

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



**EXPERT PANEL REPORT  
ON INSTITUTIONAL ACCREDITATION CARRIED OUT AT "MEHRABYAN  
MEDICAL INSTITUTE" LLC MEDICAL COLLEGE**

**Yerevan - 2021**

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## INTRODUCTION

"Mehrabyan Medical Institute" Limited Liability Company College (hereinafter referred to as "MIM" LLC Institutional Accreditation was carried out in accordance with the application submitted by the institution. The institutional accreditation process is coordinated and carried out by the National Center for Quality Assurance of Professional Education (ANQA).

The process of institutional accreditation is organized and coordinated by the National Center for Professional Education Quality Assurance Foundation (ANQA). ANQA is guided by the regulation on "State Accreditation of RA Institutions and their Educational Programs" set by the RA Government on 30 June, 2011 N978 decree as well as by N959-N (30 June, 2011) decree on approving RA Standards for Professional Education Accreditation. The expertise was carried out by the expert panel formed according to the requirements of ANQA Regulation on the Formation of the Expert Panel. The expert panel consisted of 4 local experts.

Institutional accreditation aims not only at the external evaluation of quality assurance but also to the continuous improvement of the institution's management and quality of educational programs. Special emphasis was placed on the existing cooperation between the institution and the employers and the effect of the cooperation on the content of the education. This report includes the results of the evaluation of the College's institutional capacities according to the state criteria and standards for accreditation.

## SUMMARY OF THE EVALUATION

### PEER-REVIEW OF INSTITUTIONAL CAPACITIES ACCORDING TO STATE ACCREDITATION CRITERIA

The expertise was carried out by the expert panel formed according to the requirements of ANQA Regulation on the Formation of the Expert Panel. The evaluation was carried out according to the 10 criteria set by the RA Government on 30 June, 2011 N 959 decree. The evaluation was carried out according to 10 accreditation criteria set by the RA Government decree N959 as of 30 June, 2011.

While carrying out the expertise the expert panel took into consideration that according to the Mission of the "MIM" LLC - "It is a secondary vocational education institution, which aims to train high-quality specialists in the field of health, to create and maintain knowledge among students through secondary vocational education programs, to develop skills and abilities, to generate and strengthen feelings of love and devotion to their chosen profession. . The institution aspires to become an institution that will have effective management for the continuous improvement and internationalization of the quality of education - administration, will have competitive educational programs based on innovation, the latest educational technologies, teaching - the latest teaching methods, will be able to provide high quality secondary vocational education. will be in the educational services provided, will increase the research component in the secondary professional educational programs".

The expert panel notes that the activities of the institution in the field of education, and the policy aimed at it, generally corresponds to the mission adopted by the institution, are in line with the NQF.

The College implements 6 academic programs. At present, the priority areas for the institution are "Pharmacy", "Dental Technician" and "Medical Cosmetology", taking into account the college's plans to attract foreign students. As for other professions, the number of applicants in "Obstetrics" and "Cosmetics and art of cosmetology" specialities has sharply decreased in recent years. It should be noted that in this regard, the institution does not conduct regular studies of the labour market, as a result of which the effectiveness of academic programs in certain specialities is endangered. The expert panel considers it positive that the college is taking steps to improve the APs, thus benchmarking the "Nursing care" AP for the implementation of student exchange programs. Comparing the programs of the benchmarking partner educational institutions revealed the strengths and weaknesses, but it is concerning that no clear changes have been made based on the data obtained. The expert panel positively assessed that as a result of the benchmarking of the "Dental Technician" AP, the practical component was introduced in the final attestation, the student submits his/her work during the final exam. It is advisable for this approach to be continuous and to be applied in other APs.

Since 2006 the institution has been publishing an international medical journal, where the scientific works of health researchers are published. In this regard, the expert group is concerned that the directions of these research articles are not reflected in the relevant APs. The teaching staff co-authored articles with the students, which were also not included in the relevant professional modules. In this context, the expert panel found that the essays assigned to the students of the College, which the institution considers to be independent work containing a

research component, mainly repeat the topics of the course, the college does not set clear requirements for the analytical component.

It is positive that the institution actually seeks to expand its internationalization and activities regarding various collaborations, agreements, carries out benchmarking, but the institution did not conduct studies to expand its international activities and the risk of expanding international relations was not assessed. It refers both financial risks, the risk of material and technical resources, the risk of attracting foreign language specialists.

The expert panel finds that in the current conditions, the resources of the institution generally ensure the implementation of educational programs. It is assessed positively that the institution operates in its own territories. The classrooms and cabinets are generally in good condition, but there is a need for additional classrooms, especially since the educational process at the university is organized in two shifts. In addition, the College uses the resources of its partners to organize the practical laboratory activities defined by the APs. Despite there is a risk that the implementation of research, practices and academic program activities of the institution may be endangered if the cooperation with partners is not continued.

'MIM' LLC, as a commercial organization, pursues the goal of making a profit. The income of the institution is formed mainly from the tuition fees of the students, the income can be diversified at the expense of the "Mehrabyan Scientific-Educational Center" NGO founded by the participants of the college. From 2015-2019 the number of students at the Institution has decreased, and the incomes have decreased accordingly. However, the College did not increase tuition or layoffs to finance its expenses in proportion to its revenue. In this regard, it should be positively assessed that by the decision of the Board of Founders by 2020 The profit generated as a result of the institution's activities was not distributed among the participants. It turns out that retained earnings are an additional source of income in this case and in some ways contributed to the solution of the problem of self-financing. However, the institution intends to increase tuition fees by profession, as a result of which the income of the institution may increase. The panel notes that the college's financial resource allocation policy is not in line with the priorities set by the SP, and research and the internationalization are not financed sufficiently /as priorities of the SP/. It should be noted here that the College plans to attract international foreign students, but the expert group is concerned that the necessary studies and analyzes of the educational needs of international students have not been carried out.

The teaching staff members of the institution are experienced specialists with many years of pedagogical experience (average work experience is 39.2 years). It is true that the average age of teachers teaching at the college has been reduced from 65 to 57, but it is obvious that the institution has a problem with the rejuvenation of the teaching staff and, it seems that the college is not currently taking active steps in this regard. The expert group is also concerned about the small number of staff, so each lecturer of the College mainly teaches 3-6, sometimes even 8 professional modules. In addition, there is a inconsistency between the "module content" and the basic education of a teacher of professional module. Class observations are held in the college, but no problems or needs have been identified. The expert panel singled out that all the responsibilities of the administrative staff of the college are also performed by the members of the teaching staff. In the context of the above-mentioned, the strategic goals of the institution are endangered.

In general, strategic management and planning are not carried out effectively at the institution. It is obvious that the institution has developed and approved procedures and regulations that ensure the management processes, however, management decisions have not been based on clearly analyzed and evaluated data. The expert panel assesses negatively that short-term plans are not made with long-term plan priorities. The reports prepared for their

monitoring are generally descriptive in nature and do not contain qualitative analyzes. Relevant assessments and results to be improved, were not discovered. It turns out that the institution has long-term and short-term plans, but is not able to implement them the way to be able to evaluate the effectiveness of the educational activities of the College, so the effectiveness of the management system is completely endangered.

The institution has developed a quality assurance policy for its academic programs and quality assurance policy and its implementation procedures. The main processes in the institution are in the planning-implementation stage, the period is not over yet, so there are no quantitative-qualitative analyzes, assessments. It should be noted that the assessments were made on the performance of the SP, while the expert group finds that these assessments can not fully reflect the results of the SP performance, as they are problematic in terms of measurability. The institution currently has the task of improving the existing quality assurance mechanisms and tools through conducting surveys, implementing QA benchmarking and in class-observations. The expert panel, referring to each of them, notes that the issues discovered from the surveys questionnaire reef results are not related to the educational process, QA benchmarking has not been done, and the issues identified as a result of the in class-observations have not been analyzed and introduced in the basis of improving APs. The continuous improvements of the educational processes of the institution are not visible yet.

The expert panel positively assesses the policy adopted by the institution to ensure accountability to external "internal stakeholders". Involves employers and graduates in the meetings of the pedagogical council, where they can make suggestions. The college regularly submits various reports, but the panel notes that there is a need to review the framework and the content of the reports submitted, especially in the absence of analysis. The institution has signed cooperation agreements with local and international institutions. The expert panel signs positively that the local structures mainly serve as bases for organizing practical trainings and internships. The college cooperates with the employment agency, as a result of which some graduates got jobs. For international cooperation, the college has agreements with foreign institutions. The specialities "Nursing", and "Dental technicians" are of great interest to international partners. The expert panel finds that there is a problem of raising the level of foreign language knowledge among lecturers and students, especially in the case when the institution strives for internationalization.

#### **Strengths of the College:**

- Clarity of the Strategic goal and objectives
- Benchmarking of the Academic programs /APs - Nursing care, Dental technician/
- Mechanisms for providing students with practical skills.
- Multi-factor system of assessment
- Clear student recruitment mechanisms
- Own building for educational activities
- Use of resources together with partners
- Safe educational environment
- Accountability system
- Wide range of cooperation

#### **Weaknesses of the College:**

- Inefficient strategic management
- Weak planning procedures in the management system
- Absence of the monitoring policy of the long-term and short-term planning
- The absence of clear mechanisms for the need assessment among students and teachers
- Lack of a decision-making mechanism based on reliable data
- Irregular review and improvement of APs
- Lack of participation of external stakeholders in the implementation of the improvement process of the APs
- Low students participation in the research activities
- The workload of the teaching staff
- The shortage of young lecturers in the teaching staff
- Non-regular professional training of lecturers
- Lack of assessment of international students' educational needs
- Weak connection between educational programs and research
- Lack of analytical component in accountability
- Ineffectiveness of planned QA processes

## **Main Recommendations**

### **Mission and Purposes**

- Introduce quantitative and qualitative performance indicators of SP evaluation
- Introduce and implement monitoring mechanisms for performance of the SP
- Introduce effective mechanisms promoting active participation in the development and implementation of the internal and external stakeholders of the institution
- Expand the circle of external stakeholders.

### **Governance and Administration**

- Improve the management system of the institution by facilitating the involvement of external stakeholders in management decision-making
- Develop and implement policies for monitoring long-term, medium-term, short-term plans and mechanisms
- Improve and make strategic planning feasible
- Introduce mechanisms for evaluating the effectiveness of management staff
- Have sound data when making decisions
- Improve the accountability mechanisms, align with long-term and short-term planning, as well as make them qualitative.
- Introduce effective data collection mechanisms

### **Academic programmes**

- Carry out regular monitoring of all APs and improvement in line with changes in state educational standards and labor market requirements, as well as based on analysis of benchmarking results
- Carry out horizontal and vertical integration of pre-requisite subjects in all APs
- Plan and implement activities aimed at introducing new methods of teaching knowledge, skills, paying special attention to the introduction of interactive learning methods and assignments for independent work

- Develop effective mechanisms for direct involvement of external stakeholders (employers) of AP review processes (providing direct employer-AP connection)
- Improve the assessment system and toolkit (selection of assessment methods according to the expected outcomes), paying special attention to the assessment of competencies and practical skills component.

### **Students**

- Develop mechanisms for active involvement of students in Student Council activities
- Develop and implement new mechanisms to engage students in research and motivate students, as well as assignments that develop students' analytical skills
- Improve the content of student needs identification questionnaires, including questions about students' educational needs and counselling services.

### **Faculty and Staff**

- Take steps to ensure regular pedagogical-professional training of teaching staff, consistently overseeing their planning, implementation and evaluation of results
- Develop and introduce effective mechanisms to encourage teachers, especially young staff members
- Improve the tools of teacher evaluation and needs identification (surveys, classes), so that the implemented measures contribute to the objective identification of existing problems
- To engage teaching staff with specialists involved in practical, laboratory work (for example, using the resources of the graduates of the university)
- Take steps to ensure the replacement of teaching staff

### **Research and Development**

- Develop and introduce mechanisms to encourage student research activities
- Develop and implement a policy of allocating funds to encourage research activities
- Create similar conditions for all the students from different APs of the College to conduct research
- Develop and implement policy and procedure with a plan for implementing the research activities according to the purpose of the SP
- Develop and implement effective mechanisms for interconnecting research activities and the educational process
- Introduce an assignment mechanism to help students develop analytical and research skills
- Improve student topics by including topics from the labour market.

### **Infrastructure and Resources**

- Improve building conditions, increase professional classrooms/cabinets
- Equip professional laboratories
- Establish a joint resource management strategy with employers
- Align the distribution of financial resources aligned with the objectives of the SP
- Introduce an automated documentation system

### **Societal responsibility**

- Clarify the name of the institution in the toolkit presented to external stakeholders: online platforms, printed materials, contracts, etc.
- Review the reporting dimensions so that it clearly reflects the purpose, task, measures taken, performance evaluation, problem identification and planning for future activities
- Introduce mechanisms to provide feedback to the public
- Develop sustainable mechanisms for knowledge transfer to the society
- Clarify the objective information about the institution on on-online platforms

#### **External Relations and Internationalization**

- Include the work done its analysis and the assessment of the current challenges in the report of the Department of Internships, Employment and Internationalization of International Relations
- Develop and introduce mechanisms to facilitate students and teaching staff mobility
- Introduce mechanisms to increase the effectiveness of benchmarking policy
- Develop and implement measures aimed at raising the level of knowledge of foreign language / English / among teachers and students
- Develop mechanisms aimed at strengthening cooperation with employers and international partners.
- Assess existing needs for international student enrolment and clearly plan events to be implemented

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

- Clearly plan QA processes based on the SP and QA procedures to achieve the set goals
- Introduce mechanisms to ensure the participation of internal and external stakeholders in QA processes
- Improve data collection mechanisms, including questionnaires, covering all areas of the institution
- Develop alternative problem-solving mechanisms
- Create capacity-building opportunities for QA managers
- Improve the effectiveness of QA policy
- Introduce best practices and dissemination mechanisms
- Introduce the analytical component in all processes of the institution and ensure their transparency

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**Armehuni Mheryan**

**February 12, 2021**

## DESCRIPTION OF EXTERNAL REVIEW

### PROCESS OF THE EXTERNAL REVIEW

The Institutional Accreditation process of the "Mehrabyan Medical institution" LLC Medical College was conducted by the following members of the expert panel:

- **Armenuhi Mheryan**, Lecturer of the "Finance" Chair of the Armenian State University of Economics, Candidate of Economics, Associate Professor.
- **Shushanik Afrikyan**, Yerevan State Medical University after M. Heratsi, Associate Professor, Department of Pharmacy
- **Varduhi Avetisyan**, Deputy Director for Educational Affairs at Yerevan Armenian-American "Erebuni" State Medical College,
- **Lilit Mkrtchyan**, Student at the Department of Sports Pedagogy (Artistic Gymnastics) of the State Institute of Physical Culture of Armenia.

The composition of the expert panel was agreed with the educational institution. The work of the expert panel was coordinated by Gayane Ananyan, ANQA Specialist of the Program-Institutional Expertise Division.

All members of the panel, including the coordinator, have signed confidentiality agreements.

### PROCESS OF THE EXTERNAL REVIEW

#### **Application for state accreditation**

The College applied for institutional accreditation by submitting the application form, the copies of the license and respective appendices to ANQA (14.05.2020).

The ANQA Secretariat checked the data presented in the application form and attached documents as well as in the electronic survey of ANQA.

After making the decision on accepting the application (01.08.2020) a trilateral agreement was signed between ANQA and College. The timetable of activities was prepared and approved.

The self-analysis of the College was carried out by a working group formed by the order of the director of the institution.

