedback, and the needs of interested parties. This approach provides a crucial foundation for ongoing program improvement and responsiveness to current needs. At the same time, it is essential to analyse recommendations from the chairs of the final certification committees to make evidence-based decisions for the ongoing improvement of educational programs.

Summary:

Considering that, following the previous accreditation process, AMI has undertaken structural and content reforms of its professional educational programs in alignment with national and sectoral standards, has revised its courses, introduced integrated elements of teaching, as well as implemented mechanisms for organizing education within hospital settings to ensure students gain authentic practical experience, and has piloted the introduction of OSCE examinations in the assessment process, with clinical reasoning tasks being developed by practicing professionals, the expert panel concludes that AMI meets the requirements of Criterion 3.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 3 is **satisfactory**.

IV. STUDENTS

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

Findings

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

The fourth point of AMI's Strategic Plan aims to develop a pre-university support system for future applicants. Admissions to AMI's educational programs are conducted by Government Decision No. 597-N of April 26, 2012, which regulates admissions to state and non-state higher education institutions in the Republic of Armenia. Each year, the institute is authorised to admit 70 students to the Faculty of General Medicine and 90 students to the Faculty of Dentistry. As of the 2023–2024 academic year, AMI has an enrollment of 782 students.

The institute also admits young people of Armenian descent who are not citizens of the Republic of Armenia, provided they apply in advance to the External Relations and Diaspora Department of the Ministry of Education, Science, Culture, and Sports to obtain the necessary permissions. The language of instruction is Armenian. According to the submitted data, 50 diaspora Armenian students were admitted for the 2024–2025 academic year.

AMI also offers direct admission into the second year for students who have graduated from medical colleges with high academic performance.

Since the 2022–2023 academic year, a new edition of AMI's Regulation on Organising the Educational Process Under the Credit System has been in force. According to point 8 of this regulation, if a student exceeds 30% of absences from courses in a semester, it is grounds for dismissal from the current year of study. Additionally, students with outstanding academic debts (i.e., unpassed exams) are ineligible to transfer to the following year. In connection with this decision, 35 students from both faculties were dismissed in the 2023–2024 academic year.

At the institute, students are admitted through the unified entrance exams, as well as those who have completed medical college with high academic performance. During the expert site visit, it was found that AMI's main attractions for applicants are the opportunity for practical education and comparatively affordable tuition fees.

AMI provides a Student Guide, which contains general information about the institute and its activities. The guide offers detailed information on courses, knowledge consolidation, assessment of knowledge, the credit system, the Student Council, the protection of student rights, research activities, student allowances, and other relevant topics.

For student recruitment and career orientation, the Armenian Medical Institute systematically cooperates with general education schools. Within this framework, AMI students and faculty members regularly organise school visits to present AMI's educational offerings, as well as to conduct health awareness activities. At the initiative of student organisations, thematic lectures are held to raise awareness among schoolchildren about psychological and physical health. In addition, the institute hosts school groups for tours and visits to professional infrastructure facilities, such as the anatomy museum.

It should be noted that the effectiveness of these activities has not been evaluated to determine the extent to which they contribute to an increase in the number of applicants.

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

At the Armenian Medical Institute, the process of identifying students' educational needs is organised through both formal and informal mechanisms. According to the institute's internal regulations, student participation in decision-making bodies and various councils is ensured, thereby maintaining a link between students and the management.

The primary tool for identifying educational needs is the survey method. On the initiative of the Quality Assurance Centre, regular student surveys are conducted to evaluate the quality of teaching, educational resources, and program improvements. Additionally, AMI operates an "anonymous box" mechanism, through which students can submit their suggestions, concerns, and feedback anonymously.

It is through these channels, for example, that the need for a simulation center was identified. Students raised this need through both surveys and administrative meetings. As a result, the university has initiated efforts to acquire simulation equipment and establish the center.

The Student Council (SC) also participates in identifying needs, serving as a liaison between students and the institute's administrative structures. The SC is actively involved in proposing improvements, conveying feedback regarding the educational process, and resolving organisational issues.

The institute's leadership, including the rector, deans, and heads of administrative units, regularly meet with students to discuss the issues and suggestions raised by them.

AMI also implements a tuition discount policy as a form of social support for certain groups of students, by reducing tuition fees. Students who have a sibling studying at AMI or whose parent is employed by the institute are eligible for these discounts.

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

AMI offers opportunities for student counselling and the organisation of supplementary classes designed to enhance their academic performance and foster professional development. This support includes in-depth explanations of complex subject matter, as well as guidance that helps develop professional skills.

During the expert site visit, it became clear that supplementary classes are organised to address learning gaps that arise during the educational process, particularly for students with lower academic performance. Faculty members are willing to work with students outside of scheduled class hours, providing additional assignments, essays, and explanations of course topics.

Although individual academic advisors have not yet been officially assigned to students, they do receive the necessary counselling from the relevant institutional units to support the organisation of their studies, improvement of the educational process, and enhancement of academic performance.

Currently, no additional classes are offered to develop students' transferable skills.

4.4. There are precise regulations and schedules for students to turn to the administrative staff for additional support and guidance.

According to AMI's self-evaluation, students may approach various administrative units, such as the accounting department, the rectorate, deans' offices, academic affairs department, and others, to receive the necessary counselling and support. Although the institute does not have a clearly defined procedure or set schedule for students to submit requests, an environment has been established in which students may approach the relevant administrative bodies at any time without restrictions.

The institute also organises regular meetings, once or twice per semester, with students from different years. These meetings are attended by the rector, deans, department heads, and departmental quality assurance officers. In this format, students are informed about new procedures and regulations related to the educational process and are also given the opportunity to directly voice their concerns and suggestions.

4.5. The Institution has student career support services.

Currently, AMI does not have a dedicated career centre; however, career guidance activities are conducted by the departments and teaching staff. Many faculty members also serve as potential employers, supporting students in their professional orientation and career advancement.

In the 2023–2024 academic year, the institute conducted surveys of its graduate alumni to study their career paths. According to 2024 data, surveys of 50 graduates from the Faculty of General Medicine revealed that 65% applied for residency programs to pursue further professional education. Among 60 graduates of the Faculty of Dentistry, 81% went on to residency, according to these survey results.

The university collaborates on a contractual basis with several medical centres and institutions, where students complete clinical courses and internships. These centres often become future workplaces for graduates, directly contributing to their career development and professional engagement.

There is currently no alumni association operating at the institute. Connections with graduates are maintained through the Quality Assurance Centre, as well as through the various departments and deans.

4.6. The Institution promotes student involvement in research activities.

AMI encourages students to participate in scientific conferences. In particular, on May 19, 2023, AMI organized an inter-university student scientific conference, the results of which were published as a collection of theses.

During the expert site visit, it was revealed that several members of AMI's faculty are actively involved in research activities, working at various research institutes and centers. They engage students in the research programs carried out at these institutions, involve them in grant-funded projects, and support them in co-authoring and publishing scientific articles.

Recently, the activities of the Student Scientific Society (SSS) at AMI have been relaunched. The SSS is coordinated by an SSS curator, who is a faculty member actively engaged in research. The curator not only performs organisational functions but also serves as a mentor, guiding students through the process of participating in scientific research.

4.7. The Institution has a unique body which is responsible for the protection of students' rights.

At AMI, students are free to access the services of the legal department whenever they need them. The process of protecting student rights also involves the dean's offices, the rectorate, and other relevant administrative units.

The institute has a Student Council (SC), whose primary mission is to protect the rights and interests of students. SC members are involved in the work of faculty committees with a 25% representation quota. The SC is formed on a representative principle: each course within a faculty elects one council member through open voting, with a two-year mandate. If re-elected, the mandate extends to three years. The SC charter defines the duties and rights of SC members. The governing body of the SC is the SC presidency, led by the president, whose duties are assumed by the vice president in the president's absence.

The Student Council develops and presents issues related to the educational process to the administrative leadership, submits proposals, and supports their implementation.

During the expert site visit, it became clear that the dean's offices are generally the most active structures in protecting student rights. The Student Council mainly serves as a platform for raising student-related issues; however, students tend to prefer addressing their problems directly to the deans or dean's office staff.

4.8. The Institution has set mechanisms for evaluating and ensuring the quality of educational, consultancy and other student services.

At the university, the following mechanisms are applied to evaluate and ensure the quality of students' educational, counselling, and other support services: periodic surveys and focus group discussions are conducted, and an "anonymous box" system is in place through which students can submit complaints and suggestions. The collected data are analysed and

presented to the relevant units, in particular the dean's offices and the Quality Assurance Centre, which implement improvements based on the results.

Considerations:

The expert panel positively assesses the existing efforts in applicant recruitment; however, it recommends evaluating the effectiveness of these activities and developing a systematic strategy to promote AMI to a broader pool of prospective applicants.

It is commendable that AMI has elements of a student-centred policy in place and shows a consistent trend toward further developing these principles. In particular, the availability of various formats for counselling, supplementary classes, social support, and mechanisms for collecting student feedback has been noted. Nevertheless, student support services remain driven mainly by the initiatives of individual institutional units and do not yet have a comprehensive and systematic structure.

