

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



**EXPERT PANEL REPORT
INSTITUTIONAL ACCREDITATION OF
"GRIGORIS" MEDICAL-HUMANITIES COLLEGE**

Yerevan – 2025

INTRODUCTION

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

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

The accreditation process was funded by the College.

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

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

Context of the Evaluation of the VET Institution's Activities

Background and History of the Institution

"Grigoris" Medical-Humanities College LLC was established in 1995 as a result of the structural reorganisation and separation from "Yerevan University of Economics and Law" LLC.

The college's mission is "to prepare professionals whose knowledge, competencies, and practical skills will enable them to respond effectively to existing challenges through appropriate actions and to contribute to the development and strengthening of the economy of the Republic of Armenia."

The institution is currently undergoing its second cycle of institutional accreditation. Following the previous accreditation, the college was granted conditional institutional accreditation for 2 years.

Development Directions and Educational Programmes

The college offers four academic programs aligned with Level 5 of the National Qualifications Framework (NQF), delivered through both basic and secondary education. The programs include the following specialisations: Nursing, Midwifery, Pharmacy, and Dental Technology. Currently, the institution has 208 enrolled students.

In addition, the college offers a preparatory course in Nursing, which in 2024 was attended by 11 students from India and Sri Lanka. The college also received applications from the Republic of Ghana; however, the applicants were unable to arrive in Armenia due to visa-related constraints.

The college's academic staff comprises 34 lecturers, of whom 27 are full-time and 7 are part-time. 18 lecturers possess relevant professional practice experience. Among them, 32 hold higher education degrees, while 2 have secondary professional qualifications. Notably, one of the college's graduates currently teaches at the institution.

According to the 2023–2024 graduate tracking data, out of 73 graduates, 3 continued their studies in higher education institutions in relevant specialities, 59 are employed- 48 within their field of specialisation and 11 outside their profession, while 11 graduates are currently unemployed.

SUMMARY OF EVALUATION

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

During the evaluation process, the expert panel considered the College's legal status as an LLC, as well as its role and significance in preparing mid-level medical professionals in the Republic of Armenia's healthcare sector. The panel also noted that in 2023, the College underwent the institutional accreditation process, as a result of which it was granted conditional institutional accreditation for a two-year period.

Following the previous accreditation phase, the College had a comparatively short timeframe to address the shortcomings identified in the expert report and implement the recommendations. During this period, the institution undertook certain actions, particularly in developing its documentation base, engaging external stakeholders, and improving available resources. However, the expert panel observed that several recommendations from the previous accreditation have either not been fully implemented or remain at an early stage of implementation.

The main challenges faced by the College include:

- the absence of a long-term institutional and business development strategy,
- the lack of clearly defined policies and mechanisms for the planning and management of material and financial resources, and
- the absence of a systematic approach to short-term planning.

The College has taken steps to improve its governance by developing relevant regulations, formats, and procedures. Nevertheless, decision-making processes are not yet based on systematic analysis, and stakeholder involvement in planning remains limited.

The linkage between annual plans, reports, and strategic goals is weak, and periodic indicators are not systematically applied within the evaluation mechanisms. Management decisions are largely situational, and there is a lack of well-developed mechanisms for collecting and analysing data necessary for evidence-based decision-making.

Although data are being collected through the quality assurance system, the system itself is still in formation and lacks a comprehensive toolkit for planning and evaluating results aligned with the Strategic Plan. Institutional reports are predominantly descriptive, with limited analytical components, hindering the planning of improvements based on evidence and analytical findings.

The academic programs are designed in accordance with state standards and have been revised in response to employer feedback. However, the intended learning outcomes do not always fully reflect the module's content requirements or ensure comprehensive integration of knowledge, skills, and competencies.

The assessment policy primarily defines the forms of assessment and quantitative grading scales; however, clear assessment criteria, rubrics, and comprehensive mechanisms for evaluating practical competencies, aligned with the nature of medical education, have not yet been introduced.