#### **Self-evaluation of the College**

The MIM LLC Medical College presented the self-evaluation report on 25.08.2020. The self-evaluation was conducted by the employees of the Institution: teaching and supporting staff members, and management representatives. The external stakeholders and students /internal stakeholders/ did not participate in the process. The self-evaluation report was mainly descriptive and general which sometimes did not allow the expert panel to understand and assess the real situation in the College during the preliminary evaluation process. Each criterion was analyzed by 2 employees, taking into account the employee's work orientation and the requirements of the criteria.

The self-analysis report was mainly descriptive-general, which sometimes did not allow the experts to understand, during the preliminary assessment, to correctly assess the real situation in the college.

### **Preparatory phase**

ANQA coordinator observed the report with the attached documents to check its alignment with ANQA technical requirements.

Then the coordinator sent the self-evaluation to the expert panel the composition of which was agreed upon with the College. The self-evaluation report and all the attached documents were provided to the expert panel for preliminary evaluation, the composition of which was previously agreed with the college and approved by the order of the ANQA Director.

In order to prepare the expert panel for the work, to ensure the efficiency of the processes, trainings were conducted on the following topics:

- main functions of the expert panel members
- the ethics and technique of conducting meetings, asking questions
- the specific features and peculiarities of vocational education and training /VET/ and interpretation of accreditation criteria in accordance with the secondary professional field,
- Preliminary assessment /desk-review process/ as a stage of preparation for the expert report, the main requirements for the expert report.

Having observed the self-evaluation and documents of the College the expert panel conducted the initial evaluation according to the format preparing the list of questions for different target groups, departments and also list of additional documents needed for observation.

During the preliminary evaluation process, the expert panel conducted online class observations

Within the scheduled time the expert panel summarized the results of the initial evaluation and formed a time schedule of the site-visit. According to the ANQA manual on the conduction of expertise the intended meetings with all the target groups, close and open meetings, document revision included in the time schedule, the resource observations was carried out through video recording.

After identifying the main issues and the documents to be observed the expert panel clarified the issues discussed during the meetings. During the regular meetings, the questions on each criterion were discussed, the preliminary visit package of the expert panel was drawn up. The package contained the schedule of the meetings, the issues and the questions to be studied that are clarified by the target groups, and the list of additional documents that needed to be observed during the expert online visit. From the lists submitted by the institution - the representatives of the teaching, student staff, graduates, the employers were selected, who were to participate in the meetings.

### **Preliminary visit**

The preliminary online visit was held two weeks prior of the site visit. The head of the Institutional and Programme Accreditation division and the Coordinators of ANQA participated in the meeting. During the meeting the online site-visit schedule, the list of the additional documents, the peculiarities of organizing preparations for online expert site-visit under the

pandemic /provision of videos by the College, where the main resource base of the College will be seen: classrooms, laboratories, libraries, etc., the online provision of the additionally required documents at the proper time, ensuring the technical rules of online expert site-visits in the online environment: turned on cameras, the cameras are connected, the ability to see the whole room in the case of one common camera, the exclusion of the presence of persons other than the target groups in the room, etc.). / were presented to College representatives.

#### **Expert online site-visit**

The expert online-site visit took place during 9-12 of November, 2020. The expert online site-visit was planned to be within 3 days, however, in the case of online conditions, the three-day online expert visit became a four-day one, maintaining the same workload of experts.

According to the timeline the expert online site-visit started with the close meeting of the expert panel, the aim of the meeting is to discuss and coordinate the scope of the expert evaluation, the issues to be studied during the online visit, the strengths and weaknesses of the College according to the criteria, the procedure of focus group meetings, clarify the further steps.

ANQA coordinator and all the experts of the panel participated during the site-visit.

The expert panel online site-visit started and ended up with the meetings with the management of the YSCI. All the meetings are implemented according to the Schedule, besides the open meeting. According to the scheduled timeline, the expert panel implemented meetings with all the representatives of the departments of the College.

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

Peer review was carried out within the framework of state accreditation criteria and standards and ANQA procedures where two- level scale is applied: satisfactory and unsatisfactory.

#### **Expert panel report**

The expert panel has conducted a preliminary evaluation according to the self-evaluation report of the College, the documents attached to it and the observations during the online site-visit as a result of regularly organized discussions. Based on the observations after the discussions the Head of the panel and ANQA coordinator prepared the draft expert panel report which was agreed upon with the panel members on 8th of January.

The College presented its their comments and sent its feedback on the draft report on 29.01.2021. The Institution presented its observations in Armenian, which were provided to the local experts and discussed with the international expert. ANQA organized a meeting for the representatives of the College and the expert panel, during which the expert panel's response was discussed. Taking into consideration the College's observations, the expert panel prepared the final report, which was approved by the panel on 11.02.2021.

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**Gayane Ananyan**  
**12 February 202**

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA

### BRIEF INFORMATION ABOUT THE EDUCATION INSTITUTION

"Medical Institute after Mehrabyan" LLC Medical College's main mission is - training of high-quality specialists (nurse (nurse), obstetricians, pharmacists, nurses (cosmetologists, dentistst) in accordance with the requirements of the labor market, secondary vocational education programs, creation of necessary knowledge, maintenance, skills the emergence and strengthening of feelings of love and devotion to him, to serve his people honestly and with devotion in the field of healthcare.

The mission of the institution is to create, transfer and disseminate knowledge in the field of healthcare within the framework of a strategic program conditioned by the state and public need in the field of education development. As can be seen from the college mission, it corresponds to the RA National Qualifications Framework approved by the RA Government on July 7, 2016 N 714-N.

Mehrabyan Medical Institute "Limited Liability Company (hereinafter referred to as" MIM "LLC), in which the medical college (hereinafter referred to as the college) operates, is the legal successor of the Mehrabyan Medical College, which has been operating since 1997. In 2004, a medical institute was established on the basis of the college, having only one dental faculty. Later, in 2006, the second faculty of pharmacy was opened at the institute.

By order N 1081-A / Q 30.12.2015, the higher educational institution of Mehrabyan Medical School, the medical institute, was closed, leaving the secondary professional educational institution, the medical college.

At present, the Medical College of the "Mehrabyan Medical Institute" Limited Liability Company (hereinafter referred to as the Institution) has inherited, possesses the entire technical-economic, professor-lecturer base of the Medical Institute.

The educational activities of the College's mission extend to Level 5 of the National Qualifications Framework. Accordingly, the college awards six qualifications with the following secondary professional educational programs:

- Dental technician,
- Obstetrics,
- Nursing care,
- Pharmacy,
- Medical cosmetology,
- Cosmetics and art of cosmetology,

In order to achieve the goal set out in the strategic plan, the institution has a policy of choosing teaching and learning methods. The initial choice of teaching-learning method is made by the author of the program, and the cyclic subject committees choose the teaching-learning methods in accordance with the end result of the subject program. Assessment should not be limited to testing knowledge by simply reproducing it. As a result, if practical skills are to be developed, then certain actions should be evaluated on the basis of situational problem-solving, role-playing results, or real-time, limited or open-ended information. According to the chosen policy, written, oral and written forms of exams, tests are defined in the institution for testing and

assessment of students' knowledge. The instructor of each course introduces the student to the assessment system of the course and its components.

The Academic Council of the College decided to ensure the participation of the staff in various application programs, to include both the teaching staff and the active students in the research work.

In order to create an environment conducive to the development and internationalization of the institution, the institution has an internship organization, employment, internationalization of foreign relations, which establishes contacts, cooperation with a number of foreign state-private organizations, as well as international relations of the institution and Cooperation in the fields of education, science and consulting.

The general quality assurance policy of "Mehrabyan Medical Institute" LLC Medical College is aimed at the realization of the mission of the institution, the goals and objectives defined by the Strategic Program.

**Source:** The source of evidence in the above areas is the documents provided by the institution (eg SER, Strategic Plan, etc).

## CRITERION 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 of the criterion**

Medical College "Mehrabyan Medical Institute" LLC has completed its mission in the strategic plan 2015-2020. According to the mission, "Medical Institute after Mehrabyan" LLC Medical College is a secondary professional educational institution, which aims to train high-quality specialists in the field of healthcare, to create knowledge, maintain students' skills, capacity building, love and devotion through secondary vocational education programs. to strengthen the profession he has chosen, as well as to serve the people honestly ". According to the mission of the institution, the institution carries out its activities in accordance with the 5th level of education of the National Qualifications Framework and provides secondary professional education.

'MIM' LLC medical college to implement its strategic priorities of the strategic plan 2015-2020 clearly defines eight goals, twenty-one tasks. The college aspires to become an institution that will have effective management aimed at continuous improvement and internationalization of education and administration, innovation, competitive educational technologies based on the latest educational technologies, new teaching methods, will be able to provide high-quality medical secondary education, will increase the research component in secondary vocational education programs. From the expert online site-visit and the study of the attached documents, it became clear that the actions envisaged by the SP plan schedule mainly do not proceed from the above-mentioned goals. The institution did not evaluate the effectiveness of the implementation of the goals and objectives set by the SP. It is not clear what priorities can be set in the new SP.

The expert analyzes showed that the stated goals and objectives reflect the main processes implemented at the institution. According to the institution SP of 2015-2020 there are content assessments of the content of the steps, deadlines for implementation of the tasks envisaged by the SP are also available for the SP performance assessments (good, sufficient, average, not completed).

"MBI" Medical College, as a commercial organization, has developed a business plan for 2020-2025 which presents the description of the professional educational institution, the description of the service, it consists of marketing plan, work plan, financial plan sections. The institution has also developed short-term strategic plans (director, separate departments, etc.), work plans of cyclical commissions. As a result of the research, it became clear that the above-mentioned short-term strategic plans are work plans for one year.

The internal and external stakeholders mentioned in the College SER are the state, society, applicants /students/, graduates, staff, partners and employers. According to the Self-Analysis. The needs of the stakeholders, their observations and suggestions were included in the process of development of the institution's 2015-2020 SP. The needs of internal and external stakeholders have been identified as a result of discussions with students, faculty, employers, alumni, and students and faculty. It became clear from the expert online site-visit that the external stakeholders of the institution are mainly teaching in the college or are college graduates, so they are internal stakeholders. It became clear from the online site-visit that the polls and discussions were conducted, but they were not analyzed and there are no facts of their engagement in the SP.

The weak point of the institution of standard 1 of the SER was presented the passivity of the organization of the meetings and the questionnaires among external stakeholders. During the online site-visit it became clear that the results of the observations and suggestions of external stakeholders were not presented in the SP. In addition, there are no opinions or suggestions from international partners from external stakeholders.

The institution has SP plan-schedule 2015-2020. It is the content of the steps envisaged by the strategic program of the institution, deadlines, responsables. According to the self-analysis, the institution considers it as a tool for monitoring the SP. It should be noted that no current analyzes (monitoring) were carried out according to the SP schedule. It became clear from the expert panel's online site-visit that the institution intends to implement it within six months after the end of the SP.

From the study of the documents it became clear that in the institution, except from the schedule of the SP for 2015-2020, there is also available performance indicators for 2015-2020. In addition to the sections of the SP plan-schedule, it also includes the expected results, performance indicators and their assessments. It turned out from the online site-visit that the actions envisaged by the SP plan schedule were evaluated by the SP performance in 06-03-2020. The assessments are: good, average, sufficient, not finished. According to the performance indicators, it is not clear in which case each of the assessments is made. In addition, there is a college report on the implementation of the SP for 2015-2020, which presents the work done by the institution during the reporting period. However, the reasons for the unfulfilled goals of the SP are not analyzed in the report. During the expert online site-visit, it was found out that the institution has no plans for a new SP based on the results of the SP performance (preliminary/draft version of the SP). In addition, the institution plans to conduct an SP assessment after the end of 2020.

**Considerations:** The expert panel positively assesses the fact that the 'MIM' LLC medical college has a clearly defined mission. It is overall positive that the policy of the institution and its activities of the educational processes are in correspondence with the defined mission. However, the goals and objectives arising from the mission of the institution are not realistic in the sense that the actions set out in the SP plan-schedule do not contribute to the achievement of the set goals. The above-mentioned can harm the effective implementation of the mission of the institution. The external stakeholders of the institution are employer lecturers and graduates, who are also internal stakeholders, which hinders the objective situation.

It is noteworthy that the institution singles out the expansion of international and foreign activities, the development of research orientation, the introduction of the latest technologies from its strategic priorities. However, it is concerning that the institution has not conducted relevant studies to expand its international and foreign activities. In addition, there are no clear steps for the development of research, there are no grounds for the introduction of the latest technologies in the educational process.

Although the indicators set for the implementation of the strategic plan and the progress in the implementation of the SP have assessments, however, these assessments have no explication in terms of how well, average or sufficient the formulation was obtained in terms of measurability. As a result, the lack of ongoing monitoring and assessment of the implementation of the goals of the SP may risk the definition of the objectives, identification of new priorities, identification of SP issues. As the assessments do not clearly reflect the level of fulfilment of the set tasks, the results to be improved do not stand out. It is concerning that the report on the implementation of the SP does not contain the analysis of the problems, as a result of which a number of goals of the SP have not been effectively implemented. It risks the definition of realistic goals in the next SP. In addition, the College plans to monitor the SP performance schedule after the schedule expires, which may risk the ongoing evaluation of the college performance.

**Summary:** Taking into account that the activity of "Mehrabyan Medical Institute" LLC medical college corresponds to the mission defined by the institution, is in line with the RA

National Qualifications Framework, the goals and objectives of the college generally reflect the needs of the beneficiaries. There are some mechanisms for evaluating the activity, so the expert group finds that the medical college of "Medical Institute after Mehrabyan" LLC meets the requirements of Criterion 1.

**Conclusion:** The expert panel assesses the relevance of "Medical Institute after Mehrabyan" LLC institutional competencies to the requirements of CRITERION 1 sufficient.

## CRITERION 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

"MI" LIC Medical College is a commercial organization with the status of a legal entity, the purpose of which is to make a profit. The goal of the institution is to provide secondary professional education with a view to training high-quality specialists in the field of healthcare. Management in "MIM" LLC is carried out in accordance with the laws in force in the Republic of Armenia, the charter of the institution. The college is governed by a board of directors, a pedagogical council, and a director. The administrative processes in the institution are regulated by legal acts (charters, regulations, procedures) approved within the framework of the functions of the governing bodies of the institution. The highest governing body is the Board of Founders, which approves the strategic and annual plans, the structure of the institution, the annual income-expenditure budget, the financial reports, listens to and evaluates the annual report of the director. There is a

Pedagogical Council in the institution, which plans and coordinates the issues of teaching-methodological, organizational issues, research activities, discusses other issues and questions presented by the cyclical commissions, makes decisions and implements other functions. There is also a methodological council in the institution, coordinating the work of cyclical commissions. The college also has a student council, which is a student self-government body that ensures the protection of students interests.

The current activities of the institution and management is implemented by the Director management of educational, scientific, economical, financial, international and other activities, The Director makes deals and contracts on behalf of the Institution, ensures the implementation of the decisions made by the Founders Council, implements and work within the scope of the authorization manages the finances of the College according to the Charter and RA law. According to the SER the management is carried out by combining the principles of sole collegial management. The expert panel online site-visit revealed that there was no evaluation of the effectiveness of the management system conducted in the Institution.

To increase the transparency of the management and decision-making processes at all levels of the governing body, it is planned to post the agendas of all the sessions, the draft decisions

to be made on the Facebook page of the institution. These documents were not available during the period including the expert online site-visit.

