# "NATIONAL CENTER FOR PROFESSIONAL EDUCATION QUALITY ASSURANCE" FOUNDATION



EXPERT PANEL REPORT INSTITUTIONAL ACCREDITATION OF DILIJAN STATE MEDICAL COLLEGE

Yerevan – 2022

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# Contents

#### **INTRODUCTION**

The institutional accreditation of Dilijan State Medical College (hereinafter referred to as DSMC) is carried out based on the application submitted by DSMC.

The process of institutional accreditation is organized and coordinated by "National Centre for Professional Education Quality Assurance" Foundation (hereinafter ANQA), guided by regulation on "State Accreditation of Higher Education Institutions and Academic Programmes in RA" set by RA Government Decree N 978-& (dated June 30, 2011) and by Decree N 959-& on "Approval of RA Standards for Professional Education Accreditation" (dated June 30, 2011).

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

The accreditation process was funded by the Ministry of Education, Science, Culture, and Sports of the Republic of Armenia (hereinafter ESCS).

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

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

#### SUMMARY OF EVALUATION

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

The Dilijan state medical college is undergoing an institutional accreditation process for the first time. The DSMC is the only state medical educational institution in the Tavush region, which has a significant role in the training of specialists with average professional, practical skills and abilities in the field of medicine. The college can also implement general education or preliminary professional educational programmes in accordance with the RA law. The professional educational programmes implemented in the college (hereinafter referred to as the AP) are in line with the mission of the institution and correspond to the state educational standards. The expert panel observed the modular programmes "Dental technology" and "Pharmacy". The "Nursing" educational programme is in the transition phase of modular learning. There is a clear separation of theoretical, practical and internship hours in the APs, and consultation hours are also included.

The expert panel positively assesses that the APs of the college are in terms of content in line with the APs of other medical institutions of RA, provided by MKUZAK, which can contribute to the mobility of students and faculty. However, during the site visit, it become clear that the college does not yet have mechanisms to ensure the mobility of students and faculty based on the combination of programmes. As a result of the observations made by the expert panel, it was found that the state educational standards and the academic programmes meet the requirements of the 5th level of the National Qualifications Framework (hereinafter referred to as the NQF). However, the college does not have the appropriate mapping to align the outcomes of the APs with the NQF. According to the expert panel, the faculty of the college uses a wide range of teaching and learning methods in accordance with the expected outcomes of the APs, as well as there is a procedure for « Students' knowledge monitoring and assessment are missing.

The panel positively assesses the fact that many of the APs subjects are taught by experienced doctor-lecturers, and the practical lessons are mainly conducted in the medical institutions of Dilijan. This fact contributes to the achievement of the expected learning outcomes of the educational programmes. This was also evidenced by the discussions with the employers, which indicated both the important mission of the college and the sufficient level of professional skills and abilities of the students. Employers especially emphasize the opening of a pharmaceutical department, the graduates of which can easily find professional work in the region.

Due to the pandemic, education in college was carried out online in certain stages. The members of the expert panel conducted online class observations. It turned out that the available resources of the college could not ensure the effective implementation of online classes. There is no unified platform for online teaching. However, the expert group recorded some cases of professional implementation of the online lessons through slide shows, crossword puzzles, videos, practical videos made by students, and other homework assignments. There is a regulation for student knowledge assessment and appeals. The final state attestation is carried out in accordance with the established procedure through a special commission, which includes representatives of the teaching staff - external stakeholders in the professional field (employers).

Considering the existing challenges (low pay, many problems caused by the war, and inconsolable resources of the college), the expert panel states that the college is staffed by professional, highly qualified teaching and support staff. About 70% of the latter are doctor-lecturers, including employers. This fact certainly contributes to the training of qualified professionals. The college has procedures for the recruitment and dismissal of faculty and staff. However, the selection of the teaching staff is not carried out according to the clear requirements for the professional qualities of the teaching staff defined for each educational programme. A unified approach to professional and other faculty training is missing in the college. There is a procedure for rewards and material incentives for the faculty and staff, but due to limited financial resources, staff incentives are rarely available.