The faculty comprises professionals with practical experience, and there is a positive trend toward rejuvenation. Nevertheless, a systematic policy for developing teaching methods, professional training, and the internal exchange of pedagogical experience has not yet been established. The learning and teaching process remains predominantly teacher-centred, with limited use of formative assessment methods and insufficient application of student-centred teaching approaches aligned with learners' needs.

The learning environment is equipped with the essential resources; laboratories and professional classrooms are being gradually upgraded. However, the College lacks a sustainable financial policy to support ongoing resource modernisation. Most investments are funded by the founding organisation, without a defined strategy for diversification of financial sources.

Reports indicate overall user satisfaction with educational resources; however, there is no systematic analysis of resource depreciation, renewal periodicity, or optimal allocation.

Therefore, considering the improvements in resources made since the previous accreditation, the recruitment of faculty with practical professional experience, and the inclusion of tasks aimed at developing practical skills within the academic programmes, it can be stated that the College ensures the credibility of the awarded qualifications.

The College has undertaken several initiatives to internationalize and has established partnerships with several local and international colleges. However, there is no defined strategy specifying the expected outcomes of such collaborations or measurable indicators to evaluate their effectiveness. Moreover, the insufficient level of foreign language proficiency among staff and students remains an obstacle to ensuring international mobility and participation in collaborative programmes.

Research activity is identified as a priority in the College's strategic documents; however, research components are not yet systematically integrated into the academic programs. The research assignments students undertake do not sufficiently foster the development of analytical, independent, and critical thinking skills.

The faculty's academic and research activities are not directly linked to students' learning processes or to methodological initiatives aimed at improving the quality of education. Within the incentive and

promotion system, research initiatives that enhance teaching and learning are not distinguished or rewarded.

The College ensures transparency and accessibility of information through its official website, social media platforms, and partner networks. Nevertheless, a communication strategy with society and clear mechanisms for organizing feedback have not yet been developed.

The expert panel notes that, despite having only a two-year period following the previous conditional accreditation, the College has initiated improvement processes across all key areas. Building on the recommendations from the previous accreditation, the institution has implemented practical improvements; however, the management and long-term development systems are not yet fully established.

To ensure sustainability and continuity of improvements, it is necessary for the College to develop:

- a more result-oriented and strategic management system,
- effective tools for continuous quality monitoring of educational processes, and
- a policy for sustainable resource development.

These elements will serve as a foundation for the full implementation of the institution's mission and strategic objectives, as well as for the College's stable and continuous development.

Strengths of the Institution:

1. The professional engagement and employability of the college's graduates in the local labor market.
2. The active involvement of students in decision-making processes related to their academic and institutional experience.
3. The continuous enhancement of institutional resources aimed at developing students' practical competencies.
4. The increased involvement of lecturers with professional experience in the teaching and learning process.
5. The expansion of local and international partnerships to facilitate the exchange of best practices and experience.
6. The active collaboration with healthcare institutions and pharmacy networks for the organisation of student internships and clinical placements.
7. The effective use of digital and information platforms to ensure procedural transparency, external accountability, and access to institutional documentation.

Weaknesses of the Institution:

1. The absence of a long-term business strategy and financial policy aimed at sustainable institutional development.
2. The inefficient distribution of responsibilities in academic program management, as well as the ineffective implementation of program monitoring and improvement functions within the departments.
3. The insufficiency of assessment mechanisms and tools aligned with the specific requirements of medical education.
4. The limited mechanisms for faculty mentoring and dissemination of best teaching and professional practices.
5. The weak level of horizontal collaboration among structural units and the limited analytical nature of internal reports.
6. The incomplete application of the PDCA cycle within the college's quality management processes.
7. The absence of a clear research orientation and the limited integration of analytical and innovative components within academic programs.
8. The ineffectiveness of mechanisms for collecting and regularly updating data on graduates' career progression and professional pathways.