There is a need for the coordination of student counselling and support services within the university. To adequately respond to students' educational, social, and career needs, it would be appropriate to establish an integrated student support system with clear procedures, designated responsible units, and well-defined mechanisms for information feedback. Special emphasis should be placed on institutionalising support for students during examination preparation periods.

Currently, career development activities at the university are mainly implemented through the initiatives of departments and individual faculty members. These existing practices could serve as a basis for establishing a dedicated career center with appropriate functions, including coordinating cooperation with employers, developing alumni feedback mechanisms, creating and updating alumni databases, and planning student career orientation activities. There is also a clear need to establish an alumni association, which could serve as a bridge between graduates, employers, and the university.

Regarding student international mobility and the attraction of foreign students, the university could consider a phased development approach, initially organising short-term courses, and only later progressing to the implementation of complete educational programs. Priority should be given to creating a favourable environment for the academic and social integration of foreign students. It would be advisable to study comparable international experience within this process.

Summary:

Considering that AMI ensures student involvement in the improvement of educational processes and decision-making at certain levels, has established some opportunities for student counseling, applies mechanisms to gather student feedback and has developed certain practices for responding to it, as well as encourages student participation in research and extracurricular activities, the expert group concludes that AMI meets the requirements of Criterion 4.

Conclusion:

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

V. FACULTY AND STAFF

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

Findings

5.1. The Institution has policies and procedures promoting recruitment of a highly qualified teaching and supporting staff to provide academic programs.

According to AMI's 2022–2026 Strategic Development Plan, the institute has set the goal to “develop the overall composition of the institution's human resources, ensure a qualified teaching workforce, and create a modern working environment.” To achieve this objective, the following measures have been defined: improve the criteria for faculty recruitment; implement measures to encourage and support promising staff; organize activities to enhance pedagogical, professional, and research skills of faculty; promote the involvement of faculty members in the institute's management processes; continuously organize the “Best Teacher of the Year” competition; and involve top graduates in the educational process.

According to the self-evaluation, since its establishment, the recruitment of faculty has been carried out with the agreement of the department head, based on contracts signed with the institute's rector. During expert meetings, it became clear that members of the Founders' Board are physicians who have established professional networks with their colleagues, which plays a significant role in the recruitment and engagement of faculty.

In 2017, AMI adopted its Faculty Selection Procedure, which includes an appendix defining the mechanism for competitive selection. The HR department publishes announcements of vacant positions in widely circulated Armenian periodicals as well as on various websites. The competition committee includes the dean, the head of academic affairs, and other committee members. During the competition, interviews are conducted to evaluate the professional and personal qualities of the candidates.

During the visit, it was noted, for example, that a new lecturer had recently been recruited for the Surgical Dentistry subject, with the selection process involving the relevant department heads and cycle coordinators. For the recruitment of faculty in the Department of Normal Physiology, Human Anatomy, and Histology, candidate lecturers submitted their CVs, and interviews were conducted. The Academic Affairs Division of the institute oversaw

the selection process. Based on the competition results, employment contracts are signed by the requirements of the Labor Code of the Republic of Armenia.

The university has established criteria for staffing positions, and position descriptions have been developed in line with each role. AMI's faculty ranks include Lecturer, Associate Professor, and Professor.

In 2022, the *Regulation on the Formation of the Faculty* was developed, which outlines the criteria for faculty formation based on qualifications, academic degrees and titles, teaching experience, methodological activity indicators, and research activity indicators. During expert discussions, it became clear that priority is given during the selection process to candidates holding an academic degree and having pedagogical experience, while human relations skills and the ability to work effectively with students also play an essential role.

The visit revealed that there is currently a need for additional lecturers in *Histology* and *Physiology*, and efforts are underway to recruit new specialists in these areas.

It was also found during the expert visit that there is no mandatory requirement for lecturers to know the English language for the implementation of educational programs. The faculty is also supplemented with the institute's graduates. For clinical subjects, the teaching staff is recruited from physicians working in medical centers that cooperate with the Institute (e.g., "Erebouni" MC, "Zilfyan Eye Care Center," "Shengavit" MC, and others).

To fill vacancies among support staff, announcements are also published, after which interested candidates can apply for employment. The selection and operation of AMI's administrative and support staff are carried out in accordance with the institute's charter, the code of ethics, and the provisions of the employment contract.

Currently, the institute's workforce includes 203 employees, of which 174 (86.7%) are teaching staff and 29 (14.2%) are support staff. The teaching staff includes both permanent and adjunct specialists, as well as those working on an hourly basis. Among the faculty, 28% hold a Candidate of Sciences degree, and 6.3% have a Doctor of Sciences degree.

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

At the university, there are no separate requirements established for the faculty for the General Medicine and Dentistry educational programs. However, in the 2017 Regulations of the Armenian Medical Institute, requirements for the "Professional Qualifications of the Teaching Staff by Educational Programs" were defined. These requirements focus on the general framework of faculty competencies, for example, professional competencies including the ability to develop academic courses, modules, and their educational-methodological support materials; the ability to organise students' educational and cognitive activities; and the capacity to shape an educational and informational environment, among others.

Based on the results of the self-evaluation and the site visit, it was found that the university considers foundational education, qualifications, and teaching experience in alignment with the specialisation of the courses taught by faculty members. Research activity

is also valued, and in the case of clinical subjects, the ability to work in leading medical centers and clinics and to connect the educational process with the medical community is considered essential.

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

At AMI, several regulations are in place to support measures that enhance the quality and effectiveness of faculty teaching. These include the Regulation on Faculty Certification at AMI (2019), the Regulations of the Armenian Medical Institute (2017), and the Procedure for Evaluating the Effectiveness of AMI's Professional Education Programs (2022), among others.

The primary mechanisms employed in the evaluation process include student surveys, classroom observations, and discussions with faculty members. There is also a faculty certification process; however, it became clear during the site visit that this has not been implemented for the past four years.

Student opinions about the quality of teaching are regularly collected through paper-based questionnaires, which are completed at the end of each academic year, after the examination period. In these questionnaires, students can provide suggestions. Although the analysis results of the surveys are not directly available to the students, during the expert visit, students noted that their feedback has, in some cases, led to visible changes. The survey results are presented to faculty deans, the head of academic affairs, and the rector, and are also discussed during Academic Council meetings.

Based on the results of this analysis, several improvements have been made. For example, in response to student feedback, it was decided to tighten oversight of the internship organisation. Additionally, information about cycle-based lecturers was included in the list of best teachers, which was also a response to student evaluations.

During the expert meetings, it was found that class observations at AMI are carried out by a staff member of the Quality Assurance Center, the dean, and department heads. For experience-sharing, new lecturers also conduct class observations with senior, experienced colleagues. There is a regulation for conducting class observations, which includes quality evaluation and a corresponding class observation record form. The results of class observations are discussed in meetings.

At the end of each semester, summaries of class observations are compiled by the Quality Assurance Center expert, who also provides relevant advice and makes recommendations for improving the teaching process. The review of these summaries revealed that attention is paid to the delivery of teaching material, the use of visual aids, technical resources, student engagement, and teaching methodology. According to the self-analysis, recommendations for addressing identified deficiencies are submitted to the rector,

deans, the Academic Affairs Division, and the respective faculty members. Successful teaching practices identified through class observations are noted, and their dissemination is encouraged.

To promote the quality and effectiveness of teaching, AMI holds a “Best Teacher” competition, which is based on the results of student surveys, class observations, and focus group discussions. The winning lecturer is awarded a monetary incentive. The candidates proposed for the award are initially approved by the relevant dean and academic affairs division, with final approval given by the Academic Council.

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

According to the Regulation on Professional Training and Qualification Enhancement of AMI Faculty, each faculty member is required to undergo professional training or qualification enhancement at least once every five years, accumulating the defined number of credits (30 credits) over time.

From the meetings and a review of the faculty training schedules, it was found that over the past three years, faculty members have participated in numerous training courses, primarily of a methodological nature. These training courses have addressed topics such as improving professional and subject-specific educational programs, lesson planning, student assessment processes, the application of information technology, and other relevant areas.

During the expert site visit, it was noted that active discussions had also been conducted on topics such as nanotechnologies and their effects on the human organism, artificial intelligence, and other contemporary issues. At the request of faculty members, training was also organised on the practical use and potential applications of ChatGPT.

In 2023, four university faculty members participated in a three-day training session on the topic “Alignment of Educational Programs with the Standards of the World Federation for Medical Education.”

Faculty members have also, on their initiative, participated in other professional training sessions within their specialities, particularly to accumulate CME (Continuing Medical Education) credits in accordance with the relevant sectoral regulations. A review of documents showed that expenditures for faculty professional development account for 0.5% of the university’s budget.

5.5 The Institution ensures a permanent staff for the stable provision of the academic programs.

According to the self-evaluation, of the 174 faculty members at the university, 54 (31%) are full-time staff. The number of students per study group is 12–14, while the maximum

number of courses taught by a single faculty member is currently four. As of December 2024, the student–faculty ratio stands at 796:174, which equals 4.5:1.