According to the assessment of the expert group, the building conditions of the college are inconsolable condition, in particular, there are the following problems: there is a lack of a central heating system, the existence of outdated equipment, modernization of laboratories, an improvement of the hall, equipping the computer room, providing computer classrooms, library stock, facilities for the needs of people with special needs, etc. In this case, the faculty tries to avoid some problems, for example, the lack of computer equipment in the classrooms is supplemented by posters of the taught material or other methods. Although the Dilijan Medical Center and other medical facilities are bases for the organization of practical lessons for students, however, the college must be provided with the above-mentioned own resources. It should be noted that the management of the college is very concerned about the situation. The management of the college thinks that the financial problems relate to the decrease in the number of students, but also realizes that actions should be taken in the near future to obtain additional financial means.

A five-year development plan has been developed for the implementation of the college mission, which defines the development goals and objectives. The formulated tasks are generally aimed at defined strategic goals implementation. Although the college develops long-term, mid-term and short-term plans, there are no clear mechanisms for their implementation and monitoring. It is significant that DSMC emphasizes internal and external accountability. There are also designed mechanisms and procedures for implementation, assessment of the needs of external and internal stakeholders and the implementation of mission and goals, which, however, needs for

introduction of a results evaluation system, as well as activating the participation of external stakeholders in solving problems.

The collegiate governing body of the DSMC is the College Board, which convenes a meeting four times a year. In addition to the Board of Governors, the College has other advisory bodies. The management system of the college is not provided with sufficient human, material, and financial resources. The available resources are not yet sufficient for the effective implementation of other educational goals. In general, the decision-making process of the college is in line with the principles of management ethics. The panel noted that the DSMC had identified possible factors influencing the activities of its external and internal stakeholders but did not yet have a regulated mechanism for examining those factors. There are no approved developed procedures for monitoring the SP. Moreover, the college did not submit an analysis of the performance of its previous SP an assessment of achievements and obstacles.

It should be noted that the quality assurance system of the college is in the formation stage. A quality assurance responsible has been appointed at the college since April 15, 2021, but so far, the college has no quality assurance regulations. It became clear from the expert visit that although quality assurance processes have been implemented, their effectiveness has not been evaluated, and no policy review has been done, which is due to the lack of the appropriate mechanisms, tools, equipment, and human resources.

It is also a positive fact that the DSMC has clear mechanisms for recruiting, selecting, and admitting students. At the beginning of each academic year information on the services provided is disseminated and admission is carried out according to the established procedure. In particular, the representatives of the college visit the schools of the region, organize open days in college and print, distribute booklets, etc. However, the absence of the web page of DSMC and insufficient activity of the current Facebook page limits the college's connection with external stakeholders. It is also positive that the college has a student council. The students at the college are sufficiently involved in various decision-making processes in the college management system. To assist them, there is a clear regulation and schedule for applying to administrative staff, as there are various mechanisms for identifying their educational needs. However, during the visit, it became clear that the students, being aware of the insufficient financial resources of the college, are not demanding, do not raise their main issues, and are satisfied with the available resources. However, the teaching and support students as much as possible with additional approaches to providing additional lessons or consultations.

The body responsible for student career support services at the college operates effectively. It works both with student councils and employers to identify student needs and provide advice on other professional orientations and other issues.