The Institution has a policy for the formation and distribution of the financial resources. According to the protocol N 29 the Founder's Council decided on 06.05,2013 that starting from fiscal year 2013 to 2020 the income of the institution not to distribute among the owners. In the Business plan for 2020-2025 in the part of the Financial plan the directions for the use of the income that were not distributed were presented such as renovation, furnishing of the buildings, laboratories, classrooms of the institution, introduction of central heating system in its own areas, signing of new contracts, addition of the library system, etc,

The Expertise revealed that current approaches of financial resources are not in correspondence with the priorities of the Strategic plan, in particular, the development internationalization and research component. The 2020-2025 Business Plan of the university presents the percentage of the distribution of the college's financial resources, where the cost of science and research is 20. of which: publications - 0.5%, acquisition of laboratory equipment materials promotion expenses - 0.5%. As for internationalization, their allocated costs are not clearly-separated. As regarding the internationalization, there are no separation of the financial resources specifically for it.

The expert panel online site visit revealed that the organizational structure was changed. According to the organizational structure the Quality assurance responsible is now accountable to the Board of Founders, has previously been accountable to the Director. The expert panel online site visit revealed that there were no responsible persons or divisions separated for the priorities of

the SP - the development of the research and the engagement of the innovative technologies in the educational process. There were no evaluation and analyses in the bases of the changes of the organizational structure.-value did analyses or the organizational structure reveal that administrative responsibilities of the institution were also being implemented by the representatives of the teaching staff /Director, the responsible of the educational affairs, the responsible for the quality assurance, heads of the all the departments, the responsible for the Academic programs/. One specialist has different administrative responsibilities at the same time.

The analyses of the expert panel revealed that the procedure of the management of the institution are based on the observance of the principles of ethics, which are presented in the code of ethics compiled by the institution.

According to the Charter of the Pedagogical Council the management and all members of the teaching staff the 25 percent of the Council are the students. The expert panel online site visit revealed that employer and alumni representatives are invited to participate in the councils meetings depending on the issues and topics discussed during the meetings. However, there are no examples of the changes or the suggestions of the employers that have been made, and the students and teachers do not have active participation during the decision-making related to them. As a long-term planning, there is a Strategic plan for 2015-2020. There is an action plan and timeline for the Strategic plan for 2015-2020. As a short-term planning there are annual action plans of the departments. The institution also planned a business plan for 2020-2025. The expert panel analyses revealed that in fact, Strategic planning and strategic management is not implemented effectively /In fact, there is no toolkit for Strategic management/.

The self-assessment report states that planning in all spheres of the institution's activity is carried out at long-term, medium-term, short-term levels, each of which has its own implementation and monitoring mechanisms. Expert analyzes have shown that short-term plans are not according to the long-term plans. Thus, the annual plans of the presidents of the cycle commissions include the content of the activities, the timeline for the implementation, the responsible departments. The strategic plan for 2019-2020 of the department for practice organization, employment and external internationalization center is not in correspondence with the steps to be taken and the expected results arising from the problems of expanding international activities defined by the SP. Thus, for example, the SP is intended to increase the number of foreign language staff, students, promote the participation of the institution's stakeholders in international programs, use the student portfolio system, introduce a system of mutual quality assessment of the institution-employer cooperation, while short-term planning have not been fulfilled. There are no plans to attract international students to the university and ensure their educational environment. Director's short-term strategic plan for 2019-2020 are not based on the issues of the reports of the previous short-term strategic /annual/ plan /for 2018-2019/. Long-term and Short-term plans do not have a qualitative analysis of performance results,

Short-term operational planning is carried out in all areas of the institution's activities; educational process, financial, human resources, property, educational programs, etc., which, according to the Self-Analysis, should be clearly reflected in the annual reports of the director. These reports are mainly descriptive, presenting information on students' progress, cooperation agreements, international events, opinions voiced by partners. Expert analyzes, on the other hand, have shown that the issues raised in these reports generally do not follow the RP plan schedule. 2018-2019 . The director's annual report presents the problem of reducing the number of applicants, mentions the problems in the students' theoretical and practical work, but the 2020 there are no clear plans in the short term to provide solutions to these problems. In this context, operational planning mechanisms do not clearly work.

According to the Self-Analysis, the reporting mechanism is used to monitor the implementation of planned activities in the college. Annual reports are submitted by the director, all structural subdivisions. Expert analyzes show that the reports used for monitoring purposes do not contain qualitative analyzes and evaluations, so the results to be improved are not visible. The leadership of the institution in 2012 conducted a study of labor market sites, received a license to work in the specialties of "Nursing" and Therapeutic Cosmetology". During the online site-visit, it turned out that the market research is not continuous, the opportunities to attract international students have not been studied. It became clear from the visit that the institution does not carry out complete studies and analyzes affecting the activities of the college.

The procedure for conducting surveys has been clarified since 2018. It became clear from the online visit that the conducted polls are not mainly problematic, as a result of which sound analyzes and assessments are not the basis for decision-making. As a result of the expert analysis, it became clear that the connection between identifying problems in the college, identifying the causes of them, analyzing the data, and making effective solutions and relevant decisions is not clear.

The self-analysis states that the process of quality assurance of management is carried out on the principle of quality management: planning, implementation, evaluation, improvement on a

periodic basis. From the expert online site-visit of the expert panel, it can be stated that the main processes in the institution are in the planning-implementation stage, for example, in the planning-implementation stage, the process of attracting foreign students, the development of research, involvement and use of the latest technologies in the educational process, introduction of QA processes. The period is not over yet, there are no quantitative, qualitative analyzes and assessments. The SP of the institution is in the evaluation stage however, there are no quantitative-qualitative evaluations.

The surveys in the College have been regulated since the 2018-2019 academic year, and it became clear from the expert panel's online site-visit that there are no separate surveys on the effectiveness of the APs. There are no effective mechanisms in place to evaluate, analyze the effectiveness of other processes at in institution.

The self-analysis states that the information on the qualifications awarded by the academic programs of the institution is published on the official website of the institution [www.armmed.am.in](http://www.armmed.am.in) in addition to the daily activities of the institution, various other information is spread through the Facebook page, which is also educational. is a mechanism for evaluating the publication of quantitative and qualitative information on the quality of the qualifications of the programs awarded. During the period including the expert online site-visit, the APs were not posted on the Facebook page, there was no information about the graduates and their success.

The website of the institution presents the professions taught in the college, the occupations of the specialist in each profession, the professional responsibilities, the exemplary curricula.

Considerations: The panel evaluates the college's efforts to improve governance and administration. Nevertheless, there are still urgent issues to be resolved. It is concerning that all the responsibilities of the college administrative staff are performed by the faculty members, one specialist performs several administrative responsibilities at the same time, which can lead to overload. As a result, the effective functioning of the management system is endangered. It is disturbing that some of the priorities set by the SP of the institution do not have those responsible, as a result of which their implementation is endangered.

Although a change has been made in the organizational structure of the institution, which is not based on clear data, so in this context, the need and effectiveness of decision-making may suffer. On the positive side, the governance processes at the institution are based on the observance of the principles of ethics, which are presented in the code of ethics compiled by the institution.

The expert panel positively evaluates the fact that there is a decision of the Board of not spending the income of the institution among the founders since 2020 and to invest for the further development of the college, that will lead to achieve the goals of the SP. In the Business plan there is a part - 'financial plan where presented the spheres of the used incomes, however, during the period of 2013-2020 the separation of expenses at the expense of profit would show more clearly the substantiation of the decision made and would contribute to the efficiency of the distribution of finances according to the goals of the SP.

It is concerning that the budget of the Institution does not reflect the goals of the SP. In particular, research expenditures, which is one of the priorities of the SP, have a small share, and no separate funds are allocated for the development of internationalization. As a result, the effectiveness of fiscal policy risks the development of the College. The expert panel positively

mentions the fact that there are long-term and short-term planning in the Institution however it is concerning that the plans do not have qualitative analyses of the performance results, which risks the identification of the problems and creation Of a culture of continuous improvement in college planning in the Institution however it is concerning that the plans do not have qualitative analyses of the performance results, which risks the identification of the problems and creation of a culture of continuous improvement in college.

It is concerning that the short-term plans do not based on the long-term plan which negatively affects on the effective operation of the practical planning and monitoring mechanisms.

The expert panel positively mentions the fact that the College opened a new academic program based on the analyses of the labor market at the same time mentions that the analyses like this and the regular implementation of such studies and the introduction of sustainable data collection mechanisms will strengthen the data-based decision-making system and decisions will become more sound. The College plans to have international students however there is no analyses on the possibilities regarding this, and this can risk the implementation of the effective education process for international students. The expert panel negatively assess the fact that the

College does not conduct overall analyses on the internal and external factors that effect on the activities of the Institution, which risks the substantiation of the decision making-.It should be mentioned that inquiries are regulated and are regular from 2018-2019 academic year. Therefore, there are no clear mechanisms for collecting, analyzing and evaluating the effectiveness of other AP processes. As a result, the effectiveness and the assessment of the management system of the institution is thoroughly risked. Although the institution has developed a quality assurance policy and implementation procedures for the quality assurance of its specialties, their educational programs, as well as other processes. However, the principle of quality management - planning, implementation, evaluation, improvement - the period does not have clear summaries, as a result of the evaluation there are no clearly identified issues - ways to improve. In addition, the effectiveness of APs has not been assessed, which hinders the continuous improvement of APs.

**Summary.** Taking into account, that there is an issue of management system efficiency, human resource management efficiency in the institution, decision-making is not based on reliable data, strategic management and planning is incomplete, short-term and long-term planning and monitoring mechanisms are ineffective in accordance with the institution's mission and goals how there are no clear mechanisms for evaluating the effectiveness, collection, analysis and application of APs, there are no mechanisms for evaluating quantitative-qualitative information on qualifications, the principle of quality management of policies and procedures of administration is in the planning- implementation stage, there are no examples of evaluation-improvement, as there are generally no mechanisms for evaluating the quantitative and qualitative information about the qualifications of the educational programs awarded, the expert panel concludes that the medical college of "Mehrabyan Medical Institute" LIC does not meet the requirements of Criterion 2.

**Conclusion.** The expert panel assesses the relevance of the medical college of Conclusion. The expert panel assesses the relevance of the medical college of "Mehrabyan Medical Institute" LIC institutional competencies to the requirements of CRITERION 2 insufficient.

## CRITERION III. ACADEMIC PROGRAMS

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

### FINDINGS

In the Strategic plan 2015-20 of the Institution as a goal, it is mentioned the creation of the student-centred system and provision of educational programs in line with the requirements of the labor market, equipped with modern technologies and methodology. According to the data presented in the self-analysis, at the time of the implementation of the process, the college has 6 secondary professional educational programs: "Nursing", "Dental", "Pharmacy\*", "Obstetrics", "Medical Cosmetology "Cosmetics" and "Art of Makeup". As it became clear from the online site-visit, the number of applicants in the field of "Cosmetics and make-up art" has sharply decreased in recent years. During the online site-visit, it was clarified that at present the priority directions for the institution are "Pharmacy" "Dental" and "Therapeutic cosmetology", especially taking into account the plans for attracting foreign students.

According to the self-analysis, the APs of the institution were developed in accordance with State Educational Standards. After review of the curriculum, combined with state education standards, it was clarified that the curricula were generally compliant, although changes were made in some areas. The changes refer to the hours of individual subjects sometimes, change/movement of subjects in from one semester to another. As it became clear during the online site-visit, these changes are due to the need for a more convenient distribution of the workload of the instructors teaching the modules. As mentioned, the transfers of subjects were discussed, approved by the relevant subject cycle committees, however, as a result, the module that is an entry requirement (prerequisite) appeared in parallel with the professional module in the same semester, for example, analytical chemistry (input module according to state education standards, they teach in college in the same semester parallelly).

During the online site-visit, it was found out that the modules "Academic Painting Types-1<sup>^</sup> and Academic Painting Types-2" had been changed in the AP Medical Cosmetology speciality due to the lack of a lecturer. These modules have been replaced by "Organic Chemistry' and "Cosmetological Chemistry" modules (taught by a chemist at the Pharmacy AP). During the online sit-visit, a positive assessment was made regarding the implementation of the mentioned modules, however, no effectiveness or risk assessment of the change of professional modules was carried out. As for the individual modules in the APs, the analyses revealed that they are designed in accordance with the standard set in the State Educational Standards and contain all the necessary descriptions. As for the content of the modules, they generally fully comply (sometimes repeat) with the State Education Standard, but there are some exceptions. In this case, the changes relate both to the learning outcomes, the criteria for their performance, and the purpose of the module or the topics being studied (e.g., Pharmaceutical Chemistry, Hygiene, Ecology, General Pharmacology). During the online site-visit, it was revealed that the changes in the modules are aimed at improving the programs, but these changes do not have a clear justification there are no analyzes), often they are based only on the personal professional experience of the teacher who teach the module.

The Institution has developed a "Policy for the selection of teaching, learning and assessment methods in accordance with the results of Academic programs"(approved on 27.09.2019). according to which the selection of teaching methods is based on the results: knowledge, ability and skill. The choice of teaching, learning, knowledge assessment methods is made by the authors of the modules, discussed in cyclical committees, approved by the deputy director. According to the policy, the methods of learning that develop knowledge are lectures, reading professional literature, Watching movies. Capacity building is accomplished through role-play and problem- solving, as well as the application of skills required in real or contractual situations. For example, for the APs of Nursing and Obstetrics the institution has a cabinet with molds where the practical classes take place, as well as students implement some medical manipulations with the help of their classmates /e.g., pressure measurements, injections/. Or else, the students of the Medical Cosmetology AP have chance to not only watch but also implement some activities on each other /e.g., massaging/ in the cabinets of the AP. For the practical classes of the AP of Pharmacy the institution has fewer resources, e.g., there is only the possibility to make powder-liquid peaches. As for the acquisition of skills, it is done using the methods of self-study, in this case only through essays dictation is considered a violation of this procedure. From the expert analysis it became clear that the formation of knowledge is carried out through lectures (the main part), to a lesser extent, through the study of educational literature, but the lectures are mainly provided in the form of dictation. During the online lessons, videos are also shown, the previously discussed material is discussed during the lesson, and students reproduce it through questions and answers. Depending on the type of professional module, sometimes role-playing games are performed, situational or other types of problems are solved, tests are discussed. For example, in nursing case therapy, situational problems are used, tests, in hard peach technology, calculation problems are used. Some professional modules, such as nursing in therapy (different modules), hard peach technology, pharmaceutical chemistry, dental modules for making different types of prostheses, etc, depending on the AP and subjects. If in some cases, if the available resources are sufficient, the active participation of all students in the practical training is possible (professional modules for making different types of dentures), in other cases the practical training is limited to demonstration of practical work by the lecturer, for example, chemical laboratory experiments, analytical chemistry, pharmaceutical chemistry). Students are regularly assigned essays. They mostly repeat the topics of the lesson (although there are exceptions, for example, the junior students were instructed to do study work on the topic Water ) and they are mostly theoretical essays. The requirements for abstracts (number of pages, list of literature, sections, format) are not clearly presented. No grounds were found for students' independent work or the use of interactive learning methods.

In the second half of the 2019-2020 academic year and in the first half of the 2020-2021 academic year, due to the epidemic situation, the educational process at the university was carried out remotely, online. Here, especially in the initial period, some problems (of technical nature) arose, which, as it turned out during the online visit, were mostly corrected. The issue of practical training was a more serious challenge for the institution. Although some steps have been taken to address this issue, the missed spring semester hours have been somewhat filled in September, but if this situation continues, the institution has not yet had a well-planned list of measures to ensure the sustainability of the learning process and full realization.