To ensure stability in the teaching staff, the university maintains a personnel reserve, currently including 15–20 specialists. The university also recruits physicians and dentists from various leading medical centres and dental clinics to cover specialised disciplines; these specialists account for approximately 50% of the teaching staff. The institution takes steps to expand its faculty by giving priority to both young specialists and selected top graduates of the institute. The average age of the teaching staff is 58, which has decreased by five years over the past five years, reflecting a rejuvenation of the staff.

According to the self-evaluation, in recent years, there has been a dynamic growth in faculty remuneration: in 2023, the salary fund almost tripled compared to 2020. During the expert meetings, it was clarified that the monthly salary fund for the previous year was around AMD 24 million, and for the current year, approximately AMD 28 million. The salaries of individual staff members have also increased over the last few years. Between 2021 and 2023, hourly compensation for teaching increased by 67% for staff without an academic title, tripled for those with a Candidate of Sciences degree, increased 2.8 times for those with a Doctor of Sciences degree, and 2.5 times for members of the National Academy of Sciences. For practical classes, the hourly pay increased by 70% for staff without an academic title, doubled for those with a Candidate of Sciences degree, and increased 2.4 times for those with a Doctor of Sciences degree.

According to the Internal Disciplinary Rules of the Armenian Medical Institute, incentives are foreseen for exemplary performance of work duties, including letters of appreciation, one-time monetary awards, certificates of commendation, and souvenir gifts. A review of documents showed that one-time financial rewards were provided to faculty members who delivered courses at a high professional level, performed their work duties correctly and in good faith, or were recognised as the best faculty in student surveys, as well as to core staff. Internal incentive awards account for 0.3% of the university's budget.

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

AMI's faculty comprises the following academic ranks: Lecturer (140, 80.5%), Associate Professor (28, 16.1%), and Professor (6, 3.5%). Expert observations revealed that the university applies differentiated bonuses for holders of the titles of Professor and Associate Professor.

In 2022, the university approved the Regulation on Incentives, Awards, and Honorary Titles for AMI Faculty, which outlines the procedures for awarding the titles of Honorary Professor and Honorary Department Head within the institution. In line with recommendations from the previous accreditation consultancy, a Procedure for Supporting and Encouraging the Professional Advancement of Young Lecturers was developed, which includes financial rewards for published articles, monographs, educational-methodological

manuals, defence of candidate and doctoral dissertations, and the achievement of Associate Professor titles.

During the expert meetings, it was clarified that the results of student surveys have served as a basis for incentivising faculty members. AMI also supports the publication of educational and methodological manuals and textbooks.

The institution equally values the encouragement of administrative staff who demonstrate knowledge, diligence, and dedication in their work. For instance, the heads of the Quality Assurance Center, department heads, and cycle coordinators have been appointed on this basis.

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

AMI's support staff consists of 29 employees, whose functions and responsibilities are defined in their respective job descriptions.

The administrative and support staff have training needs, and some employees have already undergone professional development. The university supports the implementation of such training activities. For example, the administrative staff have participated in a training course on drafting electronic contracts.

Considerations:

The expert panel positively assesses that the university has a clearly defined policy and procedures for the selection, evaluation, and continuous development of its faculty, which enables the institution to ensure consistent teaching quality and to align the achievement of educational program objectives with appropriate human resources.

It is also commendable that targeted measures are being implemented to encourage faculty, support their professional advancement, and involve young specialists, including the provision of financial incentives, the dissemination of best practices, and consideration of student feedback.

It is positive that a range of tools is used in the quality assurance process for teaching, including student surveys and class observations, which are accompanied by constructive consultations and recommendations. There is also an observable trend toward enhancing the quality and scientific potential of the teaching staff, particularly through training, promoting research activities, and increasing the number of academic degrees held by staff members.

At the same time, the expert panel notes that the university has a need to develop a clear plan for faculty training, and it may also consider planning experience-sharing events among physician-lecturers, in which both faculty and students could participate.

Furthermore, it is positive that the university is responsive to labor market demands by cooperating with leading medical institutions, making it possible to engage experienced professionals from the field, build a personnel reserve, and ensure continuity in teaching.

Summary:

Considering the established policy for the selection, evaluation, and continuous development of the teaching staff; the implementation of incentives and mechanisms for faculty rejuvenation; the application of a diverse set of tools to ensure teaching quality; and the involvement of experienced physicians from medical centers in the teaching process, the expert group concludes that AMI meets the requirements of Criterion 5.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 5 is **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 scientific and research activities at the AMI are coordinated through the Scientific Council, which comprises representatives from the institutional leadership, heads of academic departments, student representatives, and affiliated clinical partners. The overall strategic oversight of research activities is under the direct responsibility of the Rector.

The research capacity of the institution is primarily derived from the individual academic and scientific endeavours of faculty members, often conducted in collaboration with research institutes affiliated with the National Academy of Sciences of the Republic of Armenia. These collaborations are particularly active in the domains of organic chemistry, biochemistry, and physiology. Students are actively involved in the research ecosystem through participation in experimental research projects, and in specific cases, clinical research, conducted in cooperation with partner healthcare institutions (e.g., Erebuni Medical Center, National Blood Transfusion Center, Forensic Medical Expertise Laboratory).

While AMI does not currently possess the formal status of a research-intensive institution, deliberate steps have been taken in recent years to develop a sustainable research culture. In response to the findings of the previous institutional accreditation process, the university established the Student Scientific Society (SSS), which aims to foster student involvement in research and support the strategic development of institutional research priorities. Identified research directions include:

- For the Faculty of Dentistry: *Regenerative Therapies, Pharmacological Treatment, Tissue Engineering*.
- For the Faculty of General Medicine: *Fundamental Medicine, Circadian Rhythms, Gallstone Disease*.

The financial resources allocated to research activities constitute approximately 2% of the institution's total budget, distributed as follows:

- Internal research incentives and awards – 0.3%
- Procurement of laboratory equipment and materials – 1%
- Publication expenses – 0%
- Research stimulation and incentive programs – 0%
- Participation in student research conferences and seminars – 0.2%
- Miscellaneous research-related expenses – 0.5%

To date, the institution has not applied for external grant funding to enhance laboratory infrastructure or acquire research equipment, which remains a notable gap in its institutional research development planning.

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

The university has adopted and implemented the “Regulation on AMI Scientific Research Strategy” and the “Procedure for Research Activities at AMI”, in accordance with which the Armenian Medical Institute designs and executes short-term, medium-term, and long-term research programs to advance its scientific mission.

The institution's long-term research interests and aspirations are articulated in the University Development Strategic Plan for 2022–2026 and its corresponding Action Plan. While specific strategic steps have been taken to promote long-term research, the university currently lacks a structured medium-term planning framework for research development.

During the external expert review visit, it was observed that the institution demonstrates a positive trend in engaging students in research activities, facilitated by both the individual initiatives of academic staff and students' motivation and interest in scholarly work.

At the same time, there is untapped potential to strengthen the integration between research and the educational process, particularly through more systematic planning and the alignment of research activities with academic programs. This presents an opportunity for capacity building and institutional enhancement in the domain of research-led education.

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

In accordance with the “Regulation on Faculty Incentives, Awards, and Honorary Titles” approved in 2022, the Armenian Medical Institute has established provisions

governing the conferral of the titles “Honorary Professor” and “Honorary Head of Department,” as well as the criteria and procedures for academic staff recognition and reward.

To support and encourage the professional development of early-career academic staff, the same regulation outlines a framework for incentivising scholarly and instructional contributions. This includes recognition and financial rewards for activities such as publishing scientific articles, authoring or co-authoring textbooks and monographs, defending a PhD and doctoral dissertations, and being awarded the academic titles of Associate Professor and Full Professor.

The university’s academic staff has actively participated in conferences, published research articles, and authored or republished educational resources, including textbooks, manuals, and teaching materials. In recent years, there has been a notable increase in research output. Specifically, from 2020 to 2022, an average of approximately 25 articles and conference abstracts were published annually. In contrast, this number almost doubled in 2023 and 2024, reflecting a positive trend in research productivity.

Document analysis indicates that between 2020 and 2024, faculty members have published articles in international peer-reviewed journals indexed in quartiles Q1 to Q4, based on scientific impact. The breakdown is as follows: Q1 – 10 articles, Q3 – 7 articles, Q4 – 11 articles. However, expert evaluation revealed that in most of these publications, AMI faculty are affiliated with other scientific institutions rather than being listed as representatives of the university, which limits institutional visibility in research metrics.

During the site visit, it was also found that faculty members employ various strategies to engage students in research activities. For example, in competitive grant calls announced by the Science Committee, AMI faculty members successfully secured two projects, within which university students were actively involved in the implementation process. Selection favoured students who had demonstrated strong independent working skills and collaborative competencies.

Students frequently engage in research activities on their initiative. In particular, interest sparked during chemical laboratory experiments has led some students to become involved in research projects conducted at affiliated research centers. AMI students have also co-authored scientific publications alongside their faculty mentors, including articles published in international peer-reviewed journals such as *International Journal of Biometeorology*, *Chronobiology in Medicine*, *Insights in Biomedicine*, *Microelements in Medicine*, and the *Mehrabyan Medical College Bulletin*.