In the five-year development strategic plan, the college has planned to carry out "research, experimental-expert activities". However, the expert panel did not record the existence of research

programs within the main direction of the chairs. The college is in dire need of replenishing resources, equipping laboratories, as well as preparing textbooks for practical laboratory work, and introducing a unified system of student research and analytical work. However, the panel noted that some mechanisms have been put in place for the interconnectedness of learning and research processes, as well as the development of students' analytical thinking, which still needs to be developed. The expert group considers positive the fact that the college has an internal accountability system. However, feedback from alumni and employers is not systematic. Due to the absence of the official website of the college, the information on the processes carried out in the college, the submitted reports are not available to the internal and external stakeholders of the college. Though there is a career center in the college, which cooperates with the employers of the regional employment center, however, from the meetings of the expert panel and the study of the documents, it became clear that the DSMC does not carry out actions that promote the development of foreign relations and internationalization. The institution does not provide resources for internationalization processes, and there is no initiative to cooperate with international organizations with branches and structures in Armenia. During the site visit, it became clear that the level of foreign language proficiency of most of the students and faculty is not enough, moreover, the college does not have clear mechanisms for improving the foreign language skills of students and faculty, which may be an additional obstacle for the internationalization processes.

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

- 1. Implementing an important mission in the region by making a qualified professionals in the field of medicine.
- 2. Academic programmes corresponding to the mission and the needs of the labor market.
- 3. Professional teaching-support staff including doctor-lecturers.
- 4. Motivated students.
- 5. Opportunity to use the database of hospitals in the region.
- 6. Launch of internal quality assurance system.

#### Weaknesses of the Institution:

- 1. Lack of strategic management culture.
- 2. Passivity in the search for alternative financing sources.

- 3. Imperfection of the PDCA cycle of policy and procedures administration processes.
- 4. Passive involvement of external stakeholders in the implementation of the mission and strategic goals.
- 5. Lack of a unified system of professional and other trainings of teaching and support staff.
- 6. Imperfection of the incentive system of the teaching and support staff.
- 7. Lack of a unified system of research/analytical-educational processes.
- 8. Unsatisfactory condition of building and other resources, obsolete laboratories, classrooms, library, etc.
- 9. Lack of student and teacher mobility mechanisms.
- 10. Absence of an official website and passivity in providing feedback to external stakeholders.
- 11. Imperfection of the internal quality assurance system.

#### Main recommendations:

#### **Mission and Purposes**

- 1. Review the Strategic Plan by defining the mission of the college, the roadmap to achieve it, which will be in line with the human and financial resources of the college.
- 2. Introduce strategic planning processes by developing plans for all departments in line with the college's strategic directions.
- 3. Develop tools/indicators for assessing the results of the college mission and achievement of goals and set a clear timetable for its implementation.

#### **Governance and Administration**

- Evaluate the effectiveness of the activities of the structural subdivisions and clarify the mechanisms of cooperation between both the consultative bodies and the structural subdivisions.
- 5. Develop clear mechanisms for their implementation and monitoring simultaneously with the creation of short-term, mid-term and long-term plans.

- 6. Introduce mechanisms for studying external and internal factors influencing college activities, as well as risk management mechanisms.
- Regulate the mechanisms for assessing the needs of external and internal stakeholders, analyzing the results of surveys, and make the analysis of the collected and processed data as the basis for decision making.

#### Academic programs

- 8. Develop matrices for alignment of the outcomes of APs with NQF Level 5 and mechanisms for introducing them into the educational process.
- 9. Clarify and standardize theoretical and practical skills assessment tools.
- 10. Develop and implement effective mechanisms for ensuring active involvement of external and internal stakeholders in the monitoring and evaluation processes.
- 11. Develop and implement unified interconnection mechanisms of learning and researchanalytical activities in the APs.
- 12. Clarify the methodology of organizing the online teaching process and launch learning evaluation mechanisms.

#### Students

- 13. Develop and implement regulations and schedule for the implementation of additional lessons to work effectively with students, as well as develop mechanisms for evaluating the effectiveness of organizing additional lessons and providing advice.
- 14. Activate the activities of the SC, aiming at the protection of students' rights.
- 15. Clarify the toolkit for assessment of students' educational and other needs, as well as the analysis of results.

#### Faculty and staff

- 16. Clarify the requirements for the qualifications of the teaching staff for each educational programme.
- 17. Introduce and implement regulations on professional qualities of teaching staff and evaluation of their work as well as effective incentive system of staff.
- Introduce a unified system aimed at the improvement of the teaching staff (professional, foreign languages, computer skills, latest teaching methods).
- 19. To introduce continuous mechanisms for recruitment of young staff.