According to the self-analysis, since 2018 the institution has a multi-factor system of knowledge assessment (20 points), the components are as follows:

a) For subjects ending in an examination

- Attendance and total activity - 2 points
- Individual and performance of independent works - 2 points
- First and second current exam - 4 points each
- Final exam - 8 points.

b) For items ending with a test

- Attendance and total activity - 2 points
- Individual and independent work performances - 8 points
- Final exam - 10 points.

The first and the second current exams have a schedule, they are carried out by means of questionnaires (oral or written) or by tests. The weather selection criteria are not clearly presented, usually one intermediate of the same module is oral and the other is test. As a result of the analysis of the provided documents, it was found out that the dimensions of both the test assignments and the oral questionnaires of different modules are different. The number of tests in the modules is not the same, for example, the drug technology exam contains 10 tests, the hygiene-ecological test contains 12 tests/task, and the internal diseases - 20. Moreover, the evaluation criteria of the tests are also different: in the case of technology la in internal diseases, the student gets the same score for all the tests, and the hygiene tests are differentiated according to the complications, 3 types, which are evaluated with different points, respectively. The cosmetic defects module exam tickets contain 9 medium complexity and 1 complex test. Moreover, in the versions of the same subject. the proportion of questions is sometimes violated, for example, the number of tasks that require calculation is more in one version than in the other. The criteria for selecting the tasks mentioned in the documents attached to the self-analysis are not reflected. The final exam questionnaires usually contain 4 theoretical questions, but depending on the subject, they also contain other tasks

Thus, the oral methods of the attestation test mainly assess the students' knowledge. Although some elements of assessment of acquired skills are also available in these methods (in the form of computational or situational problems), skills assessment is usually not performed. Students' participation in practical classes during the study of the module is not evaluated. The student earns 2 points for attending and for general activity (answering a lesson). The presentation of independent works - essays - is also evaluated, maximum 2 points. No evidence of implementation of multifactorial system performance assessment measures was found. During the semester /1-2 days/ also at the end of semester /for 3-4 weeks/ there is practice according to the AP, it takes place in different medical institutions, cosmetological cabinets, pharmacies etc. The participation of the students is monitored through diaries to be completed by them signed by the internship supervisor. No grounds for testing-assessment of knowledge, skills, abilities acquired during the practice were found. During the online visit, it turned out that the practice presupposes that the student is an observer, although for certain professions it is possible for the student to perform certain functions, especially for the Nursing profession. This Fact is facilitated by the fact that some of the lecturers of the institution are engaged in practical activities. In this respect, the agreements signed with different employers also have a positive role. The institution has a procedure for supervising the evaluation process of the students of "MIM" ILC medical college approved on 05-12-2017) and a procedure for appealing the exams of MIM" LIC medical

college (approved on 02-02-2018). However, no case of appeal against the exam grade has been registered in the college since its establishment.

According to the order, the final state attestation is carried out by interdisciplinary oral examination of several professional subjects. However, during the expert panel's online visit, it was revealed that the institution is planning to change the final certification process by adding a practical component. Moreover, according to the received data, the students presented works prepared by them at the final attestation of the Dental Work" qualification for the 2019-2020 academic year, this approach will be continuous (although the relevant changes in the order have not been made yet). However, taking into account the limited resources and opportunities available, this approach has not worked in other APs.

A benchmarking policy and procedure has been developed at the institution (date of approval is missing). For the implementation of student exchange programs (within the framework of a cooperation agreement signed with the Medical College of the Latvian city of Daugavpils) a benchmarking of the Nursing" AP was carried out. Three foreign educational institutions have been selected as benchmarking partners: Daugavpils Medical College, Minsk State Medical College, Moscow N° 6 Medical College. As a result of the combination of programs, the strengths and weaknesses were revealed. The weak point was the lack of pre-diploma internship hours, the form/type of final attestation.

According to the current/acting procedure, the final attestation commissions of the institution include specialists in the relevant field (as president), who submit a summary report after the examinations. Sometimes, there are some judgments about APs, such as adding a practical component to the study. As for the more active involvement of external stakeholders in the process of drafting and improving APs, one of the steps taken in this direction is the participation of employers, alumni at Pedagogical council meetings. However, during the expert online visit, it turned out that such contacts do not contribute to the identification of existing needs. A Guide for reviewing, compiling, and monitoring subject curricula" has been established at the institution (date of approval is missing). The College has also developed a "Quality Assurance Policy for Compliance with College Curriculum and Qualifications" (approved on 25.08.2017), according to which programs should be regularly inspected at the beginning of each academic year. However, no clear evidence of the implementation of the mentioned measures was registered during the online site-visit. In addition, because of the study, it was found out that on September 18, 2019, the RA Ministry of Education and Science approved the new State Educational Standard for 0916.01.5 "Pharmacist" qualification for "Pharmacy" speciality, but the institution is still guided by the old: By the order of 2012.

During the expertise, some inconsistencies (thematic) were found in the programs of general and speciality modules. During the online site-visit, it was found out that the programs of general professional modules are approved by other cyclical commissions as special specialists. As a result, the specialists of the given AP do not participate in their approval. As it became clear during the online site-visit, the coordination of the topics and the content of the subjects is practically not carried out.

Considerations: The panel welcomes the fact that the college's APs are generally in line with the NQF Level 5 specifications. The expert panel The APs also meet the requirements of the state education standards, which will contribute to the training of competitive staff. At the same time, the expert panel notes that some changes have been made in the APs, but there are no

justifications. Making changes to the APs because of monitoring and various discussions will help train professionals in line with labor market requirements. As well as the impact of these changes on the achievement of educational outcomes is not assessed, it is unclear whether they had a positive or negative impact. Steps are being taken by the institution to implement AP reforms. In this sense, the benchmarking of the Nursing" educational program with foreign colleges is commendable. However, there are no clear changes based on the resulting data. Implementing targeted benchmarking and making improvements as a result will facilitate the integration of APs and the involvement of international students.

As regards the effectiveness of the selected teaching and learning methods, the institution tries to implement the policy aimed at achieving appropriate outcomes, based on the choice of these methods based on the development of both knowledge and skills and abilities. However, the mechanisms contributing to the full implementation of these approaches are not fully implemented. In particular, the modernization of lectures (from dictation to interactive internship - from an observer to a full-time practitioner, assessing the skills and abilities acquired during the internship can also contribute to improving the professional quality of the graduates of the institution.

The expert group welcomes the use of a multi-factor assessment system at the institution. The fact that this is an attempt to evaluate all learning outcomes - knowledge, ability, skill, assessment - is to be welcomed. However, the intermediate-final exam methods used, either through tests or questionnaires (oral or written), which account for 80% of the total grade, do not allow for a complete evaluation of all outcomes. In fact, without earning the other two components (attendance to total activity, individual and independent work performance) the student has a chance to get a positive score. This can have a detrimental effect on students' motivation to do practical laboratory work, and thus on their ability to develop skills and abilities. In fact, it is not clear whether attendance and the overall activity component includes practical work or not. In addition, independent work is merely the preparation of essays (sometimes in the form of essays). If such an approach is working for first-year students, as this is how they learn to use the literature to gather information from a variety of sources, then the requirements for graduate students' independent work should be for analysis, comparisons, and data collection. From all subjects, including professional, only the presentation of essays can hinder the development of students' professional thinking.

In this regard, the steps taken by the college to introduce a practical component in the final attestation of the "Dental Case" AP are commendable. However, it is concerning that these changes are localized to only one AP. In this sense, the disproportionate use of reforms may risk the outcome of other APs, given the challenges of the labor market u high competition in medical education.

The institution strives to implement the process of improving APs, has procedures developed for that purpose, has taken some steps in this direction (compliance of programs with State Educational Standards, their monitoring, benchmarking). However, these improvement mechanisms will be effective only if they help to identify problems and needs. More active involvement of employers in the AP reform process can contribute to the development of programs in line with the modern requirements of the profession.

**Summary:** Taking onto account, that the APs of the Institution are mainly corresponding to the National Qualification Framework, are mainly described according to the learning outcomes of the awarded qualification, the Institution seeks benchmarking with other similar

foreign colleges, has improved assessment system, has a policy of choice of teaching and learning methods, examples of improving APs the expert panel concludes that "Medical Institute after Mehrabyan " LLC Medical College meets the requirements of Criterion 3.

**Conclusion:** The expert panel assesses the relevance of Medical Institute after Mehrabyan" LLC Medical College institutional competencies to the requirements of CRITERION 3 sufficient

## CRITERION IV. STUDENTS

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

### Findings

According to the SER of the institution, there are a number of mechanisms of the recruitment of the students - preparation of the booklets, advertising in the media, on social networks, conducting free preparatory classes by the preparatory department. However, the expert online site-visit revealed that mainly students have known about of the College from the recommendation of their relatives and friends. The online site-visit revealed as well that the preparatory department organizes meetings and trainings with the aim of gathering pupils from the schools and admitting them to preparatory phase. The admission process is conducted according to the charter of the Ministry of Education, Science, Culture and Sport. However, the effectiveness of the recruitment mechanisms of the College was not evaluated.

The examination revealed that the needs of the students were identified through the institute of supervisors (according to the order of organization of the work of the College supervisors), closed boxes placed in the institution, meetings organized by the Student Council, inquiries conducted by the QA Center according to the rules of the College. Students also take part in the sessions of the Pedagogical Council. It became clear from the online site-visit that the students do not actively participate in the council meetings. During the examination, it became clear that there are no cases of educational needs or teaching methods with the participation of students, as well as cases of replenishment of educational resources at the institution. As a result of the examination, it became clear that during their participation, the students had a problem with the tennis table, which was resolved. It became clear from the expert online site-visit that the students raised as well the issue of the lack of a canteen, which was raised by the Student Council.

According to the analyses of the SER, the institute conducts pre-examination counselling classes, additional training classes for essay preparation, as well as seminars and master classes by specialists in the field. However, it became clear from the expert online site-visit that additional training was provided prior to the exams in each module and informal counselling during the lessons. It became clear from the online site-visit that in the "Therapeutic Cosmetology" department, on the initiative of the lecturer, additional classes are carried out with the help of a laboratory assistant, in connection with which it was suggested to have laboratory assistants in the college to support practical work (subject: Surgery, surgery). However, similar initiatives were not observed in other subjects.

According to the SER of the college, students can present their problems and suggestions to the administrative staff through course supervisors, raise them in the Pedagogical Council, at the sessions organized by the Student Council, they have at least 2 sessions a year. There is a clear schedule for admission of students by the administrative staff at the College, but the expert online

site-visit revealed that outside of those scheduled hours students have the opportunity to apply. It became clear from the examination that students usually apply directly to the dean, however there are no such examples.

According to the SER, career guidance for students is carried out by the 'MIM' LLC Internship, employment and international relations center. It became clear from the expert online site-visit that the institution has contracts with employment agencies, which facilitates the process of further employment of graduates. As a result of cooperation with employment agencies, the students of the institution have the opportunity to write CVs. The examination also revealed that the connection of the institution with the graduates is just being formed: the institution has started to create a database of graduates. They still have a base of 60 students; one in four has been assisted by the institution in finding employment, mainly in pharmacies. The expert online visit revealed that several college students had been employed on the basis of employment contracts with employment agencies.

According to the SER until 2010 (as an institute) 4 articles were published jointly with the students, and after 2017, already as a college, 3 articles were published with the participation of students (mainly in the field of pharmacy with the participation of APs students). Nevertheless, it became clear from the expert online site-visit that the students participating in the visit are not involved in research activities. Students present essays which, however, are informative in nature and do not include analysis. The College has technical requirements for writing essays, for example, a minimum of how many pages it should consist of, etc. It became clear from the online site-visit that some lecturers are required to submit manuscripts. As a result of expert analysis and analysis of different modules of APs, it became clear that the assignments do not mainly contribute to the development of analytical-creative thinking among students.

According to the SER of the Institution the Students Council is responsible for the defence of the rights of the students in the College. The examination revealed that heads /heads are being elected by the teachers/ of the courses become member of the SC on mandatory bases. The students present their questions, issues and problems through SC to the management of the institution, in case of violation of students' rights, the student applies to the Chairman of the Student Council, after which he/she brings the existing problem to the attention of the educational part, if the problem is not solved, raises the issue before the directorate, after which the Board of Founders. However, it became clear from the expert online site-visit that students usually apply directly to the dean in case of a problem. According to the SER the Student Council has a regulation, a student guide. According to the regulations, the Student Council organizes meetings and discussions with students at least twice a year, but from the online site-visit it became clear that not all students are aware of the provisions of the Student Council's guidelines. It became clear from the online site-visit that as a result of the meetings, the students raised the issue of the lack of a canteen and were provided with a break room.

According to the SER, information is extracted from students at the institution through mechanisms such as analysis of annual reports of supervisors, analysis of surveys conducted among students, opinions of graduates on satisfaction with other educational services of the institution, expressed during Pedagogical council meetings. The expert online site-visit and a self-assessment analyses revealed that the QA surveys were mainly concerned with the evaluation of the teaching staff, as well as the students' satisfaction with the college resources, which did not serve as a basis

for change. However, no surveys of the quality of the effectiveness of the modules themselves were conducted in college. Surveys do not reflect a clear need identification.

**Considerations:** The expert panel positively assesses the fact that there a number of mechanisms of the recruitment of students. However, it is concerning that there are no evaluations by the institution on the effectiveness of the mechanisms, which will enable the institution to find the most effective way to recruit more students. It is also considered positive that the institution has different mechanisms for raising issues, there are issues raised by students during the meetings organized by the Student Council, the meetings of the Pedagogical Council. However, improving the mechanisms for identifying educational needs will contribute to the continuous improvement of the educational process.

On the positive side, the institution provides pre-exam counselling for each module, as well as non-formal counselling during classes. There are also master classes on the initiative of the lecturers, but it is concerning that it is carried out only within one subject, master classes can create opportunities for application of innovations, development of practical lessons, contribution to students' progress.

The expert panel considers it positive that the institution has a schedule for applying to the administrative staff, as well as the fact that students can apply to the dean in case of any questions. Such an approach facilitates a targeted response to the questions raised by students.

On the positive side, the institution has contracts with employment agencies that allow some students to be employed, mainly in pharmacies. It is also considered positive to create an alumni base for the university, which will provide an opportunity to strengthen the college-alumni relationship and receive feedback from alumni. Strengthening the cooperation with employers by the Career Center will strengthen the college-employer relationship and provide a wide range of employment opportunities for students.

The expert panel is concerned about the lack of students' involvement in research. The students did work only in the form of essays, which are purely informative, do not include analysis, and generally do not contribute to the formation of students' analytical, critical thinking.

The expert panel considers it positive that the Student Council has a clear regulation in student guide. On the positive side, there are issues raised during the meetings organized by the Student Council. However, it is worrying that not everyone is aware of the Student Council and the provisions of the guideline.

It is concerning that only the heads of the courses become members of the Student Council, who are necessarily elected by the lecturers, thus not allowing other students to become members of the Student Council.

The expert panel is concerned that the surveys conducted by QA do not reflect a clear need identification. Lack of clarity in all this will not allow to provide the necessary result, to identify clear problems.

**Summary:** Taking into account that the institution has certain mechanisms for selecting, recruiting and admitting students, to identify and address the educational needs of students, there are opportunities to apply to the administration of the institution for support, the institution has a body responsible for defending students' rights. other mechanisms (box, institute of supervisors, etc.), the expert group finds that the institution meets the requirements of criterion 4.