During expert evaluation meetings, it was noted that funds intended to encourage publication activities were allocated to faculty members as part of their general remuneration, without explicit designation or earmarking for research output. As such, these financial incentives were not distinguished as performance-based rewards linked specifically to academic publishing, which limits the transparency and effectiveness of the research incentive framework.

6.4 The Institution emphasizes internationalization of its research.

The academic staff of AMI has actively participated in international scientific conferences held in countries such as Thailand, Belgium, Spain, Italy, and Russia, and has contributed publications to several international peer-reviewed journals.

During the external review visit, it was also noted that employers play an active role in supporting students' participation in international academic events related to various fields of medical science. For instance, student involvement was facilitated in the annual international conference organized by the Zilfyan Eye Care Center, as well as in other events initiated by professional medical associations.

These practices demonstrate a growing level of international academic engagement and external stakeholder collaboration, which contribute positively to the university's efforts in fostering global academic exposure and student research integration.

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

According to the institution's self-evaluation report, academic staff at AMI actively involve senior-level students in research projects conducted both at the university's teaching facilities and within various research institutes of the National Academy of Sciences of Armenia. The outcomes of these research activities are regularly presented at annual interuniversity student scientific conferences, the proceedings of which are published in scientific abstract collections.

In 2023, AMI hosted an interuniversity scientific conference dedicated to the memory of Levon Hrant Andriasyan, culminating in the publication of a volume of abstracts (Yerevan: Hayrapet Publishing, 2023).

For junior-level students, introductory visits to research institutions are organized with the goal of fostering interest in the research environment and methodology. For instance, students visited the Institute of Physics at Yerevan State University, where they became familiar with experimental methods for DNA melting analysis and performed practical calculations to assess DNA purity levels.

Students are also engaged in applied research initiatives. Under the direct supervision of faculty members, students from the Faculty of Dentistry conducted an epidemiological study on dental caries among 12- to 14-year-old schoolchildren in Yerevan (a total sample of 286 students). The research involved evaluating oral hygiene status, bite types, and conducting awareness-raising activities on oral health maintenance. The results were presented as part of a university-organized event entitled "Searching for Caries."

In another example, a student from the Faculty of General Medicine, under faculty supervision, conducted a study on the medicinal properties of native herbs from Artsakh, focusing on their therapeutic uses in traditional medicine.

Additionally, AMI students participated in the “Science Week” event organized by the National Academy of Sciences of the Republic of Armenia, further demonstrating the university's commitment to promoting research engagement and academic integration at all levels of study.

Analysis of institutional documents and stakeholder interviews indicates that student research activities at AMI are predominantly analytical in nature, primarily based on literature reviews and case study analysis. In certain courses, home assignments with embedded research components have been introduced—for example: “Research Material on Epithelial Development” and “The Role of Macrophages in Immunity.”

Course syllabi also incorporate thematic presentations (e.g., in Bioinorganic and Bioorganic Chemistry), as well as independent project-based assignments in subjects such as Medical Biology and Genetics, with students expected to present and defend their findings as part of formative assessment.

Between 2020 and 2024, AMI has produced and republished several textbooks, instructional manuals, and educational resources, including:

- Minasian A.M., Adamyan Ts.I., Sargsyan N.V., *Human Physiology* (2020)
- Mkrtchyan G.A., *Russian Language Lessons for Medical Students* (2021)
- M. Hovhannisyan, *Laboratory Manual for Biochemistry* (2024)
- A.H. Melikyan, *Characterization, Diagnosis, and Surgical Causes of Abdominal Pain* (2024)
- L. Sargsyan, *Medical Ethics and Deontology* (2024)

These materials contribute to enhancing the quality of teaching and learning resources, supporting both discipline-specific competencies and the integration of research-informed education.

Considerations:

It is commendable that the university provides students with opportunities to participate in academic conferences, to present research findings, and to prepare and publish scientific materials. Notably, students are involved in research through both faculty-initiated projects and their academic interests, with faculty members maintaining collaborative ties with various research institutes, thereby establishing a foundation for systemic research partnerships.

Another positive aspect is the existence of a Student Scientific Society (SSS) as a structural unit within the university, which coordinates the definition of thematic research priorities, thereby fostering the development of a research-oriented academic culture.

At the same time, considering the university's significant internal potential, including its size and diversity of academic staff, existing collaborations with research institutes, and growing experience in research activities, there is a clear capacity to develop a comprehensive institutional research policy and establish a distinct research profile. Such a policy would help

guide research initiatives strategically and mobilise internal development resources more effectively.

A strategic step forward would be the integration of research projects into academic programs, particularly through the introduction of mandatory thesis components, which would enhance the development of analytical and research-oriented thinking among students.

It is also noteworthy that faculty at AMI demonstrate research productivity, as evidenced by their participation in various publications. Building on this foundation, the university could develop mechanisms for research project submissions, implement internal grant schemes, and establish a more transparent and structured policy for research incentives, including rewards for academic publications, participation in scientific conferences, and efforts toward internationalisation.

A significant area for development is increasing investment in the research environment, which includes:

- Expanding the budget allocated to research activities,
- Enhancing laboratory infrastructure and equipment, and
- Supporting the implementation of clinical, statistical, and fundamental research projects.

The development and assessment of research capacity can become an integral component of the university's quality assurance system, enabling a more comprehensive understanding of its research potential and facilitating the systematic planning of sustainable research development at the institutional level.

Summary:

Considering the actions undertaken by the institution following the previous accreditation process, particularly those addressing previously identified gaps in research development, such as the reactivation of the Student Scientific Society (SSS), the identification of priority research areas, and efforts to engage students in research activities, it is evident that AMI has taken meaningful steps toward enhancing its research culture. The university demonstrates growing research tendencies, reflected in the active participation of both students and faculty in academic conferences, as well as its collaborative links with scientific research institutes and clinical centres.

Based on the above, the expert panel concludes that the Armenian Medical Institute meets the requirements of Criterion 6.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 6 is **satisfactory**.

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.

AMI operates within a total area of 9,500 m², of which the main academic building occupies 5,660 m². In addition, the university conducts clinical training through clinical departments located in 27 medical centres, operating on a lease basis.

Beyond standard classrooms, the institution is equipped with laboratories, a computer lab, a library, a reading room, a gymnasium, an on-site medical facility, and a cafeteria, all of which contribute to a supportive and comprehensive learning environment.

During the 2023–2024 academic year, the university's library underwent significant expansion, with the acquisition of a substantial number of professional and instructional resources aimed at improving students' access to educational materials. Focus was given to key subject areas, including surgical dentistry, human anatomy, histology, field surgery, medical microbiology, biochemistry, and medical ethics and deontology.

The updated library holdings now include not only textbooks and teaching manuals, but also newly published professional literature, with enough copies to ensure broad accessibility for both students and academic staff.

However, expert observations identified a need for library renovation and digitisation, despite the availability of some specialised books on the university's official website.

According to the 2022–2026 Strategic Development Plan, Strategic Objective 5.3 under Strategic Priority 5 aims to modernise and enhance classroom, educational, and research laboratory infrastructure, aligning with the evolving needs of the Institute's academic programs.

The key performance indicators defined for measuring progress in this area include:

- The establishment of a modernised and digitised library and reading room equipped with up-to-date information technologies.
- The annual renovation and refurbishment of at least two classrooms.
- The development of assessment plans for identifying material and technical resource needs.

Findings from the expert site visit revealed that several of these indicators have not yet been fully achieved. Specifically:

- The library modernisation process is still in progress and has not yet been completed.

- Partial renovation of classrooms has been carried out, with the remaining works currently underway.

Nonetheless, progress was observed in several strategic areas. Notably, the establishment of simulation laboratories for both the Dentistry and General Medicine programs is actively ongoing.

In these academic programs, access to professional literature is also supported through the provision of up-to-date clinical guidelines and current medical resources, delivered by faculty members and practising clinicians.

Between 2020 and 2024, the institution acquired the following educational equipment:

- 1 interactive whiteboard,
- 3 projectors,
- 15 laptops,
- 2 photocopying machines.

Additionally, the entire university building is equipped with internet access and Wi-Fi connectivity. In the 2024–2025 academic year, seven classrooms were equipped with modern internet-connected digital displays.

According to the self-evaluation, the 2022–2023 budget allocations were distributed as follows:

- 4% for faculty professional development,
- 1% for library improvement and collection expansion,
- 3.2% for acquisition of equipment and furnishings,
- 33.6% for renovation works.

Resource monitoring further confirmed that in the 2023–2024 academic year, the entire 4th floor of the main building was fully renovated and furnished, while the 3rd floor was undergoing renovation. The institution has initiated a phased plan for the complete renovation of the university building.

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

According to the self-evaluation report and accompanying documentation, 98.31% of AMI's financial resources are generated from student tuition fees.