20. To ensure stability, form a reserve of teaching staff.

#### **Research and Development**

- 21. In all professional modules, introduce a unified mechanism for developing students' research and analytical thinking.
- 22. Create student portfolios where the student's analytical works will be collected.
- 23. Develop and implement assessment scales for students' research/analytical assignments

#### **Infrastructure and Resources**

- 24. Develop and implement a strategy for acquiring alternative financial means.
- 25. Complete and modernize professional and science laboratories, update building conditions and property.
- 26. Introduce an electronic internal documentation system.
- 27. Create conditions for students and staff with special needs.

#### Societal Responsibility

- 28. Develop and implement a unified system of accountability and effective feedback mechanisms with society.
- 29. Create a regularly updated database of graduates, develop effective mechanisms for providing feedback to graduates.
- 30. Clarify the scope of interaction between the quality assurance system and the career centre.
- 31. Create and launch an official website of the college.

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

- 32. Develop and implement a policy aimed at ensuring the internationalization of the college and the development of external relations.
- 33. Introduce mechanisms for increasing the knowledge of foreign languages of teaching staff and students.
- 34. Facilitate the study of local and international best practices by the teaching staff and their implementation in the educational process.
- 35. Cooperate with similar colleges to ensure the mobility of students and teaching staff, as well as the exchange of best practices.
- 36. Introduce developing processes for local and international grants and tenders which are assuming fundings.

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

- 37. Develop quality assurance policies and procedures, specify the scope of quality assurance system activities.
- 38. Ensure the autonomy of the IQA system, clarify the mechanisms of accountability of the IQA responsible.
- 39. Develop or clarify the mechanisms for assessing the needs of external and internal stakeholders, clarify the mechanisms for analyzing and using the results.
- 40. Develop mechanisms for identifying and disseminating best practices in various departments of the college, introduce mechanisms for providing feedback for the purpose of enlightening the quality assurance processes.

#### Anna Poladyan, Chair of Expert Panel

13.01.2022

### **DESCRIPTION OF EXTERNAL REVIEW**

### COMPOSITION OF EXPERT PANEL

External evaluation of the institutional capacities of Dilijan State Medical College was carried out by the following expert panel<sup>1</sup>.

- Anna Poladyan- Yerevan State University, Head of the Department of Biology, Biochemistry, Microbiology and Biotechnology, Associate Professor, Expert Panel Chair.
- 2. Ani Hakobyan-National University of Architecture and Construction of Armenia, senior specialist at quality assurance centre.
- 3. Anahit Martirosyan- N 20 Polyclinic SNCO, Department of Obstetrics and Gynecology.
- 4. Spartak Simonyan- Student at Yerevan State Basic Medical College

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

The works of the expert panel were coordinated by Roza Babayan, specialist of the ANQA Policy Development and Implementation Division.

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

<sup>&</sup>lt;sup>1</sup> Appendix 1. CVs of the Expert Panel

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

The college applied for state institutional accreditation by submitting to ANQA (12.02.2021) filled the application form, presented the copies of the license, and respective appendices.

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

According to the decision on accepting the application request, a trilateral agreement was signed between ANQA, DSMC, and ESCS. The timetable of activities was drawn up and approved.

#### Self-evaluation

As the DSMC was in the process of institutional accreditation for the first time and the process was difficult for the college to implement, ANQA has done some work with the institution, preparing them for the process of self-evaluation and accreditation. In February, DSMC conducted a SWOT analysis within two weeks in accordance with accreditation ten criteria. After presenting the SWOT analysis, the institution recommended two employees, together with the ANQA staff, they reviewed the SWOT analysis presented by the college for a month and identified the main issues. During that period, the employees have been directed on how to make a SWOT analysis, and what to pay special attention to while doing the self-evaluation within the criteria. After observing the SWOT analysis, the college employee, as experts, together with ANQA staff conducted an online visit at DSMC on July 10, 2021.