**Conclusion:** The expert panel assesses the compliance of the institutional capacities of the Medical College of "Mehrabyan Medical Institute" LLC with the requirements of CRITERION 4 as sufficient

## CRITERION V. FACULTY AND STAFF

CRITERION: The Institution provides for a highly qualified teaching and supporting staff to achieve the set goals for academic programmes and institution's mission.

### Findings

"Medical Institute after Mehrabyan LIC Medical College 2015-20 The strategic plan (point 4.3) addresses the targeted management of human resources. Thus, a number of tasks are set for the development of the staff, the provision of a qualified teaching staff, and the creation of a favourable working environment for them, including the review of the teaching staff and, if necessary, the recruitment.

During the reporting period, the following documents were developed and approved at the institution: Regulation on the selection of a lecturer of "MIM" ILC medical college (approved on 04.07.2016); "MIN" LIC Medical College lecturers' professional qualities u job evaluation procedure (approved on 25.08.2017);. Passport for the position of lecturer of "MIM LLC medical college (approved on 02.02.2018); Regulation of "MIM" LIC medical college lecturer differentiated system of quality assessment (approved on 24.08.2018); Stability of the main teaching staff of 'MIM' ILC medical college run policy to ensure progress (approved on 27.08.2019); The mentoring policy of the novice teachers of "VIM LLC medical college (approved on 22.02.2018) A Reserve Lecturer Database" has also been established at the institution, It is a collection of candidates CV's, sorted by APs or subjects. However, when there was a need to fill the teaching staff, the institution published an actual announcement on online platforms (Facebook page).

During the online site-visit, it turned out that the college staff was staffed with only two new specialists teaching general subjects (English mathematics), who responded to the announcement on the university's Facebook page. The candidates were selected by the college principal, and then the candidates were presented to the cyclical committee. However, according to the college lecturer selection regulations, the selection of new lecturers is carried out by a cyclical committee, from among the candidates selected from the database, by a simple majority of votes, and the candidacy is finally approved by the principal. The criteria for the selection of lecturers are described in detail in the relevant regulations (MIM IIC Medical College Lecturer Selection Regulations, MIM LIC Medical College Lecturer Passport), according to the data provided, the institution is guided by these requirements during the selection. These include knowledge of foreign languages, computer skills, young age, work experience - at least one year of basic or conventional professional.

The job description developed by the institution is presented generally. Required entry data are - education - secondary vocational or higher, work experience - at least one year of basic or conventional vocational. However, the basic education required for the teaching of the professional modules of the various APs is not provided (reference is made only to the requirements of the state education standard). The analysis of the presented data shows that most of the lecturers teach 3-6

(sometimes even 8) professional subjects/modules. In some cases, instructors teach subjects (including professional) in various APs. The analysis of the submitted documents revealed that sometimes there is a discrepancy between the "module content" of the basic education of a professional subject teacher. For example, the professor who teaches the AP - "Pharmacy and Economics" is a paediatrician with basic education and not a pharmacist or a pharmacist (or economist).

During the online site-visit, it was revealed that sometimes in order to distribute the lecturers' workload conveniently, it is necessary to make some changes in the APs (transfer of subjects to different semesters). As a result, students who have not completed the pre-requisite module (according to the state educational standard) move on to a professional subject.

According to the policy of the assessment of the professional quality and the work of the teachers it is supposed to implement data collection, assessment and analyses as well as assessment of the quality of teaching methods. And for this, there are a number of activities such as class observations and questionnaires on regular bases. To achieve this goal different frameworks were developed by the IQA department of the Institution:

1. Indicators for the assessment of the quality of the teaching staff (should be filled in by each teacher, and on the bases of this assessment of the overall activities of each teacher, and usage of the differentiated payment)
2. Assessment of the qualitative standards of the teacher filled in by the students (Students' questionnaire)
3. Questionnaire on the assessment of the classroom activities and the teacher (questionnaire for students)
4. Educational process evaluation questionnaire completed by students (questionnaire for students)
5. Assessment sheet for the monitoring of the teaching process (the special sheet that is filled in after the class observations)

According to the documents submitted to the SER (IQA department report), surveys were conducted among students in 2018. During November with the 2nd, 3rd, and 4th sheets, through questionnaires. The content of the questions touches more on the pedagogical skills of the lecturers than personal qualities. From a professional point of view, there are almost no questions describing the lecturer or the course.

No clear grounds for the use of 1st and 5th leaflets were found. Nevertheless, the institution conducts regular classes by lecturers, directorate and IQA specialists. The information about that was confirmed during their visit. The study of the teaching protocols showed that as a result of the latter no problem was removed, there are also no examples of changes based on them (for example, a change in the teaching method).

The institution has developed a differentiated system for assessing the quality standards of the lecturer, according to which categories I, II, and III have been separated (the difference in remuneration for each category is 2000 AMD). According to the regulations, in order to maintain order, lecturers must submit certain work done at the end of each academic year (scientific article,

textbooks, essay management). As it became clear from the study of the documents from the online visit, the differentiated system is being implemented in the institution.

Despite the various measures taken to identify the needs, such as classes and surveys, no major problems or needs were identified.

According to the institution's SER and expert online site-visit, the most effective mechanism for identifying needs at the institution is partner conversations (both between teachers and students), through which it was possible to identify the following issues: teachers' knowledge of foreign languages (English) and computer programs. lack of capacity. As a result, in 2019 In September-November, 3 months (1 day a week, 1 hour) of foreign language and computer operator training courses were organized. As it turned out during the online visit, the mentioned courses were attended by a small number of lecturers - 3 to 4 people, as the participation was voluntary. The effectiveness of the courses was not evaluated.

During the examination, it became clear that the institution had planned to implement measures for the improvement of teachers during the 2018-19 academic year, according to the presented plan: methodological, professional, and the direction of reforms. The list of events included: teaching and methodological work with new teachers, study visits to the best organizations related to each profession, training within the institution, organization of master classes, foreign language, computer courses, etc. No evidence was found for the implementation of the above measures (except for foreign language and computer skills courses).

The institution has a "Policy of ensuring the stability of the main faculty ensuring progress" (approved on 27.08.2019), which particularly presents the admission of young specialists and involvement in the scientific-educational processes of the institution, ensuring the opportunity for staff development u ensuring stability, professional advancement of the faculty.

The teaching staff consists of 26 lecturers (9 staff members, they are specialists in the field, for example, doctors, dentists, and cosmetologists), their average work experience is 39.2 years (according to the data provided). The self-analysis mentions the slow pace of rejuvenation of the teaching staff of the institution as a weak point, and during the online visit it was also confirmed that there is no tangible rejuvenation of the teaching staff yet. In addition, the majority of lecturers teaching professional modules have no substitutes. The problem of their short-term absence is solved by mechanical rearrangement of the schedule (found out during the online visit).

During the online site-visit, it turned out that the professional development of the teaching staff is carried out on the own initiative of the staff, mainly it is typical for those specialists who, in addition to the teaching process, are also engaged in practical activities (doctors, cosmetologists, dentists). Thus, some lecturers participate in various professional events: seminars, trainings. However, no grounds were found for initiating, organizing, encouraging or enforcing such events by the institution.

According to the job description of the lecturer of the medical college of "MIM" LLC, in addition to professional knowledge, the lecturer is required to have knowledge of foreign languages and a proper level of computer skills. According to the document, in addition to pedagogical activities, the lecturer must perform other functions: subject modules, curriculum development (in accordance with state educational standards), accountability, or other functions. In addition, the lecturer must ensure the proper level of his / her professional activity, cooperate with colleagues in

order to exchange experience, increase the efficiency of professional activities, consistently improve his / her subject-professional knowledge and skills, carry out creative-research work. However, it became clear from the online site-visit that most of these activities are carried out exclusively on the lecturer's own initiative; In this sense, the introduction of a differentiated system for assessing the quality of the lecturer is considered by the institution as a tool to encourage professional progress, which is still in the implementation stage.

The description of the teaching staff of the college attached to the self-analysis and the document presenting the functions describes only the position of the library coordinator, chief accountant and cleaner, according to which it can be concluded that the institution does not envisage the involvement of other teaching staff. In fact, in addition to the lecturers, the institution has no other staff involved in the teaching process, such as internships, laboratory assistants or other support staff. As it turned out during the online visit, these functions are fully performed by the module teacher. During the online visit, it became clear that due to the availability of practical laboratory training in the MCs, there is a need to staff such specialists.

As a result of the analysis of the organizational structure of the institution, it became clear that the educational institution does not have a separate administrative staff, all responsibilities are also performed by the faculty members.

**Considerations:** So as a result of the analysis of the collected data, the expert group positively assesses the fact that the teaching staff of the institution is staffed with experienced specialists with many years of pedagogical experience. On the positive side, most lecturers are full-time employees. However, the small number of staff, the fact that many specialists teach multiple modules, the shortage of young staff, and sometimes the need to find a qualified professional, as all this poses a serious threat to the efficiency of the educational process, pose great risks in terms of sustainability. For example, the long absence of even one lecturer (for various reasons) can hamper the implementation of a significant part of the APs (due to the lack of a replacement specialist). It is also problematic to be able to quickly involve new, qualified staff (including foreign language teachers) in the educational process, if necessary, which may hinder the realization of the strategic goals of the institution. Despite the existing staff policies, procedures and regulations, the institution does not yet fully operate the mechanisms that will allow staffing to be staffed in a short period of time if necessary. In addition, forced changes in APs due to a shortage of teaching staff can also have a negative impact on student achievement.

The expert group also considers the problem of the workload of a significant part of the teaching staff negative. On the one hand, the performance of administrative duties can be considered as a tool that promotes career advancement, but on the other hand, the performance of many responsibilities can risk the full implementation of all these functions. In addition, it can jeopardize the teacher's professional-research progress, as there is a problem of time under a heavy workload. This does not create a favourable condition for the implementation of the rejuvenation policy of the teaching staff.

Although the college conducts regular surveys and lectures among students and faculty, it is worrying that their implementation has not revealed any serious problems or identified the need for faculty. This indicates that there is a problem of increasing the effectiveness of these measures.

According to the expert panel, the policy adopted by the institution aimed at ensuring the stability and quality of the teaching staff does not fully serve its purpose. Although there are

procedures developed in the college, the recorded facts testify to the problems of their implementation and application. The institution does not regularly carry out pedagogical-professional retraining of its teaching staff and does not consistently supervise those processes. The above-mentioned circumstance can have a negative impact on the effective implementation of student-centred learning, which is a strategic goal, as the latter implies the introduction of new, modern methods of learning, the evaluation of their outcomes.

The de facto absence of teaching-administrative staff jeopardizes the effective management of human resources at the institution, as it hinders the progress of the teaching and supporting staff.

**Summary:** Taking into account that there are issues regarding the rejuvenation of the teaching staff, involvement of the new staff members, replacement of lecturers, almost all the responsibilities of the teaching staff in the college are performed by the lecturers, besides most of them teach 3 to 6 subjects (sometimes more) and they at the same time have responsibilities of the administrative staff. There are practically no pedagogical trainings in the institution, and professional trainings are carried out exclusively on the initiative of the lecturers, the assessment of the teaching qualities of the lecturers implemented in the College such as class observations and questionnaires do not contribute to the identification of needs and problems, "Medical Institute after Mehrabyan" LLC medical college does not meet the requirements of criterion 5.

**Conclusion:** The expert panel assesses the relevance of "Medical Institute after Mehrabyan" LLC medical college institutional competencies to the requirements of CRITERION 5 insufficient.

## CRITERION VI. RESEARCH AND DEVELOPMENT

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

### FINDINGS

One of the goals of the College 2015-2020 strategic plan, as well as one of the priorities of the college, is research and development. The College with its SP seeks to strengthen the connection between science and education, to internationalize scientific activity. In particular, one of the goals of the college is: To promote students' independent research activities, to develop general and professional skills through research activities, to increase the level of involvement of the teaching staff in national and international research programs, to find international partners in the field of research. However, during the examination, it became clear that during the actual reporting period, the college did not take clear steps to encourage independent research activities among students, as well as there are no grounds to confirm the implementation of research activities among students. According to the college, more than 69 scientific works (including 22 teaching-methodological manuals) have been published by the lecturers of the college during the last five years of the 2015-2020 SP performance. However, most of the manuals (according to the data provided) were published during 2008-2012 (during which the institution provided higher education). However, it is not clear how the college contributed to the research. It became clear from the expert online visit

that the contribution of the results of this work to the educational process of the college is not actually present.

According to protocol N13 of 03.03.2015 the scientific council for the research activities made a decision to ensure staff participation in various application programs, to involve both teaching staff members and active students in research activities.

The results of the research are presented to the general public through the international health bulletin published by the institution, individual scientific articles, books and other means of dissemination of information. For that purpose, as in order to strengthen the connection between science and education, in accordance with the steps of the Strategic Plan goal 4.7, the implementation of problem No. 2 of 4.7.1, the pedagogical council of the institution on 02.07.2018. According to the 2nd decision of the 2/18 session, it is envisaged that the publication of the international bulletin of the institution, which was stopped in 2010, will resume in 2018. The publications of some of the college professors are in the newsletter.

It became clear from the online site-visit that the college has research work/author or co-author of an article or manual / performed by 10 faculty members (out of 26 faculty members) who are leaders in the field. The vast majority of the college faculty, about 62%, do not carry out such research activities. This fact is evidenced by the information contained in the lecturers' annual assessment sheets - most of them do not have notes on their research work or on the preparation of an essay, article or publication with any student. In addition, there are no clearly defined requirements for the submission of essays as student research work at the institution. Moreover, some modules do not have approved lists of essays.

During the examination, it became clear that the directions of the approved researches (for example, First Aid, Environmental Protection from Pollution, Recycling of Household Waste using Innovative Technologies of the Republic of Armenia, Human Healthy Lifestyle) Therapeutic cosmetology, dental work /. The same should be noted about the actual scientific research carried out by the college staff.

At the beginning of the academic year, each lecturer of the institution prepares a calendar thematic plan for the given course for the approval of the educational part, where he/she presents the names of the topics and time for the intended individual work of the students. It became clear from the expert online site-visit that the students had introduced their own works (essays) in order to develop their research skills. However, the topics of the latter do not arise from the annual or medium-term research planning of professional committees or the demands of employers. They are mainly presented around the topics chosen by the lecturer. Students can submit essays on their favourite topics. There are no substantive requirements for essays. The expert online visit revealed that often the topics can repeat the lessons learned in the same subject. There are no cases in the college when the topics of the student essays present the order/suggestion/ of the employer in the given field.

The expert online site-visit revealed that there are no research activities implemented by the teaching staff of the College there are no grounds that the research outcomes are the bases of the academic programs and models. There are no such examples of the study of the teaching experience and the examples of their implementation to improve the quality of teaching.

The institution ensures the possible participation of the teaching staff, mainly in the field of Pharmacy (partly in the field of Dentistry), in the research process.

According to the college's performance, each year the college increased the involvement of seven students in research. However, the expert online visit revealed that the students are not involved in research. From 2018, the college's health bulletin was published, which included its

own research papers of international partners. The published articles are mainly scientific researches, they are not included in the educational process of the college.

In the process of internationalization of research activities, there are no programs for the implementation of scientific or research topics jointly with international partners - policy.

It became clear from the expert online visit that the college has a program for linking scientific research and educational process. According to the program, in the 2020-2021 academic year, each student must have the scientific research of his / her choice in the form of a report or a final essay. However, before graduating, the student must be the author or co-author of one published scientific article.