The university's expenditure structure is as follows:

- Salaries account for approximately 48–52% of total expenditures, distributed as follows:
 - ✓ Academic staff: 42.35%
 - ✓ Administrative staff: 9%
 - ✓ Support and technical staff: 2%

- Mandatory state contributions: 5%
- Tuition discounts: 2%
- Practical training (internship) expenses: 5%
- Acquisition of educational equipment and furnishings: 11%
- Library expenditures: 2%
- Student council activities: 0.05%
- Quality assurance processes: 0.5%
- Travel and mobility expenses: 1%
- Scientific research activities: 2%
- Facility rental: 2.5%
- Utility costs: 5%

Currently, AMI does not receive grants or alternative funding streams, and no financial performance analysis related to resource management efficiency is available.

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

Findings from expert meetings revealed that AMI allocates financial resources in accordance with the principles of educational program efficiency and sustainability. According to the self-assessment report and supporting documentation, the university allocates 0.5% of its annual budget to faculty professional development. In 2023 and 2024, professional training activities were conducted for the academic staff, with expenditures amounting to 1,600,000 AMD and 1,270,000 AMD, respectively. These initiatives aimed to enhance the quality of education and strengthen faculty professional competencies.

Additionally, the institution has implemented incentive mechanisms, including reward schemes for both academic and administrative staff. These mechanisms play a crucial role in maintaining a stable educational environment and promoting continuous quality improvement.

AMI also invests in the organisation of clinical training, entering into agreements with clinical-based institutions, both on paid and pro bono bases, to ensure the availability and accessibility of practice-based learning opportunities for students.

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.

According to the resource review, the launch of two simulation centers, as outlined in AMI's Strategic Development Plan, is currently in progress. For the Dentistry program, the simulation center has already been set up in a renovated classroom and was in the equipment

installation phase at the time of the review. The whole operation of this center is planned for September.

For the General Medicine program, the renovation phase of the simulation center has been completed, and the procurement and installation of medical simulation equipment is pending.

During the expert site visit, it was confirmed that the use of partner clinical institutions' facilities for clinical training allows AMI students to observe and operate modern medical equipment in real-life settings. The university's primary clinical base is "Erebuni" Medical Centre, a key institutional partner. This collaboration is considered a major strength, as it significantly enhances the practical component of medical education by facilitating students' direct professional integration into clinical environments.

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

The procedures for ensuring both internal and external document circulation at AMI, as well as the delineation of responsibilities among relevant administrative units, are regulated by the institution's Internal Disciplinary Rules (reaffirmed in 2017) and its Archiving Policy.

According to the institution's self-evaluation, network-based software systems are in operation, enabling the digitisation of document workflows and facilitating the efficient and accurate exchange of internal and external documentation and information across the Institute.

AMI maintains an official website, a Facebook page, and a monthly newsletter, all of which serve as communication platforms for disseminating information about the university's activities. However, the Institute has not yet conducted a systematic analysis of the content and impact of its website and Facebook publications.

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

In 2025, a fire safety system was installed at the institute, enhancing the university's compliance with safety regulations.

AMI maintains an on-site first aid medical station equipped with essential medications and regularly replenished first aid supplies, ensuring readiness for emergencies.

The institution has also made progress in improving accessibility for students with special needs by constructing ramps to facilitate access to university buildings, thereby promoting a more inclusive and supportive learning environment.

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.

According to the institution's self-evaluation, AMI regularly conducts surveys and monitoring activities among stakeholders to evaluate the applicability, accessibility, and effectiveness of resources provided to both students and teaching staff. Survey results indicate that 60% of students and 70% of academic staff express satisfaction with the availability of learning resources.

However, feedback from stakeholders also highlights key areas for improvement, including the modernisation of the library collection and the increased availability of electronic whiteboards and computers. These findings inform institutional planning and resource enhancement strategies.

Considerations:

The expert panel positively evaluates the institution's ongoing efforts to improve the material and technical foundation of the educational process, particularly in support of clinical skills development. It is commendable that the establishment of simulation laboratories for both the Faculty of Dentistry and the Faculty of General Medicine is underway, to enhance students' practical competencies.

It is also positive that the university utilises the resources of partner medical institutions (e.g., Erebuni Medical Centre), including clinical mannequins and other training tools, to support the development of hands-on skills.

A trend toward library enhancement is also observed, increasing student and faculty access to contemporary professional literature, including clinical guidelines, instructional manuals, and specialised textbooks. Additionally, students receive updated clinical protocols directly from practising physician-lecturers, further enriching the institution's academic resources.

At the same time, it is recommended that the university formulates a clear policy for the development and modernisation of educational resources, particularly for pre-clinical and foundational courses. To ensure equitable learning conditions, it is also advisable to develop a resource policy aligned with the principles of inclusiveness, supporting students with special needs.

It is essential for the institution to regularly assess its resource base, including laboratory, library, technical, and financial infrastructure, in alignment with the pace of academic program expansion, growing student enrollment, and the university's strategic objectives.

Developing a clear financial planning framework, conducting risk analysis, and pursuing alternative sources of funding will contribute to ensuring the long-term sustainability of the institution's resource management.

Summary:

Considering the recent improvements in material and technical resources at the institution, the ongoing establishment of simulation laboratories for the Dentistry and General Medicine programs, the effective utilization of resources at Erebuni Medical Center, and the enhancement of the university library with professional literature during the 2023–2024 period, the expert panel concludes that the Armenian Medical Institute meets the requirements of Criterion 7.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 7 is **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.

At the Armenian Medical Institute, the accountability system encompasses educational, financial, and quality assurance subsystems. The primary reporting units include the Academic Division, Dean's Offices, the Departments, the Center for Quality Assurance, and the Chief Accountant's Office.

The content of the reports covers both sectoral indicator analysis and descriptions of identified challenges, as well as summaries of achieved results. Reports from the Center for Quality Assurance often include analyses of survey results and data related to the review of academic programs.

At the highest level of accountability, the Rector's annual reports are presented to the Founders' Council. However, the format and depth of these reports have varied across different years. External stakeholders do not currently publish this document.

Engagement with internal stakeholders, in particular students, faculty, and administrative staff, takes place through both formal channels (such as the Academic Council,

the Quality Assurance Center, and the Academic Division) and informal channels, including meetings and discussions.

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

At the Armenian Medical Institute, the primary tools for ensuring transparency include the official website, the Facebook page, a closed Viber group for faculty, and the “Erebuni Monthly” publication, which serves as an additional platform for communication and coverage of internal institutional life.

The official website publishes information about the institution’s activities, educational processes, and events, while the Facebook page disseminates informational, academic, and recreational content. The closed communication group for faculty enables the prompt transmission of important messages.

To ensure transparency, the website is regularly updated, and public relations are also maintained through email, providing the opportunity for direct contact with the management team. The website hosts charter and strategic documents.

The Institute has initiated the development of a trilingual version of both its website and Facebook page to improve information accessibility for both internal and external stakeholders. The launch of the trilingual website, the multilingual adaptation of the Facebook page, and the digitisation of the “Erebuni Monthly” are planned by September of the current year.

Currently, the costs associated with the website and other information platforms are included in the general operational budget, without a separate dedicated line item. The accuracy of published materials is monitored by the Academic Division and the Quality Assurance Center, and some statistical analysis of the publications is conducted, although there is no formal documentation of this process.

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

During the expert site visit, it was confirmed that feedback is primarily communicated via email, ensuring official and documented communication. The website also provides a telephone number, offering an additional channel for inquiries and responses.

As part of stakeholder feedback mechanisms, the institution organises weekly office hours during which students can meet with the Rector, the Head of the Academic Division, or the Deans. Coordination of meetings with external stakeholders is entrusted to the Head of Administration, who receives inquiries, responds to them, or redirects them to the appropriate subdivision as needed.

These processes contribute to strengthening trust in the institution's operations and to the prompt resolution of issues.

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

At the Armenian Medical Institute, knowledge and values are transferred to society through various formats. The institution organises open lectures and additional educational courses dedicated to current issues in biomedical and medical fields, targeting both internal audiences and external stakeholders.

The Institute also actively collaborates with schools and kindergartens. Since 2023, visits to high schools have resumed, during which Armenian Medical Institute students present information about the institution and donate books. Under the supervision of a faculty member, students of the Dentistry Faculty have visited schools to study the prevalence of dental caries and have conducted awareness-raising activities on oral hygiene. Plans are in place to expand these programs to include direct engagement with kindergarten children and their parents.

Armenian Medical Institute students are also involved in volunteer activities, working and taking shifts in hospitals and ambulance services, as well as providing medical assistance and support to elderly individuals living alone with their everyday needs.

Considerations:

The expert panel positively evaluates the fact that the Armenian Medical Institute has established specific mechanisms to ensure effective relations with society, as well as to promote transparency and accountability. It is commendable that the accountability system includes annual reports from various subdivisions, which reflect the institution's main areas of activity.

Although the Rector's reports are presented to the Founders' Council, their lack of publication limits the awareness of external stakeholders.

Several initiatives have been undertaken to enhance transparency, in particular, the development of a trilingual version of the website and Facebook page, as well as the digitisation of the "Erebuni Monthly", which can increase the institution's visibility and accessibility to the broader public.