Institutional Capacity Self-Evaluation of DSMC was presented on 19.07.2021. The selfevaluation was carried out by 14 employees of the institution, including lecturers, teaching, and support staff. The external stakeholders did not participate in the self-evaluation process. Each criterion was analysed by 1 employee, considering the employee's work orientation and criteria requirements

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

#### **Preparatory phase**

ANQA coordinator observed the report to reveal its correspondence to the technical and substantive requirements of ANQA. Then ANQA coordinator sent the self-evaluation report to the expert panel, the members of which were agreed upon with DSMC.

The self-evaluation and attached documents were provided to the expert group for preliminary evaluation, which was agreed upon with the college and was confirmed by the order of the ANQA director.

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

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

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

Within the scheduled time, the expert panel summarized the results of the preliminary evaluation, and the Chair of the expert panel, together with the process coordinator, set the schedule of the site visit<sup>2</sup>. According to the ANQA manual, the intended close and open meetings with all the target groups, documents observation were included in the schedule, parallel meetings and etc. During the parallel meetings the expert group is divided, each expert according to his/her

<sup>&</sup>lt;sup>2</sup> Appendix 2. Schedule of the Expert site visit

professional orientation. Each expert (in addition to the student expert, he/she joined one of the other experts) had the opportunity to have two separate professional meetings with the lecturers of the educational programmes presented by the college, the student, and the academic programme responsible. Before the professional meetings, the experts in their field studied the assignments given to the students within the modules to understand to what extent are the assignments aimed at achieving the performance criteria set out in the module.

#### **Preparatory visit**

A preliminary online meeting took place on November 12, 2020. ANQA coordinator and the head of the institutional-program accreditation department were present at the meeting. During the meeting, the schedule of the site visit was introduced and agreed with the college, the list of documents has been presented and peculiarities of organizing the online site visit in pandemic conditions (existence of the video, where the main resource base of the college can be seen: classrooms, laboratories, libraries, etc., provide an online version of the documents that were required by experts on time, provide technical rules for online site visit such as connected cameras, the ability to see the entire room with a single shared camera, excluding the presence of other people in the room than the target groups, etc.

#### Site visit

The expert panel site visit took place from November 15 -18, 2021. According to the schedule in 14.11.2021, the activities of the site visit were launched with a close meeting aimed at discussing the issues to be reviewed during the site visit, the strengths, and weaknesses of the institution according to the criteria, the procedure of focus groups, as well as further steps.

The site visit started and ended with meetings with the director of DSMC. All the participants of the meetings were selected at random from a pre-provided list. All scheduled meetings were held, and the expert panel also carried out some class observations. During the visit, the expert panel conducted a study of documents and resource observation.

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

#### **Expert panel report**

The expert group conducted the preliminary assessment based on the self-evaluation submitted by the college, the study of the attached documents, the review of resources, and the observations of the expert visit, because of regular discussions.

Based on the observations made after the discussions, the head of the expert panel and ANQA Coordinator prepared the preliminary version of the expert report, which was agreed with the experts on December 24.

The College submitted its observations and remarks on the report to ANQA on 05.01.2022. Examining the preliminary version of the expert report, the college did not present any objections. The expert panel prepared the final version of the report, which was approved by the panel on 13.01.2022.

Roza Babayan

**Coordinator of the Expert Panel** 

13 January, 2022

## EVALUATION ACCORDING TO ACCREDITATION CRITERIA

## BRIEF INFORMATION ABOUT THE EDUCATION INSTITUTION

**History:** Dilijan State Medical College was founded in 1961. and named "Dilijan Medical School". in 1996, it was renamed "Dilijan Medical School" closed joint stock company. In 2004, it was renamed "Dilijan State Medical College" SNCO. Over the years of its activity, Dilijan State Medical College has many qualified graduates who successfully work in medical institutions of the republic and abroad.