It should be noted, however, that during the expert online site-visit it became clear that an implementation action plan has not yet been developed for the implementation of the proposed program. During the expert online site-visit, it became clear that the essays presented by the students from each module are informative. During the examination it became clear that there is no requirement in the essays, the students are not required to have an analytical component. During the online visit, it became clear that the essays in different modules can also repeat the topics of the lessons provided by the module.

It should be noted, however, that there are examples of analytical work by students majoring in Pharmacy. According to SER data. According to the agreement signed between the Scientific-Technological Center of Organic-Pharmaceutical Chemistry of the National Academy of Sciences of the Republic of Armenia (Appendix 32), the college students conduct their laboratory-practical classes in general-inorganic chemistry, organic chemistry, analytical chemistry, chemistry, physics where, in addition to strengthening theoretical and practical knowledge, they also participate in some scientific experiments with the faculty with the scientific title of lecturers.

**Considerations:** The panel welcomes the fact that the College is making efforts to improve the College's research activities by developing a number of documentation bases, setting research development as a goal in its SP. However, the lack of plans for the development of research activities will jeopardize the achievement of the goals set by the SP. Clarifying research directions and developing and implementing an effective research policy will help attract more faculty and students to the college.

It is concerning that there are no research topics in the professional committees on which the faculty and students of the college can conduct research. Although some professional lecturers still have a degree, have published articles, it is still worrying that this is done on the personal initiative of the Teaching staff, without the encouragement of the college. It should be noted that the research conducted by the Teaching staff is mostly of a scientific nature and does not correspond to the APs carried out by the secondary professional institution. This hinders the effective implementation of the results of these studies in the educational process. The fact that the vast majority of the college faculty do not carry out research activities is concerning.

The expert group estimates that the institution has tried to introduce the research component into the educational process, including the requirement for students to submit mandatory essays. However, it is worrying that the institution has not set clear content requirements for writing essays. The existence of requirements would contribute to the formation of analytical, critical thinking among students, which is also defined at level 5 of the NQF. It is disturbing that students submit essays that sometimes repeat the material they have studied. Thus, students simply submit their already familiar materials in writing as essays, which hinders the

development of students' ability to work independently. In this regard, close cooperation with employers will contribute to the study of current issues in the labor market, will increase the involvement of employers in the educational process.

The development of college research papers can be contributed to the development of college research, including college professors, in some cases students, and professionals from partner international colleges. However, it is concerning that the articles published in the collection are more scientific and the results are not included in the educational process.

**Summary:** Taken into account that the College has set the goal in the SP of developing its research without specifying and defining research directions, no active steps have been taken to involve college lecturers, students in the research process, no steps have been taken to develop research thinking among students, research results are not included in the teaching process. The expert panel finds that "Mehrabyan Medical Institute" LLC does not meet the requirements of criterion 6.

**Conclusion:** The expert panel assesses the relevance of "Mehrabyan Medical Institute" LLC Medical College institutional competencies to the requirements of CRITERION 6 insufficient.

## CRITERION 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

"MIM" LLC carries out educational activities in its own territories: H. Kochar 21 51 at 51 Komitas addresses. In these area there are rooms for teaching staff and structural subdivisions (mainly combined), a meeting room, library/bookcases, a gym, a computer classroom with 11 computers, a dental laboratory. There is a WiFi internet connection available at 51 Komitas Street. The courses at the institution are organized in 2 shifts, there are 18 classrooms for classes, of which 6 are for lectures and 12 are for practical-seminar classes. The self-analysis states that the students conduct their practical laboratory classes both in the institute's own laboratories and offices, as well as in Yerevan hospitals, maternity hospitals, dental and cosmetology centers, pharmacies / "Slavmed Medical Center" Ltd. , "Arsened" LLC dental center, "Liqvor" pharmaceutical company, "Tonus-les Remedi" LLC pharmacy network /. It became clear from the online visit of the expert group that the institution needs to fill professional classrooms.

Although the college's classrooms have the necessary equipment for theoretical and practical training, such as didactic materials (posters, stands), mouldings, etc., however, expert analysis has shown that the institution's resources are not fully sufficient in all full-fledged practical components. For example, there is a dental laboratory and cosmetology rooms in the institution, but the resources available in the pharmacology technology and pharmacognosy room will not be enough for the laboratory work of all professional modules (skills for making different peaches). Some of the practical trainings of some MCS (Pharmacy, Therapeutic cosmetology), due to lack of resources, are carried out outside the institution, in partner organizations / Mnjoyan Institute of Fine Organic Chemistry, Polyclinic N 11, "Optimia Forma" Aesthetic Medical Center.

The income of the institution is almost entirely formed at the expense of tuition fees. 2003 The "Mehrabyan Scientific-Educational Center" non-governmental organization was founded in 1959, the creation of which has two goals: to be involved in public works, to diversify the sources

of income of the university. The expenses made by the college are based on the financial possibilities of the given academic year. The financial resources from the budget are distributed on an annual basis according to the expenditure budget, which is the educational part and accounting under the direction of the director.

In 2015-2019, the tuition fees of students decreased due to the decrease in the number of students. At the same time, the university has not increased the tuition fees of students, has not reduced the salaries of lecturers, but in the 2020-2021 academic year it plans to review tuition fees by specialities.

In order to attract additional financial resources, the institution participates in various grant programs in the Republic of Armenia. According to contract number 34-DM - 2014 Schoolchildren, institution also participated in the implementation of the public program "Schoolchildren, abstain from smoking" . The teaching staff of the institution met with the school students to inform them about the harms of smoking.

One of the tasks of ensuring financial stability, which is considered a strategic goal defined by the SP, is the compliance of the strategic goals and objectives of the institution with the financial planning aimed at them. Expert analyzes show that the distribution of financial resources is not fully implemented according to the priorities of the SP.

The institution, in accordance with its charter, manages its financial resources, independently determines the directions of their use. The basis for the financial policy of the institution is the charter of the institution, the charter of accounting, the RA Law on Accounting, the "Accounting plan of financial and economic activities of organizations - instructions for its application", the RA Law on Procurement.

According to the directions of the annual distribution of financial resources of the institution, out of 16% of the expenses for the educational-economic purposes of the institution, the expenses of science and research make 2%, the expenses of development - 1%, at the same time the expenses of advertising - 2%. From the expert web-site visit, it became clear that the financial resources for replenishing the resources needed for practical, laboratory training are not "evenly distributed" at the same time. From the online visit of the expert group, it became clear that the necessary resources for the modular programs of some specialities (Therapeutic cosmetology, Pharmacy) are fully provided by the partners. The institution has cooperation agreements for joint use of resources with partners. The college is taught by employees of partner organizations. It became clear from the online visit that, according to the priorities of the RA, the institution plans to have international students, but there are no clear analyzes and assessments for the involvement of foreign students, to ensure the full educational environment for the latter.

The SER states that the college is constantly undergoing ongoing capital repairs, various equipment is purchased, classroom furniture is renewed, and the library fund is replenished. Inquiries about it, which allow the internal stakeholders to immediately identify the existing problems. According to the business plan for 2020-2025 the institution envisaged to carry out expenses for the acquisition and renovation of new premises.

Acceptance, registration and movement of documents at the institution is carried out in accordance with the Information and Document Management Regulation and, according to the Self-Analysis, work is being done to establish a regulated document circulation system, in particular, document circulation automation, digitization of the library fund. The university has electronic archive data of employees and students, current documents. Expert studies have shown that the documents in the institution, compared to the scope of its activities, are large, sometimes the titles are not clear, and do not correspond to the content of the document.

The SER states that the charter, regulations, categories, specialities, curricula, announcements, news, etc. are posted on the website of the institution. The studies of the expert group showed that some of the information is presented on the website, however, there are some omissions.

There is no separate security service in the buildings of the institution for public order, property protection, and observance of internal disciplinary rules, it is carried out by the college staff according to the established shifts. In both buildings, H. Kochar 21 and Komitas 51, the areas are monitored by cameras, fire extinguishers are installed, evacuation-scheme signs are posted. There is no separate aid station in one of the buildings. H's Institute Kochar 21 building is in the territory of "Nor Arabkir". If necessary, specialists can provide assistance. The institution also works to protect the health of its staff and students. From the expert online visit, it turned out that on the last working days of the week, the college medical professors provide free medical examinations and consultations to the students and their parents.

There are currently no students with special needs at the university. There is a ramp at 21 Kochar Street, an elevator is available at 51 Komitas Street. The self-analysis states that there are no surveys evaluating the effectiveness of the institution's environmental safety, health and safety services.

In 2019 "procedure for teacher-student satisfaction in terms of a number of criteria used by the institution" was developed, which was intended to determine the satisfaction of lecturers-students in interpersonal relationships, the attitude of the administrative staff, the logistics of the college, etc. Surveys on the satisfaction of teachers, graduates and students with resources are conducted at the institution. According to the results of the surveys, 93% of the lecturers, 92% of the students are satisfied with the material and technical equipment of the institution, and 88% of the surveyed students are satisfied with the information service of the institution. It became clear from the online visit that for some APs (Pharmacy) the library fund needs to be supplemented with professional literature.

According to the SER, the proposals made as a result of the survey will be discussed at the sessions of the Pedagogical Council. During the online visit, it turned out that those discussions had not taken place yet. Rapid response boxes are installed in the institution, through which the educational part and the QA center regulate, discuss the questions and suggestions raised by the students. It became clear from the online site-visit that the students have their questions and suggestions in the quick response boxes, but the results of the raised questions and suggestions were not visible.

**Considerations:** The expert panel finds that in the current conditions the resources of "MIM" LLC generally ensure the implementation of educational programs. It is considered positive that the institution carries out educational activities in its own areas, where, in general, there are relevant professional classrooms/cabinets, laboratory, computer classroom. As there is a need for professional classrooms at the university, the college organizes courses in two shifts. At the same time, the college uses the resources of its partners to carry out the practical laboratory workshops defined by the APs. Moreover, the necessary resources for the professional modules of "Therapeutic cosmetology" and "Pharmacy" specialities are mainly provided by the partner organizations. In this regard, on the one hand, the expert group considers the use of joint resources with partners positive, which can contribute to the development of students' practical skills, on the other hand, it is worrying that if the partnership breaks down, the institution may not fully implement its educational programs. The priorities set by the SP may be under risk.

It is positive that the institution operates on the principle of self-financing, the income is almost entirely derived from tuition fees. In addition, in 2003 With the help of the Mehrabyan

Scientific-Educational Center NGO, established in 2006, they can diversify the college's sources of income, contributing to the increase and efficient use of the financial resources of the institution. During 2015-2019 period due to the reduction in the number of students, the tuition fees of the students have decreased, however, the institution has not only not reduced the number of lecturers and their salaries, but has also not increased the tuition fees of the students. However, in the 2020-2021 academic year, it is planned to review tuition fees by specialities, which may contribute to increasing the income of the institution.

Expert analysis shows that the policy of distribution of financial resources in the institution is not fully implemented according to the priorities of the goals of the SP, in particular, research and internationalization are among the strategic priorities of the institution, while science and research expenditures make up 2%, development expenditures - 1% Consistency of strategic goals and distribution of financial resources. In addition, as the mechanisms for allocating the necessary financial resources for practical, laboratory training through separate APs are unclear, the policy of efficient allocation of financial resources may also suffer.

There are no plannings and evaluations on the involvement of the international students, thus the institution plans having international students, and there is no evaluations on ensuring the engagement of the international students in the educational process. This Strategic goal can be risked.

As the QA Center identifies the resource needs of internal stakeholders through informal conversations between students and teachers, resource satisfaction surveys, resulting in 93% student and 92% satisfaction with lecturers, may risk the opportunity of identification of real problems.

As steps are taken at the institution to establish a regulated system of document circulation, information automation and documentation management processes can be improved as a result of automation of documentation. It is worrying that the documents in the institution are large, sometimes the titles are not clear. The documents generally need to be regulated or targeted. It is commendable that the institution is working to ensure the health of its staff and students, in particular, medical educators provide free medical examinations and counselling to students and their parents, helping to create a healthier safe environment increase confidence in their medical educators.

The panel welcomes the fact that a faculty-student procedure has been developed for a number of criteria used by the institution, which can regulate the inquiry process, as well as surveys of faculty, alumni, and student resource satisfaction, but the resulting recommendations are still valid. were not discussed u introduced, jeopardizing the effectiveness of the polls.

**Summary:** Taking into account that "MIM" LLC provides the necessary conditions for the implementation of its APs, makes efforts to improve the existing resources, to acquire new resources, and uses the resources of employers to achieve the goals of APs, in general, to organize the educational process. There is a safe environment, it uses the opportunities of diversification of financial resources, the expert group finds that it has the necessary resources to create the learning environment u the defined missions:, therefore it meets the requirements of Criterion 7.

**Conclusion:** The expert group assesses the compliance of the institutional capacities of "Mehrabyan Medical Institute" LLC with the requirements of CRITERION 7 as satisfactory.

## CRITERION 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

"MIM" LLC Medical College 2015-2020 In order to achieve the goal of public responsibility in the Republic of Armenia (paragraph 4.8), the institution has identified a number of issues, including the establishment of relations with external stakeholders, expansion of cooperation, raising the level of accountability, development of mechanisms to ensure the educational, scientific and cultural progress of society. For this purpose, a procedure for ensuring accountability to stakeholders (external, internal) has been developed and approved by the institution (approved on 27.07.2016). Actions to this end include the following: conducting regular meetings of structural subdivisions; through networks. One of the steps envisaged to strengthen relations with external stakeholders is the implementation of surveys among the latter the participation of employers and graduates child. at the meetings of the board, which is fixed in the order N 02/15 (02.01.2015).

There are acting policy and procedures in the institution, the proof of which are the presented annual reports of the departments and the director, the protocols of the meetings of the pedagogical council and etc.. However, the reports do not contain the indicators of the corresponding points of the SP and its implementation, with the help of which the implementation of the whole SP will be assessed. For example, the report of the director mainly include overall conclusions about the corresponding year and mainly refers to the achievements or instead they refer to the weak points and their description and the further actions accordingly. During the expertise the report of the director were not published in the web-page of the institution (as it was supposed to be by the charter). Analysis of subdivision reports, identification of problems based on them planning of corrective measures has not been carried out.

The institution uses a number of methods to raise awareness of its activities among the general public. The institution has a Facebook page (Yerevan Medical Institute after Mehrabyan) and an official trilingual website (<http://www.armmed.am>), which are under the direct responsibility of the director. Some sections of the site's Russian and English versions have not yet been translated. The institution has printed advertising bulletins (in Armenian, Russian and English). The institution participates in the annual educational expo-exhibitions, as well as sometimes places advertisements on various public information platforms. The official website of the institution is somewhat dynamic, allowing for more detailed information with links, however, the website page does not yet have elements of accountability, for example, as planned, the website does not yet post the annual reports of the principal (or other departments). At the time of the review, the site did not have the rules and procedures, although the institution plans to do so in the near future under a stakeholder accountability procedure.

However, it should be noted that the name "Mehrabyan Medical Institute" (without LLC - Medical College) is written on online platforms, in printed materials and on the outdoor advertising posters of the buildings. Moreover, on the Facebook page, in the "Information" section, in the "Purpose" section, it is written that the institution offers higher education through educational programs in "Pharmacology" and "Dentistry" specialties. At the beginning of the self-analysis, in the brief information section of the institution, it is mentioned that "MIM" once trained specialists with

higher education, but in 2015, this function was in accordance with the order of the Minister of Education and Science (30.12.2015 2., N1081-A / Q ) was terminated, and the name of the educational institution became "Medical Institute after Mehrabyan" LLC Medical College; to date, it trains only specialists with secondary vocational education qualifications. During the online visit, it was clarified that the institution does not plan to resume the implementation of higher education programs in the near future, although such plans are still available in the future. During the online visit, it became clear that the future plans of the institution refer to the standards adopted for the development of the educational institution as a college. As a result of the analysis of the rating indicators of the institution cited in the self-analysis, it was found that the Academic Ranking of World Universities - European Standard ARES - 2019 Armenia rating organization included the institution in the list of the highest institutions of Armenia.