From this perspective, the institution needs further to develop its public relations and media communication policy, clarifying what information is presented on the website and social platforms, how communication with target audiences is managed, and how the institution's initiatives and contributions to public well-being are showcased.

The expert panel positively evaluates that a culture of knowledge and values transfer to society is well-established at the Armenian Medical Institute, as evidenced through various initiatives. These activities contribute to fostering students' social responsibility and to strengthening the university's ongoing connection with society.

Summary:

Considering that the Armenian Medical Institute has established a culture and processes of social responsibility, including accountability mechanisms, tools for ensuring transparency, feedback instruments, as well as initiatives for knowledge and value transfer, the expert panel concludes that the institution meets the requirements of Criterion 8.

Conclusion

The compliance of AMI institutional capacities with the requirements of Criterion 8 is **satisfactory**.

IX. EXTERNAL RELATIONS AND INTERNATIONALIZATION

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

Findings

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

The seventh strategic direction of the institution's 2022–2026 Strategic Development Plan focuses on external relations and internationalisation. Two key objectives have been defined under this priority:

1. To expand and diversify national and international partnerships, and
2. To increase the enrollment of students from the Armenian diaspora at AMI.

However, findings from expert interviews indicate that, despite these declared goals, the university's external relations policy currently lacks a structured action plan, including a timeline, performance indicators, and clearly defined mechanisms of accountability.

Participation in international conferences and professional development activities by faculty and students is primarily conducted on an individual basis, rather than through institutional programs.

Nevertheless, the fact that graduates continue their education in countries such as Russia, the United States, and elsewhere suggests a certain degree of international recognition of the education received at the institution.

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

During the previous accreditation cycle, the university received a recommendation to define AMI's long-term internationalisation objectives and to develop mechanisms for

promoting international cooperation, including the identification of responsible units and individuals for their implementation.

According to the self-evaluation report, AMI has not yet established a dedicated structure or infrastructure for managing external relations and internationalisation, nor has it appointed specific personnel to oversee this domain.

Currently, matters related to diaspora student coordination are managed by the Head of Academic Affairs and the faculty deans. As outlined in the Strategic Action Plan, institutional responsibility for academic cooperation and international engagement is assigned to the Rector, the Quality Assurance Center, and the faculty deans.

9.3 The Institution effectively collaborates with local and international counterparts.

AMI primarily collaborates with local medical and dental institutions to organise student clinical internships. The university maintains partnerships with approximately 40 affiliated institutions, formalised through signed agreements.

According to the self-evaluation report, during the 2023–2024 academic year, AMI students were also allowed to complete clinical placements abroad, particularly in the Russian Federation, Georgia, and Abkhazia.

The university has formal cooperation agreements with several international institutions and organisations, including:

- The National Institute of Health of the Republic of Armenia,
- The A.D. Sakharov International State Environmental Institute (Belarus),
- The Armenia Tree Project (ATP),
- The St. Petersburg Institute of Foreign Economic Relations,
- Tbilisi Dental Clinic No. 1,
- The New Vision University Institute,
- The International Red Cross Armenia Office, and
- The European Academy of Natural Sciences (Hanover, Germany).

However, as noted in the self-evaluation, the practical application of these partnerships remains limited, and the institution has not yet fully leveraged the potential of these agreements.

Despite the presence of international linkages, the university's international cooperation strategy is still under development. In practice, collaborations are primarily conducted on an individual basis or through connections with diaspora students. At the same time, institutional-level initiatives, such as participation in the Erasmus+ program or bilateral academic programs, are currently lacking.

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

According to data provided by AMI, the entire academic staff is proficient in Russian, while approximately 45% possess working knowledge of English. Despite the high level of Russian language proficiency among students, the university has not yet initiated active exchange programs with Russian higher education institutions.

Regarding students' foreign language proficiency (as of the most recent academic year):

- In the General Medicine program, 31% of students are proficient in English and 54% in Russian.
- In the Dentistry program, 20% are proficient in English and 53% in Russian.

During expert interviews, it was revealed that no supplementary foreign language classes are currently offered at the university. Students expressed interest in studying additional languages, particularly German and Spanish, which are seen as relevant to future academic opportunities and international medical education pathways.

Considerations:

It is commendable that AMI has initiated collaborative processes with several international institutions, including partners from Russia, Germany, and Italy, and maintains ongoing relations with diaspora professionals and students. These efforts can serve as a foundation for the systematic development of internationalisation.

At the same time, the expert panel notes that the university's international cooperation policy remains in a developmental phase. Despite the existence of formal agreements, exchange programs and joint academic initiatives are rarely implemented. The institution does not currently have a formal internationalisation strategy, and explicit references to international collaboration are absent from its strategic development plans and mission statement.

In practice, engagement with international partners is largely limited to individual-level collaborations or the presence of diaspora students, while institutional mobility programs such as Erasmus+ or joint academic projects have not yet been developed or launched.

Furthermore, the university lacks a designated unit or coordinator responsible for internationalization. The limited English language proficiency, coupled with the generally low level of institutional readiness among faculty and students for international engagement, presents a barrier to effective integration into the global academic community. While Russian language proficiency is widespread, it does not sufficiently support broad participation in diverse international programs.

Summary:

Considering that AMI does not have a developed internationalization strategy or action plan, lacks a systematic approach to international cooperation, and has not established a dedicated structural unit or designated personnel responsible for the implementation of

international programs, and given the absence of a coordinated process for student and faculty mobility, the expert panel concludes that the Armenian Medical Institute does not meet the requirements of Criterion 9.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 9 is **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.

In 2013, by decree of the Rector, the Center for Quality Assurance in Education (CQAE) was established at AMI. The Centre's overarching mission is to ensure the continuous improvement of educational quality, enhance the effectiveness of academic, research, and administrative processes, and promote the development of a learning outcomes-based education system.

The institution's quality assurance policy is underpinned by the principles of accountability, transparency, and stakeholder satisfaction, all of which aim to cultivate a sustainable culture of quality.

A comprehensive internal quality assurance framework has been institutionalised, comprising departmental quality coordinators, faculty-level quality assurance committees, and the central CQAE. The Center reports directly to the Rector and the Academic Council. Quality assurance processes are implemented by formally adopted regulations, strategic documents, and procedural guidelines, including the "Stakeholder Engagement Policy," which defines the scope and modalities for involving both internal and external stakeholders in quality assurance activities.

As part of the internal quality assurance processes, several mechanisms have been implemented, including:

- Classroom observations, including peer observations, aimed at promoting exchange of best practices;
- Student surveys assessing the relevance of educational content, effectiveness of assessment methods, teaching approaches, and instructional practices;
- Continuous monitoring and periodic review of academic programs;

- Focus group discussions involving students and faculty members, particularly following external internships;
- Engagement of external stakeholders in State Final Certification (SFC) committees, with feedback and recommendations used to inform program improvement.

The results of student surveys are compiled and submitted to the Rectorate. To ensure a high level of student participation, surveys are administered at the end of class sessions and typically reach 70–80% of the student population.

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

The AMI Quality Assurance Manual outlines the key stakeholders involved in implementing the institution's quality policy. These include the Quality Assurance Committee operating under the Academic Council, which is responsible for reviewing proposals aimed at improving the quality assurance (QA) policy and framework. The Committee also evaluates regulatory, procedural, and standards-related documents, as well as proposed revisions and implementations of academic programs, and submits them for approval to the Academic Council.

Another key structure is the Centre for Quality Assurance in Education (CQAE), which is responsible for operationalising the QA policy and framework, as well as overseeing the ongoing monitoring, review, and enhancement of QA processes. The CQAE collaborates closely with departmental QA coordinators, the institutional QA committee, and faculty/departmental QA committees. The Centre is directly accountable to the Rector of AMI.

At the institutional level, quality assurance is further supported by faculty QA committees and departmental QA coordinators.

The CQAE is staffed with one full-time Director, one full-time QA Responsible, and a QA Expert, whose primary responsibility is to conduct classroom observations. The Center is equipped with a dedicated office space furnished with modern equipment, which is regularly updated. AMI allocates 0.5% of its annual budget to support the implementation of quality assurance processes.

The staff of the CQAE participate regularly in professional development and capacity-building activities.

At the beginning of each academic year, the Head of the Center for Quality Assurance in Education (CQAE) develops an annual work plan, followed by a comprehensive report submitted at the end of the year.

The work plan outlines specific functions, defined timelines, and assigned responsibilities, encompassing not only CQAE staff members but also internal institutional

stakeholders, including faculty members, the Student Scientific Society (SSS), the Student Council, and administrative staff.

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

AMI has established a stakeholder engagement policy, governed by the “*Stakeholder Engagement Regulation*” adopted in 2022. This document defines the modalities of collaboration with internal and external stakeholders, outlines the functions of mutual communication, identifies the scope of discussion topics, and highlights potential areas for improvement.