*Education:* Secondary professional medical educational programmes are implemented in the college.

- 1. Nursing
- 2. Obstetrics
- 3. Pharmacy
- 4. Pharmacy /part time/
- 5. Dental technical work
- 6. Medical cosmetology

The work of the college is carried out by 5 subject chairs. There are subject groups from professional and general education subjects. The lessons consist of a 5-day working week, the workload of the week is 36 hours.

Practical training is organized in college and bases. The medical staff of the bases who are teaching students are constantly provided with methodical assistance by the college to carry out the lessons at the necessary level.

*Research:* One of the main goals of the college's research activities is to develop students' critical, cognitive, analytical and practical skills. Combining, collecting, processing and analyzing the quantitative and qualitative data of their field/profession, to show creative and innovative approaches in them.

*External Relations:* One of the tasks of the college is to integrate and become one of the active members of the international education system. For this reason, it is necessary to continue the development of the external relations of the college, to further increase the partnership relations.

*Quality Assurance:* Quality assurance processes have always been implemented at the college but have not had a coordinated and clear policy. Internal quality assurance policies and procedures are

under development. Internal and external stakeholders are involved as much as possible in quality assurance processes. For guidance on quality assurance activities consulting courses and work with college staff are conducted.

*Source:* sources for the identification of facts in the above-mentioned fields are the documents provided by the TLI (e.g. self-evaluation report, strategic plan, action plan, plans of the departments, concept APers, etc.)

#### **CRITERION I. MISSION AND PURPOSES**

**CRITERION:** The Tertiary Level Institutions' (TLIs) policy and practices are in accordance with its mission, which is in accordance with the Armenian National Qualifications Framework (hereafter ANQF).

#### FINDINGS:

According to the presented self-evaluation, the mission of the DSMC is defined in the founding document, the charter (approved by the order of the RA Minister of Education and Science on October 11, 2013). Section II of the Charter, which is entitled "College Activities", provides detailed information on the College's activities. In particular, item 13 defines the subject of the college's activity in the following wording: "The main subject of the college's activity is the implementation of secondary professional educational programmes. The college can also implement general education and/or preliminary professional educational programmes in accordance with the procedure established by the law of the Republic of Armenia." The other sections of the charter do not define the mission of the college in any way.

According to the self-evaluation and development plan, the mission of the college is to prepare qualified specialists with secondary professional education, who will be competitive in the labor market and has practical skills and abilities for the field of medicine in the region.

In the five-year development plan of the college, which was approved by the management board of the college on 17.11.2017, the strengths and weaknesses of the college are presented, and the main objectives of the college's activity are defined, but this document also does not contain a clear formulation of the mission of the college's activity. The five-year development plan of the college defines strategic goals (number 3) and tasks (number 25). The first strategic goal represents the main directions of the college's activity and is consistent with the above-mentioned formulations of the college's mission: "The development policy should be aimed at the development of qualities that contribute to the realization and appreciation of the identity of graduates, training of specialists who are competitive in the labor market, for which it is necessary to cooperate with social partners, to study the labor market in the preparation of the necessary specialists". According to the self-evaluation, the college emphasizes the participation of stakeholders not only in the development plan, but also in the decision-making process for the effective evaluation of the results of the implementation of the goals and mission.

During the site visit, it became clear that a special committee was not created for the purpose of developing the college's development plan, but through discussions, a development

plan project was drawn up by the college's internal stakeholders, which was submitted to the College Council for approval.

The 25 tasks formulated in the five-year development plan of the college are generally aimed at the implementation of the defined strategic goals, but do not reflect the road map necessary for their implementation. The college has not defined the human, material and financial resources responsible for the implementation of strategic goals and objectives.

The DSMC has not yet clearly formulated the mission of its activity in any fundamental document. The college implements professional educational programs in accordance with NQF level 5 and when organizing the educational process is guided by the educational standards of relevant professions.