As for online platforms, the official website of the institution lists the contact details of the organization, and there is a link to the Facebook page (the only online platform that provides feedback), but there is no direct feedback on the website. The "Career Center" section of the website lists the names of partner organizations (employers' employment centers), but they do not provide links to the latter. During the online visit, it was found out that until recently, there was no feedback from the graduates at the institution, which caused some difficulties in writing the Self-Analysis, but, as the representatives of the institution noted, the educational institution started to create a graduate database in this direction. Some work is already being done in the institution.

Within the framework of the activities promoting the establishment of public relations, Order No. 72/16 was approved at the institution (approved on 29.12.2016,) in order to maintain public health in "MIM" LLC, to detect and prevent various diseases in time on Fridays of each week, from classes. Afterwards, the relevant specialists of the college will provide a free medical examination to the students and their parents. However, there were no grounds for reviewing the documents or conducting the event on a regular basis during the visit.

The institution offers free preparatory courses for the citizens of the Republic of Armenia, the participants of which can later apply to a college or other secondary vocational education institution for admission.

According to the self-assessment data, free first aid courses are provided in and out of college (for example, in schools). Although there were no schedules for such courses or reports on their implementation, a description of the First Aid course with its didactic materials was posted on the college website.

During the expert online visit, it became clear that there are no other mechanisms for transferring knowledge to the public at the institution.

**Considerations:** The expert panel positively assesses the policy of the institution of ensuring the accountability of the institution towards the internal and external stakeholders. The expert panel mentions as well the institution has developed procedures of reporting. The reporting is implemented on regular bases. However, there is a need of revision of the report frameworks, because on the acting ones there is no connection with Strategic plan goals and the actions are not presented clearly, there are no deep analyses, the results are not mainly presented digitized or presented in substance. This can have a negative impact on the full assessment of the problems that have arisen, the identification of needs, the correct planning of measures for them, and the effective implementation.

The expert group positively assesses the measures taken to provide information about the institution to the general public, such as a website, a Facebook page, the publication of booklets, etc. It is also positive to participate in events of public importance, to organize trainings, meetings, to conclude agreements with various republican and international partners, etc. However, the expert group is concerned about the fact that there may be a misunderstanding among the external stakeholders about the functions performed by the educational institution. The mentioned issue is connected to the name of the institution. So, on the web page (trilingual), in the Facebook page and advertising materials, bulletins, and even in some contracts only the name of Mehrabyan Medical Institute is mentioned (without LLC Medical College), which may create a false impression for external stakeholders (future applicant, international partners) that the institution carries out the higher education. Proof of the latter is the fact that the Academic Ranking of World Universities - European Standard ARES - 2019 Armenia rating organization includes the institution of RA among RA universities. This circumstance can risk the establishment of transparent relations with the external stakeholders of the institution, harm the institution in terms of gaining new international partners, and effectively cooperating with them.

Although it was planned by the procedure the publication of the reports of the director and the departments, however, it has not happened yet, which does not contribute the transparency of the institution's capacity.

It is positive that the institution initiated the classes of first aid treatment. However, the expert group is concerned about the fact that the college does not have clear mechanisms for the continuous transfer of public knowledge, which hinders the formation and strengthening of public relations.

**Summary:** Taking into account that the institution has an established accountability policy. The external-internal stakeholders of the institution are involved in the reporting platforms, the institution's website and Facebook page operate to ensure transparency, certain feedback mechanisms, certain mechanisms for providing services to the public, the expert group considers that "Mehrabyan Medical Institute "LLC medical college meets the requirements of criterion 8.

**Conclusion:** The expert panel assesses the compliance of the institutional capacities of the medical college of "Mehrabyan Medical Institute" LLC with the requirements of CRITERION 8 as satisfactory.

## CRITERION IX. EXTERNAL RELATIONS AND INTERNATIONALIZATION

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

### FINDINGS

The goal 4.6 of the acting Strategic plan of the institution is to expand international external activities, with the aim of raising the profile of the College, expanding the scope of

cooperation with foreign students, promoting student mobility, and promoting stakeholder participation in international programs.

The department of organizing Internships, Employment and Internationalization of College has a charter, a short-term strategic plan in the form of an annual work plan. Policies and procedures encouraging foreign relations as such are not presented by the college in the SER and appendices as such.

According to the acting SP of the institution internationalization is one of the priorities of the College. The institution plans to engage international students. The expert online site-visit revealed that the number of international students for each AP is 25. And the total number of the international students should be 50-75. The institution has not yet studied the need for space, teaching staff (human resources), material resources and financial opportunities with the addition of international students. During the examination, several first-year foreign students of Armenian origin studied at the college.

In order to ensure the flow of foreign students, the institution has created a trilingual website, which will ensure internationalization and transparency in front of the society.

In order to create an environment conducive to the development and internationalization of the institution, the institution has an internship organization, employment and international relations department. The charter of the department, the short-term strategic plan are presented in the form of an annual work plan. The charter specifically mentions the tasks and functions of the department. One person is responsible for carrying out these functions, who, in addition to dealing with internationalization and foreign relations, is responsible for organizing and supervising college student internships, concluding contracts with databases, employment of alumni, setting up a college website, and updating information.

In the work plans of 2019/2020, but in plans for 2020/2021 presented by the department coordinator (medium-term strategic programs), the same actions are repeated (even 2019 have not been changed into 2020). In the annual report for 2019/2020 presented the work done by the department, however it lacks the analysis of the work done, the evaluation of the current challenges, the summary of trainings, the staff and student mobility and continuity programs, analytical information on benchmarking. As mentioned in the IV, work is being done on the benchmarking of the "Beauty cosmetology" professional educational program operating at the College of the University of Utena, Lithuania.

The college has signed cooperation agreements with local and international institutions. Local partner organizations are: H. Buniatyan Institute of Biochemistry, "Liqvor" Pharmaceutical Company, "Arsened" Dental Center, "Scientific-Technological Center of Organic and Pharmaceutical Chemistry of NAS RA", "TONUS LES" Pharmacy Network, "SLAV MED" Medical Center, "Arabkir" A, Occupational Center Employment center, "TANGER" employment center. Local institutions mainly serve as training bases, internships, libraries, as well as employment agencies. Employees from these organizations also teach at the college. During the expert online visit, it became clear that some college graduates had been employed in collaboration with the employment agency.

The College has signed agreements with various foreign institutions for international cooperation.

Within the framework of the signed contracts, the college recorded the following results:

- Two students of the Medical College in Daugavpils, Latvia, continued their studies at the Mehrabyan Medical College for 3 months, and the lecturers of their college and the director in Yerevan got acquainted with the activities of the University in order to exchange

experience. The same process was performed by 2 college students and 2 staff members at Daugavpils City Medical College in 2017, 2018.

It should be noted, however, that the mutual visits of students and lecturers have stopped for so long and are not continuous.

- Daugavpils City Medical College suggested to exchange curricula for the introduction of "Therapeutic cosmetology", "Nanny training" specialties and module programs during visit with the medical college in Daugavpils, Latvia. However, the Nanny Training Program has not been introduced in college. It became clear from the online expert site-visit that within the framework of "Therapeutic Cosmetology" AP there were no exchanges of plans, modules or programs.
- The international medical bulletin of the Mehrabyan Medical Institute has been published since 2006. It contains articles from college as well as fellow college professors. Publication after the break of 2010, was resumed in 2018.

Articles co-authored by the students and teaching staff members of the college were published in the International Medical Bulletin of the Mehrabyan Medical Institute, as well as in the scientific-medical journals of the Medical College No. 6 of the Russian Federation and the Daugavpils Medical College. It became clear from the expert online site-visit that this process is not regular.

- Benchmarking of "Dental Technical" specialty was performed between Utena Medical College "Mehrabyan Medical College". They received the specialty program from Utena Medical College. As a result of the comparison, the practical component was introduced in the final attestation and student submits his/her work to and presents it during the exam. Benchmarking was carried out with 3 different colleges of "Nursing" specialty, as a result of which certain differences were registered in the number of modules and the number of pre-graduate internships. In this regard, however, no changes in the curriculum of the specialty "Nursing" were offered in the modular programs.

At present, the introduction of a credit system in the educational process of the college has become imperative, as it becomes mandatory for benchmarking in cooperation with international partners, and work in this direction is planned.

The college has a preparatory department, where both RA citizens and foreign citizens can be admitted. There are no students in this academic year due to Covid-19 Pandemic and restrictions in various fields. Preparatory courses are organized at the college for foreign students, where they are taught the Armenian language.

The experts online site-visit revealed that the knowledge of a foreign language (English) is quite low among college students. This is evidenced by the fact that students do not use foreign language literature due to their lack of knowledge of a foreign language (English). During the expert online site-visit, it became clear that the level of foreign language (English) knowledge of the teaching staff is not high. Teachers will not be able to teach professional subjects in a foreign language.

At the same time, the college provided some basic English language training. However, prior to the training, the level of knowledge of the Teaching staff was not assessed, the participation of the lecturers in the trainings was voluntary. 2 lecturers from the college Teaching staff participated in the training.

During the online site-visit, it was found out that in addition to the compulsory English and Russian language courses taught at the college, no additional classes are organized for foreign language students.

**Considerations:** The panel welcomes the College's efforts to lay the ground for internationalization and development of foreign relations. The strategic plan of the college aims to expand international and foreign activities, setting goals to increase the recognition of the college,

to expand the scope of cooperation, having foreign students, promoting the mobility of students and teachers, promoting the participation of stakeholders in international programs. To achieve these goals, the college has developed regulatory documents, appointed a responsible unit, signed contracts with international partners, and is taking steps to attract international students. The full and well-planned implementation of these activities, the regular response to the challenges will contribute to the achievement of the set goals.

The existence of cooperation agreements signed by the college with local "international institutions" is considered positive. Local institutions mainly serve as training bases, internships, libraries, as well as employment agencies, which help to solve the problem of employment of graduates in their profession. However, the panel believes that in order to train professionals in-line with labor market requirements, the college needs to strengthen and expand the scope of cooperation with employers. Which will have a positive impact on the continuous improvement of the education provided.

It is positive that Mehrabyan Medical Institute's International Medical Bulletin is being republished, which includes articles by both international and local authors as well as college-leaning students, which can help work closely with the international community to increase college visibility.

The expert panel positively assesses the college benchmarking experience, which in some cases has yielded positive results, but if the process is more targeted, it will create opportunities for faculty and student mobility.

The expert panel is concerned about the low level of foreign language skills of the teaching staff and students along with the set goals, which will risk the realization of the set goals of the college aimed at internationalization. Improving the knowledge of English will contribute to the study of modern foreign language literature by students, as well as to increase the involvement of teachers and students in the process of internationalization, activation of mobility, the study of good experience by teachers. This will provide additional financial inflow, contribute to the implementation of the college's development programs, and other goals.

**Summary:** Taken into account, that the institution has aspirations for internationalization, certain regulatory documents have been developed, a person responsible for coordinating international affairs and foreign relations, certain agreements have been signed with local and international organizations, it is an example of benchmarking experience, the expert group believes. "Mehrabyan Medical Institute" LLC Medical College meets the requirements of criterion 9.

**Conclusion:** The expert group assesses the compliance of the medical capacities of the medical college "Mehrabyan Medical Institute" LLC with the requirements of CRITERION 9 as satisfactory.

## CRITERION X. INTERNAL QUALITY ASSURANCE SYSTEM

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

### FINDINGS

"MIM" LLC has developed a quality assurance policy and procedures to ensure the quality of its APs. The latter, according to the SER, are aimed at the implementation of the tasks of the mission of the institution the goals defined by the SP. The goal of the policy is: to increase the quality of teaching, research, management processes and efficiency. In the SP for 2015-2020 as well, one of the strategic tasks for the development of the SP is to increase the efficiency of the internal quality assurance system, which outlines the steps to be taken and the expected results. In particular, the development of criteria for SER of the main areas of activity of the institution, the improvement of quality assurance systems for monitoring the educational activities of the institution, the development of professional skills of the teaching staff, the development of systems for objective assessment of students, the improvement of external criteria preparing for the processes.

The expert analysis showed that the quality assurance processes of "MIM" LLC are defined in a number of documents of the institution (review of the internal quality assurance system of "MIM" LLC, quality assurance policy manual of the institution, benchmarking policy - procedure). However, the above-mentioned processes, based on the analysis of the performance assessment of the SP, are not fully implemented.

According to the self-analysis, at present the institution has set a task to improve the existing quality assurance mechanisms and tools, in particular, sociological surveys, benchmarking of best practices in quality assurance processes, the teaching process. It became clear from the online site-visit of the expert group that the procedure for conducting surveys among students has been regulated since 2018, the issues raised in the inquiries only refer to the need for renovation of the buildings of the institution, but no issues related to the educational process were addressed. Surveys conducted among lecturers are not regulated yet, besides, they try to raise issues through conversations, and there are no examples of analysis of identified issues. Examples of benchmarking of QA processes are not visible. The issues identified as a result of the organized lectures were not analyzed and were not the basis for the improvement of the APs. In addition, there are no cases of mandatory-regulated discussion of the opinions of the final attestation commissions.

The QA system of the institution was contributed since 2018 the College is now in the change period of the quality cycle still in the process of planning and acting /Introduction of a system of mutual evaluation of the quality of the institution-employer cooperation, implementation of surveys with external stakeholders, monitoring of the educational activity of the institution and improvement of the QA system, surveys among students and lecturers, external evaluation/, the processes of the assessment and improvement are not started yet. The institution has 2019-2020 short-term strategic plan for evaluation of the IQA processes, where it is presented the content of the work and the responsables, time for it. the Expert panel online site-visit revealed that the QA processes of the institution are not implemented with the principle of PDCA cycle.

The QA center of the institution was created in 2014. At the beginning it was in the department of the "Internship, Career and International Relations Center". Then, since 2018 it was separated as a separate division. According to the organizational structure of the institution, the IQA center of the institution is reporting to the Founders Council, however, before it was reporting to the director of the institution. It should be noted that the director of the College is also member of the Foundars' Council. According to the manual of the IQA center the Founders

Council discusses the results of the IQA processes and suggests the acts for improvement. The online site-visit revealed that there are no examples of such activities.

The institution has an internal QA center with two people in charge: The head of Center and an employee who is a member of the teaching staff of the college, both of the responsible work as a teachers at the college. The work of the subdivision is supported by the structures and subdivisions involved in the quality assurance system (Internship organization, employment and foreign relations, internationalization center, chairmen of cyclical commissions, cyclical commissions, course supervisors, SC). Since September of 2019-2020 academic year, the salaries of the staff of the IQA Center have been increased, and two lecturers, who directly assist the center's work, receive an incentive fee. Volunteers (students from different educational institutions) have been participating in the work of the IQA Center processes since 2018. There is a separate office-room for the quality center employees that is furnished and equipped. It became clear from the online site-visit of the expert group that the person in charge of the QA center had passed a training at ANQA.