Internal stakeholders include students, academic staff, and administrative and support personnel. Their participation in quality assurance processes is facilitated through various tools, including classroom observations, surveys, and focus group discussions. The Centre for Quality Assurance in Education (CQAE) regularly organises classroom observations, the results of which are compiled and submitted to leadership for further enhancement of teaching and learning practices.

At AMI, students, alumni, and faculty members are regularly involved in surveys that assess the quality of the educational process. These surveys cover areas such as curriculum content, teaching methodologies, assessment approaches, the academic environment, and program-level reforms.

The Student Council and the Student Scientific Society actively contribute to quality assurance initiatives. Survey results are utilized to inform decision-making at the management level and are shared with stakeholders through internal communication channels. Student and alumni surveys are conducted during the first semester of the academic year and following the State Final Examinations, respectively.

Employer feedback is primarily collected through online surveys. Most recently, nine responses were received out of 14 distributed questionnaires.

10.4 The internal quality assurance system is periodically reviewed.

In 2019, the institution adopted the “Policy and Procedure for the Review of the Internal Quality Assurance System”. According to this document, the review of the internal quality assurance (IQA) system at AMI involves analysing, revising, or restructuring QA policies, procedures, and associated human, financial, and material resources.

In 2022, the course evaluation survey instrument was revised, and a new questionnaire was developed specifically for first-year students. During the 2023–2024 academic year, the Centre for Quality Assurance in Education, in collaboration with the Academic Affairs Department, conducted a comprehensive review of academic programs. A detailed report was produced, outlining the key areas of focus in the review process. These included the analysis

of student and alumni feedback on program quality, employer satisfaction with program graduates, and the assessment of the impact of changes made to program structure and instructional methods.

The outcomes of these reviews are shared with internal stakeholders through secure communication channels. Survey instruments are periodically revised based on both internal analyses and benchmarking against external practices, for instance, modifications made following the review of practices at Sechenov University.

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

This is the institution's second experience in conducting self-evaluation in accordance with institutional accreditation standards and criteria. Following AMI's institutional accreditation in 2021, the institution submitted an improvement plan based on the recommendations received during the accreditation consultancy process and subsequently prepared a performance report on the implementation of the corrective actions.

During the expert site visit, it was confirmed that the self-evaluation team included representatives from senior leadership, academic staff, and the student body, all of whom actively contributed to the process.

While drafting the self-evaluation report, the data collected under each accreditation criterion was cross-referenced by the Quality Assurance Centre with the action items from the Strategic Plan to determine which actions had been implemented and which had not.

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.

The official website of AMI hosts the institution's operational regulations and procedures. Both the official website and the Facebook page serve as platforms for ensuring broad access to institutional information.

However, based on observations, the website lacks publicly available annual reports targeted at the wider stakeholder community. Such reports would ideally summarise AMI's key achievements, challenges, and strategic objectives, thereby enhancing transparency and stakeholder engagement.

A dedicated section of the website is allocated to the Centre for Quality Assurance in Education (CQAE), where the Centre's mission and objectives are outlined. This section also includes key quality assurance documents, such as the Quality Assurance Manual, as well as other relevant materials.

Considerations:

The expert panel positively assesses the establishment of a structurally coherent quality assurance (QA) system at AMI, which encompasses departmental QA coordinators, faculty-level QA committees, and the Centre for Quality Assurance in Education (CQAE). These bodies operate with clearly defined roles and responsibilities, demonstrating interrelated functions in organising and implementing the institution's QA processes.

It is also commendable that AMI's QA policy not only focuses on the continuous improvement of academic programs but also emphasises the principles of transparency, accountability, and stakeholder engagement.

The expert panel highlights as a strength the application of a diverse range of QA tools, such as classroom observations, student and employer surveys, focus group discussions, and program reviews, which contribute to the establishment of a sustainable quality culture within the institution.

At the same time, the panel emphasises the importance of targeted enhancements to further increase the system's effectiveness. It recommends strengthening evidence-based decision-making practices by ensuring that the results of surveys, observations, and classroom monitoring are not only summarised but also regularly analysed to inform the development and implementation of actionable plans. This approach would foster a more comprehensive application of the PDCA (Plan–Do–Check–Act) cycle and deepen the institution's culture of quality management.

The panel also underscores the importance of expanding the scope of QA processes beyond the educational domain. It recommends broadening QA functions to include areas such as governance, resource allocation, international cooperation, and strategic planning. This would promote a more institution-wide, integrated approach to quality assurance, better aligned with AMI's overall development goals.

Furthermore, the panel advises enhancing the involvement of external stakeholders, particularly employers, in QA processes. In addition to survey-based feedback, the institution should consider developing mechanisms such as sectoral consultations, joint educational initiatives, and regular tracking of graduate employment outcomes. These actions would contribute to aligning educational offerings with labour market demands and enhancing graduate competitiveness.

Summary:

Considering that since the previous accreditation cycle, AMI has implemented significant improvements toward establishing a quality culture, including the development and operationalization of regulatory documents and a Quality Assurance Manual serving as practical guidelines; the introduction of data collection and analysis mechanisms that inform continuous improvement actions; and the active engagement of stakeholders in QA processes, ensuring inclusiveness and effective feedback loops, the expert panel concludes that AMI meets the requirements of Criterion 10.

Conclusion:

The compliance of AMI institutional capacities with the requirements of Criterion 10 is **satisfactory**.

EVALUATION ACCORDING TO ACCREDITATION CRITERIA

CRITERION	CONCLUSION
<i>I. Mission and Purposes</i>	Satisfactory
<i>II. Governance and Administration</i>	Unsatisfactory
<i>III. Academic Programs</i>	Satisfactory
<i>IV. Students</i>	Satisfactory
<i>V. Faculty and Staff</i>	Satisfactory
<i>VI. Research and Development</i>	Satisfactory
<i>VII. Infrastructure and Resources</i>	Satisfactory
<i>VIII. Societal Responsibility</i>	Satisfactory
<i>IX. External Relations and Internationalization</i>	Unsatisfactory
<i>X. Internal Quality Assurance System</i>	Satisfactory

Date: 19.06.2025

Hermine Grigoryan
Head of the expert panel

APPENDICES

APPENDIX 1.CVS OF EXPERT PANEL MEMBERS

Hermine Grigoryan - in 1992 graduated from the Department of Physics and Mathematics, Vanadzor State Pedagogical Institute. She is a Candidate of Sciences in Physics and Mathematics (2008), an Associate Professor (2011). Since 1992 she has been teaching at Vanadzor State University (VSU). Since 2014 she has been the Dean of the Faculty of Physics and Mathematics, VSU. She teaches "Mathematical equations", "Differential equations", "Complex analysis", "Differential and integral calculus for functions of a single variable", "Differential and integral calculus for functions of multiple variables". Her scientific interests cover the questions of boundary value of anisotropic plates of variable thickness.

Nino Chichivishvili- in 2008 completed her medical education at Tbilisi State Medical University, earning her Doctor of Medicine (MD) degree. Between 2008 and 2015, she pursued a clinical residency in Obstetrics and Gynecology. Since 2017, she has been enrolled in the PhD program in Clinical and Translational Medicine at Tbilisi State University. Her clinical experience includes service as a resident physician at the "New Life" Clinic from 2008 to 2015, and as an emergency care physician from 2008 to 2013. From 2017 to 2020, she served as Dean of the Faculty of Medicine at Geomedi University. Subsequently, she held several leadership positions, including Head of the Department of Continuing Medical Education (2020–2022) and Deputy Director of the Department of Residency and Professional Development (2022–2023). Since 2023, she has been leading the Quality Assurance Department at “Hera 2011” Clinic and, as of 2024, also serves as Quality Manager at the neonatal clinic “QIRON+”. In addition to her administrative roles, she is an international accreditation consultant and Founding President of the Women in Science Association. In 2024, she joined BTA Academy as a faculty member, teaching Microbiology and Pathology.

Rolf Heusser- in the late 1980s earned his Master’s degree in Public Health from the University of California, Berkeley. Until 2024, served as a Senior Research Fellow at the Institute of Epidemiology, Biostatistics, and Prevention at the University of Zurich. From 2000 to 2010, he was the Director of the Swiss Agency for Accreditation and Quality Assurance (AAQ). Between 2004 and 2014, he held the position of President of the European Consortium for Accreditation in Higher Education (ECA). From 2010 to 2018, he served as Director of the Swiss National Cancer Registry. Dr. Heusser has provided consultancy and expert analysis for multiple national accreditation agencies, including those in Luxembourg, Germany, France, the United Arab Emirates, and other countries. He has also held academic teaching appointments at ETH Zurich and other higher education institutions. In recognition of his excellence in teaching, he was awarded the “Best Lecturer” distinction by ETH Zurich in 2018.