Main recommendations:

Data-Driven Management

1. Clarify the college's mission, emphasising its role and contribution within the medical and healthcare sectors, while taking into account the expectations of key stakeholders.
2. Define clear and measurable Strategic and Operational Goals aligned with the institution's development directions and available resources, to demonstrate the college's competitive advantages.
3. Introduce a management business model oriented toward the college's long-term development, encompassing governance, resource planning, academic program management, and implementation of strategic objectives.
4. Systematize academic program management functions, clearly delineating the roles and responsibilities of program coordinators and department heads.

5. Establish mechanisms to strengthen horizontal linkages and interdepartmental coordination, ensuring coherence across institutional processes.
6. Develop and adopt a financial resource allocation and management policy to ensure effective financial risk management and the sustainability of the college's long-term development.
7. Introduce short-term annual planning mechanisms, aligning them with the institution's long-term objectives and establishing clear performance indicators for their evaluation.
8. Continuously and systematically collect data on the effectiveness of academic programs, applying a sound methodology to demonstrate the credibility of awarded qualifications and the competitiveness of graduates.
9. Regularly evaluate the effectiveness of implemented changes, basing management decisions on reliable and evidence-based data.
10. Develop a clear annual quality assurance work plan, defining key directions for needs assessment and corresponding evaluation tools.
11. Orient the activities of the Quality Assurance system and the QA responsible's functions toward needs identification, proposal of improvement directions, and their evaluation, without direct involvement in the organisation and implementation of institutional processes.
12. Review and enhance the needs assessment questionnaires, expanding the scope of open-ended questions to enable qualitative analysis and ensure that stakeholder needs and feedback inform management decision-making.

Credible Awarding of Qualifications

13. Develop comprehensive implementation packages for each academic program, including detailed descriptions of the required modular curricula, course syllabi and thematic calendars, study plans, student assignments, and teaching and learning materials.
14. Introduce institutional approaches for selecting interactive teaching and learning methods appropriate for medical education, along with mechanisms for identifying and disseminating internal best practices in pedagogy.
15. Implement assessment methods tailored to the specificities of medical education, incorporating clear performance criteria to ensure comprehensive evaluation of students' competencies and the provision of constructive feedback.

16. Define appropriate assessment tools for each learning outcome within modular programs, ensuring smooth progression between outcomes and enhancing the overall effectiveness of the learning process.
17. Establish continuous program monitoring mechanisms based on analysis of graduate needs and employer expectations, to ensure the ongoing alignment of academic programs with labor market demands.
18. Develop mechanisms for the dissemination of the best internal practices among academic staff, based on the analysis of lesson observation results, to foster experience sharing and professional growth.
19. Develop a long-term financial policy aimed at ensuring financial stability, grounded in the strategic priorities for the development of academic programs.
20. Introduce mechanisms for diversifying financial resources, including participation in grant programs, organization of professional sector-specific training courses, and the creation of alternative income-generating activities.

Long-Term Development

21. Establish systematic mechanisms for the regular monitoring and updating of graduate employability and professional progress to evaluate the alignment of graduates' competences with labour market requirements.
22. Promote and implement activities supporting students' career development, aimed at enhancing their transferable skills and professional readiness.
23. Clarify the objectives and assessment criteria of student research assignments, emphasising the development of professional thinking and fostering independent reasoning.
24. Introduce mechanisms linking academic staff research activities with the teaching and learning process to strengthen research-based education.
25. Organise activities aimed at transferring knowledge and values to society, considering the sector-specific characteristics of the college.
26. Ensure the availability and completeness of the official website's English version to improve information accessibility for international applicants and enhance opportunities for international collaboration.
27. Define clear expectations from external and international partnerships by developing measurable indicators to assess their effectiveness and impact.