The Self-Analysis team is involved in the QA processes /internal stakeholders/. It became clear from the online site-visit of the expert group that the lecturers and students participate in the surveys and interviews, but they are not involved in the processing of development of the surveys. According to the college self-analysis, the institution regularly reports on the fine organic chemistry after Mnjoyan H. Specialists invited from other partner organizations of the Buniatyan Institute of Biochemistry, Liquor Pharmaceutical Company, Arsenent Dental Center, as well as the teaching staff and invited graduates (in the form of annual reports of the director). However, there is no evidence of the involvement of external stakeholders in the QA processes in the college, as well as evidence of the results of the involvement.

The QA Center conducted a teacher and course evaluation, educational resources evaluation, educational environment evaluation through student surveys. Expert analyzes showed that one of the questionnaires for assessing the educational process by students contains only 10 questions, the other - 5 questions. These questions are general, do not refer to the professional qualities of the lecturer, the effectiveness of the course do not reveal problems. As for the assessments, they are equally high, where the problems are not discovered. However, it became clear from the online site-visit that the QA Center had not yet planned to change the nature and content of the questions, and that no changes had been made to the polls. "MIM" LLC presented Self-Analysis according to the established institutional accreditation criteria, tried to provide appropriate bases for external quality assurance evaluation processes. The self-analysis was performed according to 10 criteria, the ANQA electronic questionnaire was completed. The online site-visit of the expert group revealed that the distribution of responsibilities for the work of the SER group was not clearly coordinated. Expert analyzes prove that Self-analysis is mainly descriptive, the analyzes are not based on clear data, however, they contain some analytical elements.

According to the Self-Analysis, the internal quality assurance system of the institution ensures the openness and transparency of the institution through the following means: participation of representatives of partner organizations in the meetings of the Pedagogical council, meetings of alumni, faculty, students, discussions, TV, radio publication, opportunity to express the opinion and proposal of internal and external stakeholders on the Facebook page of the institution, etc. It became clear from the expert group's online visit that there was no active

involvement of internal and external stakeholders in the management decisions. They are not available during the period of the expert analyses there were presented in the College web page the descriptions of some APs, however, the content of the APs were not included, there were no information on the alumni as well. In addition, the website does not have QA documents, analysis of surveys, examples of improvements.

**Considerations:** The expert panel welcomes the fact that the institution creates the ground for quality assurance processes that can contribute to the creation and dissemination of a quality culture. Although the quality assurance policy of the institution is defined in a number of documents of the institution, however, due to the lack of basic data, effective mechanisms for identifying problems do not work, which may risk the identification of common problems and the provision of adequate solutions. It is concerning that according to the analysis presented on the basis of the SP evaluation indicators, the processes of increasing the efficiency of the internal QA system defined by the SP were not fully implemented, endangering the efficiency of the QA process.

Although the institution has set itself the task of improving inquiries, the teaching process, and benchmarking the best practices of quality assurance processes, it is nevertheless concerning that the issues raised by students do not relate to the educational process in terms of content. There are no examples of issues raised by discussions among students and teachers. As there are no examples of QA process benchmarking, the issues identified as a result of the lectures have not been adequately addressed to improve the IQA processes. Clear planning of QA processes will contribute to the achievement of the set goals.

As the quality assurance system has been contributed in the institution since 2018, QA culture development processes in the college are in transition period, including the planning and implementation and in this regard the cycle is not over yet, so the relevant assessments and the improvements based on them are not clearly visible. Besides, in terms of the processes already done, there are no analyzes, preliminary approaches to improvement. As a result, the quality assurance system monitoring mechanisms do not work, they risk the efficiency of the QA management process.

Although a change has been made in the organizational structure of the College to make the QA Center more transparent and independent, the QA Center is currently responsible for the Founders' Council instead of the Director, but it is concerning that the Director is a member of the Founders Council. The members of the Founders Council are also the administrative staff of the institution. The reports of the QA Center, which are to be submitted to the Founders, refer to the subdivisions headed by the Founders themselves. As a result, both the effectiveness of the implemented structural change and the processes of revealing and solving real problems may be endangered.

Although the internal and external stakeholders of the institution are involved in the QA processes in some respects, nevertheless, the practical suggestions made by them are not visible, therefore, the application of those suggestions and their assessments are not available. It risks the progress of the institution, the participation of external and internal stakeholders in the educational process.

Although surveys are conducted at the institution, the identical assessments summarized by the surveys do not allow problems to be identified. However, the QA Center does not plan to

change the content of the questions yet. In addition, the results of surveys are not a basis for decision-making, which has a negative impact on the efficiency of QA processes and administration.

Although the institution has conducted self-analysis for external evaluation processes, there are appropriate grounds, but expert panel analyses have shown that, in general, SER of the institution is descriptive; there are no causal links between problem identification and evaluation. As it turned out during the expert online site-visit that the distribution of responsibilities for the SER Group's work was not clearly coordinated, the institution's internal quality assurance system did not work effectively in the context of external evaluation. The above-mentioned may risk the collection of data for further internal effectiveness of external evaluations and at the institution.

The expertise revealed that the representatives of the partner organizations of the institution participate in the meetings of the pedagogical council, organize meetings and discussions with the graduates, faculty, students, however, the opinions and suggestions of internal and external stakeholders are not included in the QA processes, they are only in the planning stage. In addition, the website does not present the content of educational programs, does not contain college reports, analysis results and information about graduates of the institution. As a result, the effectiveness of the QA policy is endangered and the transparency of the institution's activities.

**Summary:** Taking into account that the QA processes in 'MIM' LLC are in the implementation stage, the internal and external stakeholders are not currently actively involved in the QA processes, their proposals are still in the planning stage, the mechanisms for reviewing the QA system are not clear, there are no summarized assessments. Qualitative analyzes are missing, ways to improve are not clearly separated, data collection mechanisms are deficient, the expert group finds that the medical college of "Mehrabyan Medical Institute" LLC does not meet the requirements of Criterion 10.

**Conclusion:** The expert panel assesses the compliance of the institutional capacities of the medical college "Mehrabyan Medical Institute" LLC with the requirements of CRITERION 10 as **unsatisfactory**.

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA

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

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**Armenuhi Mheryan**

**February 12, 2021**

## APPENDIXES

### APPENDIX 1. CVS OF THE EXPERT PANEL MEMBERS

**Armenuhi Mheryan** - 2000 Graduated from the Department of Finance and Credit of the Faculty of Finance and Accounting of the Yerevan State Institute of Economics, 2000–2004. Postgraduate study at the "Finance and Credit" chair. Since 2006 he has been a lecturer at the Chair of Finance of the Armenian State University of Economics, a candidate of economics, an associate professor. 2006 He defended his dissertation on "Operational Financial Management in Production and Commercial Organizations /Materials of RA Manufacturing Industry/". Participated in the following trainings, courses and programs in 2019. Educational Research and Consulting Center: Data Processing, Statistical Analysis and Submission via SPSS Statistical Package . 2019 ICARE- Application of Econometric Models Using STATA for Addressing Economic Questions. 2016. Training on capacity building for implementing Bologna reforms 2016. ASUE: "Mastery of information systems improvement", "Financial accounting, analysis and audit", "Mastery of application of models and models of economic and mathematical methods", courses. 2009 ASUE - ASUE lecturers training course.

**Shushanik Afrikyan** - in 2001 graduated from YSMU Faculty of Pharmacy, YSMU internship. Since 2012 she has been a member of the final attestation commission of the Master's and Bachelor's degrees of the Faculty of Pharmacy. From 2017 to present, she is the Head of the Department of Computer Examinations at YSMU (internally). In 2015 November, she presented her dissertation on "The Impact of Noopept on Cerebral Circulatory Behavioral Changes". In 2016 February she received the degree of Candidate of Pharmaceutical Sciences. The number of works published since 2007 is 13, including 6 theses, 5 articles, 2 teaching manuals.

**Varduhi Avetisyan** - in 1982 he graduated from the Medical Faculty of the Yerevan State Medical Institute with a degree in Medicine. From 1974 to 1976 she worked at the Yerevan State Medical Institute as a laboratory assistant at the Department of Biochemistry. Until 1993 she worked in Yerevan Medical Center. Doctor-therapist of the union's office. Worked at Yerevan Erebuni State Medical College on a part-time basis as a Pharmacology teacher. Since September 2002 she has been working as the Deputy Director for Educational Methods at Armenian State Medical College in Yerevan. In 2015 he worked as the Deputy Director for Educational Affairs at the Yerevan-Armenian State Medical College "Erebuni".

**Lilit Mkrtchyan** - in 2017 she graduated from the Translation-administration academic program of Yerevan State Humanitarian College. In the same year she entered the Department of Sports Pedagogy (Artistic Gymnastics) of the State Institute of Physical Culture of Armenia.

APPENDIX2. SCHEDULE  
 SITE-VISIT OF EXPERT PANEL CONDUCTING INSTITUTIONAL  
 ACCREDITATION

1.	Meeting with the Director	9:30	10:30	60 minutes	Meeting ID: 841 0575 3989 Passcode: 601763
2.	representatives of the College	11:00	12:00	60 minutes	Meeting ID: 856 0676 4653 Passcode: 975556
3.	Meeting with the vice-directors	12:35	13: 35	60 minutes	Meeting ID: 870 5839 5177 Passcode: 787206
4.	Break, Close discussions of the Panel	13:45	14:45	60 minutes	Meeting ID: 841 4119 0899 Passcode: 712935
5.	Meeting with the alumni representatives (8-10 representatives)	15:00	16:00	60 minutes	Meeting ID: 833 2147 6860 Passcode: 807698
6.	Document observations, Close meeting of the panel	16:30	18:30	120 minutes	Meeting ID: 898 2984 4214 Passcode: 066021

	16.12.2020 <sup>p</sup> .	<i>Launch</i>	<i>End</i>	<i>Duration</i>	<i>Zoom code</i>
1.	Meeting with the Heads of the Chairs /including 3 represented APs/	9:30	10:30	60 minutes	Meeting ID: 851 6359 9690 Passcode: 571737
2.	Meeting with the employer representatives (8-10 representatives)	11:00	12:00	60 minutes	Meeting ID: 876 8898 3960 Passcode: 331038
3.	Break, close discussions of the expert panel	12:30	13:30	60 minutes	Meeting ID: 876 4330 1975 Passcode: 492939
	Meeting with the teaching	13:45	14:45	60	Meeting ID: 817 4240

4.	staff representatives (including 3 APs)			minutes	7639 Passcode: 470354
5.	Meeting with the Student Council representatives	15:00	15:40	40 minutes	Meeting ID: 838 2067 2003 Passcode: 752570
6.	Meeting with the student representatives (10-12 representatives)	16:25	17:25	60 minutes	Meeting ID: 842 4337 4663 Passcode: 230186
7.	Document observations, closed discussion of the panel	18:00	19:00	60 minutes	Meeting ID: 845 1752 2181 Passcode: 846486
<b>17.12.2020</b>		<i>Launch</i>	<i>End</i>	<i>Duration</i>	<i>Zoom code</i>
1.	Simultaneous meetings with the teacher representatives of the 3 APs - "Pharmacy", "Cosmetology", "Nursing care" /12-15 participants/	9:30	11:00	90 minutes	Meeting ID: 816 5761 8930 Passcode: 760840
2.	Meeting with the Student representatives from "Pharmacy", "Cosmetology", and "Nursing care" APs (12-15 participants)	12:00	13:00	60 minutes	Meeting ID: 838 5483 7469 Passcode: 968170
3.	Break, Close discussions of the expert panel	13:15	14:15	60 minutes	Meeting ID: 870 3908 1009 Passcode: 939032
4.	Meeting with the representatives of the departments of the institution /head of the HR department, head of the practice department, counter, responsible of the archive, responsible for the laboratory/	14:30	15:30	60 minutes	Meeting ID: 828 1612 6098 Passcode: 061010
5.	Closed meetings of the expert panel, document	16:30	18:30	120 minutes	Meeting ID: 832 1481 8546

observation				Passcode: 966551
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	<b>18.12.2020</b>	<i>Launch</i>	<i>End</i>	<i>Duration</i>	<i>Zoom code</i>
1.	Meeting with the responsible of the Quality assurance	9:30	10:30	60 minutes	Meeting ID: 839 1035 5303 Passcode: 060928
2.	Open meeting with the expert panel	11:00	11:40	40 minutes	Meeting ID: 838 6645 7536 Passcode: 146964
3.	Meeting with the selected representatives by the expert panel	12:20	13:20	60 minutes	Meeting ID: 841 9736 6040 Passcode: 922546
4.	Break, close discussions of the panel	13:30	14:30	60 minutes	Meeting ID: 853 2964 1044 Passcode: 485724
5.	Meeting with the selected representatives by the expert panel	15:00	16:00	60 minutes	Meeting ID: 879 7673 4384 Passcode: 180021
6.	Close discussions of the expert panel	15:30	17:00	90 minutes	Meeting ID: 882 8901 7997 Passcode: 792722
7.	Meeting with the management representatives	17:30	18:00	30 minutes	Meeting ID: 813 5507 7069 Passcode: 575791

### APPENDIX 3. LIST OF DOCUMENTS FOR OBSERVATION

N	NAMEN OF THE DOCUMENT	CRITERION/STANDARD
1.	2015-2020 Strategic Plan Performance Indicators	1
2.	2015-2020 Strategic Plan Implementation Report / Analysis	1
3.	Annual reports of the whole college or annual reports of the DIRECTOR/ for the last five years	2
4.	Descriptions of "Dental Technician", "Obstetrics", "Cosmetics and art of Cosmetology"	3
5.	Register maintained by the Quality Center, where the benchmarking process is registered	10
6.	General and Inorganic Chemistry" "Pharmaceutical Chemistry" and "Analytical Chemistry", "General Pharmacology" "Private Pharmacology" "Fundamentals of Pathology" modules	3
7.	Any survey data on the content of the subjects, and modules among the students.	3
8.	After completing the module, any document related to the implementation of the residual knowledge assessment.	3
9.	Any protocol of the Appeals Commission,	3
10.	Report (on the results of the appeals conducted during the year u their results)	2
11.	Essays that have become research	3
12.	An essay that has become a research/nurse case ICR /	6
13.	Consulting Services Schedule	4
14.	Course plans/schedule,	4; 5
15.	Basis containing the numerical data presented in the standard	5
16.	Reports of the Chairmen of "Dental Case", "Obstetrics Case" final attestation exams	3
17.	Copies of student essays/pharmacy, nursing, cosmetology/	3
18.	The self-analysis states that each year in the calendar plans submitted by the lecturers there is also u research, professional growth u professional development work planned by him, and it would be desirable to receive copies of such documents.	3; 5
19.	Other scientific-research certificates awarded to lecturers	5
20.	A system of indicators for assessing the effectiveness of teachers'	5

	teaching-methodological u scientific-pedagogical activities, taking it as a basis for the payment of various types of progress of the teaching staff payment of individualized salaries.	
21.	Outgoing document on research development adopted by the Pedagogical Council for each academic year.	5
22.	Reports on the implementation of the measures mentioned in the short-term strategic plan	2
23.	Copies of brochures	8
24.	First-aid treatment. documents related to the provision of free assistance courses, schedule, or documents related to the planning, implementation	8
25.	Reserve lecturer registration database	5
26.	List of the staff that got encouragement	5
27.	Textbooks of Student Assessments for three APs of different courses	3
28.	Textbooks with the remarks on the in-class observations	5
29.	The schedule made by the consultant	5
30.	"Nanny" AP package	3
31.	Procedures of all cyclical commissions, annual plans,	3
32.	Reports of Cyclical Commissions	3

## APPENDIX 4. RESOURCES OBSERVED

- Classrooms
- Laboratories
- Library, Reading Hall
- Medical center
- Offices for the Departments