Naira Hunanian- graduated with distinction from the Bachelor's program in Biology at Yerevan State University in 2002, and subsequently earned her Master's degree with honors from the same faculty in 2004. In 2013, defended her PhD thesis in the field of Biochemistry, Molecular Biology, and Physiology, earning the academic degree of Candidate of Biological Sciences. From 2004 to 2008, worked as a Junior Research Fellow at the UNESCO Medical Biology Center. In 2006–2007, undertook a research fellowship at the University of California, San Francisco, serving as a Junior Specialist in the Department of Cell and Tissue Biology. She has held various academic appointments, including Lecturer at Yerevan State Medical University named after Mkhitar Heratsi (2013) and Chair of the Department at the University of Traditional Medicine (2017–2024), where she also taught undergraduate and graduate courses. Since 2022, she has served as a Senior Research Fellow at the Institute of Physiology of the National Academy of Sciences of Armenia. In parallel, she continues teaching at Mkhitar Gosh University and the University of Traditional Medicine. In 2005, she was awarded a scientific research grant by the U.S. Civilian Research and Development Foundation (CRDF)

Astghik Hambardzumyan- in 2024 earned her Bachelor's in Biology from the Faculty of Biology at Yerevan State University (YSU). She is currently pursuing a Master's degree at the same institution. Since 2024, she has been employed at Yerevan State University as a Senior Laboratory Assistant. In 2023, she was awarded first place in the national competition “100 Ideas for Armenia”, in the category of Agricultural and Biological Sciences. Has actively participated in various local and international scientific conferences, including Biochemistry is My Profession, AI Conf Armenia, DataFest 2023, and Feminno 2023. In 2024, co-authored a scientific publication dedicated to exploring the antibacterial, hemolytic, and anticancer properties of biologically derived silver nanoparticles.

APPENDIX 2. SCHEDULE OF SITE VISIT

	April 28, 2025	<i>Start</i>	<i>End</i>	<i>Duration</i>
1	Meeting with the Rector	09:30	10:20	50 min
2	Meeting with the head of the academic department	10:30	11:20	50 min
3	Meeting with the Self-Evaluation Group members	11:30	12:20	50 min
4	Break, expert group discussions	12:30	13:20	50 min
5	Meeting with the Governing Board of the Institute	13:30	14:20	50 min
6	Meeting with Employers	14:30	15:20	50 min
7	Document review and closed expert meeting	15:30	16:00	30 min

	April 29, 2025	<i>Start</i>	<i>End</i>	<i>Duration</i>
1	Meeting with Deans	09:30	10:20	50 min
2	Meeting with Heads of chairs	10:30	11:30	60 min
3	Meeting with teaching staff representatives (8-10 persons)	11:40	12:40	60 min
4	Break, expert group discussions	12:50	13:50	60 min
5	Meeting with students (8-10 persons)	14:00	15:00	60 min
6	Meeting with Student Council and Scientific Student Society representatives	15:20	16:00	40 min
7	Meeting with alumni	16:10	17:00	50 min
8	Resource observation	17:10	18:40	90 min
9	Document review and closed expert meeting	17:40	19:00	80 min

	April 30, 2025		<i>Start</i>	<i>End</i>	<i>Duration</i>
1	Meeting with the Head(s) of the "Dentistry" academic programs	Meeting with the Head(s) of the "General Medicine" academic programs	09:30	10:20	50 min
2	Meeting with the teachers of "Dentistry" programs	Meeting with the teachers of "General Medicine" programs	10:30	11:20	50 min
3	Meeting with the students of "Dentistry" programs	Meeting with the students of "General Medicine" programs	11:30	12:30	60 min
4	Break, expert group discussions		12:40	13:40	60 min
5	Meeting with heads of administrative units (Accountant, Librarian, HR Officer, Career Specialist, Internship Supervisor)		13:50	14:50	60 min

6	Open meeting	15:00	15:40	40 min
7	Meeting with the staff of the Center for Quality Assurance in Education	15:50	16:50	60 min
8	Document review and closed expert meeting	17:00	19:00	120 min

	May 1, 2025	<i>Start</i>	<i>End</i>	<i>Duration</i>
1	Document review and expert discussion	10:00	11:00	60 min
2	Meeting with selected group chosen by the expert panel	11:10	11:40	40 min
3	Document review and expert discussion	11:50	12:50	60 min
4	Break, expert group discussions	13:00	14:00	60 min
5	Meeting with the university leadership	14:10	14:40	30 min

APPENDIX 3. LIST OF DOCUMENTS OBSERVED

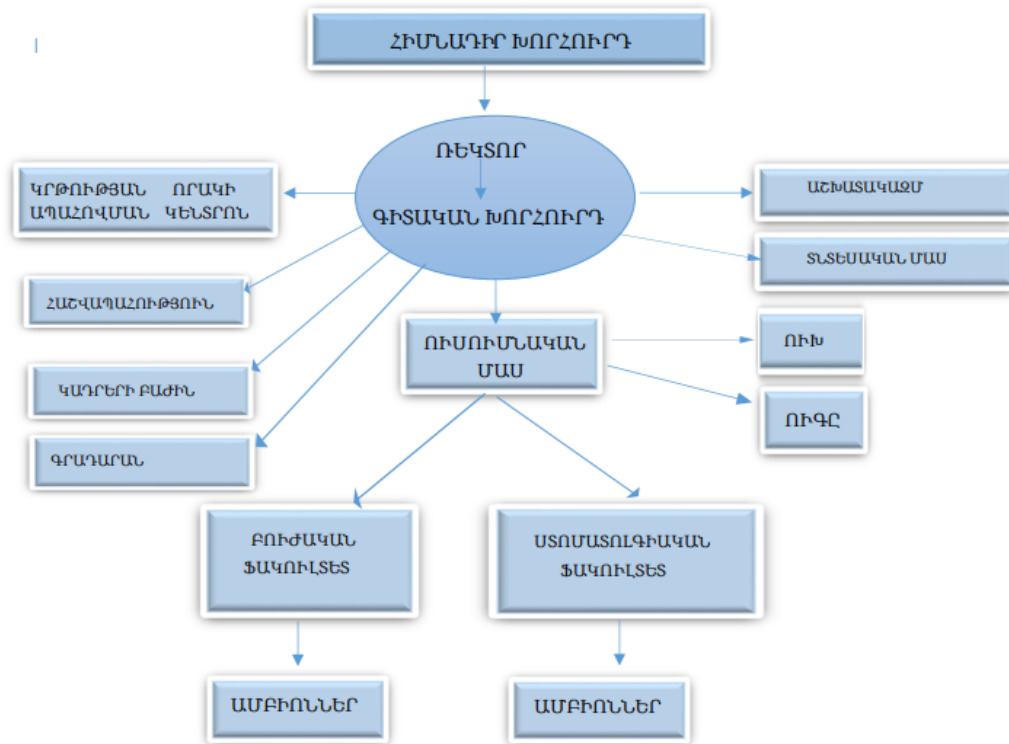
	Name of the document	Criteria
1.	Code of Ethics	2
2.	Regulatory framework governing the activities of the Rector's advisory board (if available)	2
3.	Minutes of council/committee meetings	2
4.	Faculty annual action plan	2
5.	Minutes of Faculty Council and Curriculum/Methodological Committee meetings	2
6.	Annual and quarterly (or monthly) reports on faculty activities	2
7.	Department (Chair) annual activity plan	2
8.	Minutes of departmental meetings	2
9.	Annual and quarterly (or monthly) reports on departmental activities	2
10.	Academic programs (curricula) for each specialty	3
11.	Student academic transcripts	3
12.	APs descriptors (syllabi)	3
13.	Student assessment regulations and criteria	3
14.	Clinical subject course packages	3
15.	Samples of final examinations/tests	3
16.	Academic logs/registers	3
17.	Regulation on awarding named (merit-based) scholarships (if applicable)	4
18.	"Student Handbook"	4
19.	Individual student files	4
20.	Schedules of class observations and peer reviews	5
21.	Departmental meeting minutes on the discussion of class observation outcomes	5
22.	Documentation related to faculty incentives and recognition	5
23.	Guidelines for financing faculty publications	5
24.	Completed class observation forms	5
25.	Faculty professional development schedules	5
26.	Professional development (training) packages	5
27.	Supporting documentation for the encouragement of young faculty members following the adoption of the "Procedure for Ensuring and Encouraging the Professional Advancement of Young Lecturers"	5
28.	Institutional cooperation agreements with research centers or universities	6
29.	Information on faculty members who are also affiliated with research institutions in addition to teaching at the university	6
30.	Proceedings of annual interuniversity student scientific conferences	6
31.	Number of organized interuniversity scientific conferences	6

32.	Number of articles published in international peer-reviewed journals	6
33.	Annual report of the university librarian	7
34.	Documentation supporting the procurement of professional/academic resources	7
35.	Employer survey analysis for the 2023–2024 academic year	10

APPENDIX 4. RESOURCES OBSERVED

- Auditoriums
- Computer classrooms
- Laboratories
- Departments
- Library
- Anatomical museum
- Reading room

APPENDIX 5. ORGANIZATIONAL STRUCTURE OF THE EDUCATION INSTITUTION



APPENDIX 6. LIST OF ABBREVIATIONS

ANQA-National center For Professional Education Quality Assurance Foundation

AMI- Armenian Medical Institute

AC- Academic Programme

TLI-Tertiary Level Institutions

QA- Quality Assurance

NQF-National Qualification Framework

SSQ- Sectoral Scope of Qualifications

SP- Strategic plan