28. Clarify the scope of responsibilities for external relations and include relevant functions in the official job descriptions of the respective staff members.
29. Continuously improve foreign language proficiency among internal stakeholders to promote active participation in international mobility programmes and to enable effective use of professional foreign-language literature.
30. Take proactive steps toward participation in Erasmus+ programmes to enhance staff capacity-building opportunities and foster cooperation with peer institutions for comparative analysis and localisation of best practices in educational programme development.

Gayane Avetisyan, Chair of Expert Panel

15.08.2025

DESCRIPTION OF EXTERNAL REVIEW

COMPOSITION OF EXPERT PANEL

External evaluation of the institutional capacities of "Grigoris" Medical-Humanities College was carried out by the following expert panel.

1. **Gayane Avetisyan** – PhD in Geographical Sciences, Associate Professor, Head of the Quality Assurance Department at Shirak State University, Chair of the Expert Panel.
2. **Roza Grigoryan** – Head of the Department of Pharmaceutical and Dental Technology Professional Modules at Kotayk Regional State College, Member of the Expert Panel.
3. **Arshak Markosyan** – Lecturer at the Armenian Medical Institute, Member of the Expert Panel.
4. **Angelina Tonoyan** – Student at Kotayk Regional State College, Student Member of the Expert Panel.

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

The works of the expert panel were coordinated by Meri Barseghyan, specialist at the Policy Development Department of the National Center for Professional Education Quality Assurance Foundation.

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

PROCESS OF THE EXTERNAL REVIEW

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

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

After making the decision on accepting the application, an agreement was signed between ANQA and the College. The timetable of activities was prepared and approved.

Self-evaluation

The Institutional Capacity Self-Evaluation Report of "Grigoris" Medical-Humanities College was submitted on May 8, 2025. The self-evaluation process was carried out with the participation of the institution's management team, administrative, academic, and support staff, students, and an external stakeholder.

Preparatory phase

The Expert Panel, having reviewed the VET's self-evaluation report and the accompanying package of documents, conducted a preliminary evaluation in accordance with the prescribed format. As part of

this process, the Panel prepared a list of additional documents requiring further examination, as well as identified key issues and questions, indicating the respective structural units or target groups to be addressed. Subsequently, the Expert Panel consolidated the results of the preliminary assessment and developed a detailed plan and schedule for the site visit.

Preparatory visit

Before the site visit, a preparatory visit to the college was conducted on June 12, 2025. The ANQA coordinator, the head of the institutional program accreditation department and the head of the expert panel were present at the meeting. During the meeting, the schedule of the site visit was introduced and agreed upon with the college. Additionally, the meeting participants discussed and mutually agreed on decisions regarding the technical, organisational, and information aspects of the site visit, as well as the behaviour and ethical norms of the participants.

Site visit

The expert panel site visit took place from June 25-27, 2025. During the week preceding the site visit, the members of the expert panel and the coordinator visited the college, observed its infrastructure and resources, conducted class observations, and reviewed exams. Then the experts and the coordinator had a closed meeting. The purpose of the meeting was to identify the strengths and weaknesses of the college in relation to the standards, clarify the questions to be asked of the target groups, and discuss the meeting procedure and next steps.

The site visit began and concluded with meetings with the College's director. All participants in the meetings were randomly selected from a pre-provided list. All scheduled meetings were held. During the visit, the expert panel reviewed documents.

At the end of each working day, the expert panel held closed meetings to discuss the results of the interim expert assessment. At the conclusion of the visit, the main results were summarised.

The expert panel reached the conclusion on the criteria through discussions and analyses by all members, always applying the principle of consensus.

Expert panel report

The members of the Expert Panel, together with the ANQA Coordinator, prepared the preliminary version of the Expert Panel Report, which was reviewed and agreed upon by the experts. The draft report was provided to the College on August 01, 2025. On August 4, the college submitted its agreement with the preliminary version of the expert panel report. The Expert Panel subsequently finalised the report, which was approved by the Panel.

Meri Barsegyan

Coordinator of the Expert Panel/ 15.08.2025

EVALUATION ACCORDING TO ACCREDITATION CRITERIA

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