The College Charter and separate regulations define the main external and internal stakeholders of the college. According to the self-evaluation, the internal and external stakeholders of the college are involved in the governing bodies of the college and always have the opportunity to express opinions and make suggestions. A policy for evaluating the results of the Mission and goals has been developed. The latter defines the purpose and tasks of the policy of assessment, the procedure and the persons responsible for development and implementation. The above-mentioned document does not define the department/advisory body responsible for evaluating the results of the college's mission and goals, the toolkit and the schedule.

At the same time, neither the previous nor the current strategy of the college, the five-year development plan, has developed indicators of strategic goals. There were no clear mechanisms for the involvement of external and internal stakeholders during the definition of strategic goals and objectives. In the annual reports submitted by various departments, as well as the implementation of strategic goals is not addressed in the report reviewed by the director and the deviations in implementation are not analyzed.

#### **CONSIDERATIONS:**

The expert panel considers it positive that the college has attempted to implement strategic planning and values the involvement of internal and external stakeholders in the strategic planning process. However, the expert panel notes that there is no clear formulation of the college's mission in the basic documents of the college. Clarification of the mission in the charter and the Development Plan will contribute to the clarification of the development directions of the college and the same understanding by the stakeholders.

The college was originally established for the purpose of carrying out secondary professional educational programmes of medical orientation, for which it has sufficient potential. The external and internal stakeholders of the college emphasize the role of the college as the only educational institution in the region that implements medical education programmes. The college

implements professional educational programmes in accordance with NQF level 5 and when organizing the educational process, it is guided by the educational standards of the relevant professions by filling the labor market of the mid-professional medical sector of the region. The college's charter and other foundational documents define the main external and internal stakeholders of the college, and generally emphasize their involvement in the implementation of the college's mission. In the college, the work of assessing the needs of the stakeholders during the site visit, in particular the representatives of the College Council, the expert panel finds that the involvement of external stakeholders in defining the mission, goals and objectives of the college's mission does not fully reflect the opinions, needs, recommendations, and observations of external stakeholders. Both the representatives of the college management system and other internal and external stakeholders of the college value the role of the college in terms of filling the labor market of the region.

Although the college implements the planning of actions, there are long-term (5-year development plan) and short-term (annual action plan) plans to achieve the mission, however, both long-term and short-term plans do not have mechanisms for assessing progress, identifying and overcoming obstacles. In addition, the presented plans do not define the persons and/or departments responsible for the implementation of each action, which creates additional difficulties for the implementation of strategic goals and objectives.

#### **SUMMARY:**

Considering that the college for the first time attempted to implement strategic planning, has developed a 5-year development plan, internal and external stakeholders evaluate and value the role of the college in filling the labor market with relevant specialists in the region, the expert panel finds that the DSMC meets the requirements of criterion 1.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 1 is satisfactory.

#### **CRITERION II. GOVERNANCE AND ADMINISTRATION**

**CRITERION:** The TLIs' system of governance, administrative structures, and their practices are effective and intend to the accomplishment of its mission and purposes by keeping the governance code of ethics.

#### FINDINGS:

According to self-evaluation the management of the college is carried out in accordance with the law of the Republic of Armenia "On Primary and Secondary Professional Education" and the charter of the college approved by the decision of the Government of the Republic of Armenia. According to the Charter, the collegial governing body of the DSMC is the College Council. According to the charter, the management system of the college is defined by the authorized body. The director of the college manages the current activities of the college within the limits of the powers assigned to him by the law, the decisions of the founder and orders of the authorized body. The structure of the college and the competence of the departments are determined by the director of the college. In addition to the Council, which is a governing body, the following consultative bodies also operate in the college:

- 1. Board of Directors,
- 2. Pedagogical Council,
- 3. Educational methodical council.

In general, the college is characterized by a vertical management model. During the site visit, it became clear that the representatives of the college board and other representatives of the management body consider the current structure of the college effective. The college's organizational structure expresses the vertical accountability of the structural units but does not express the horizontal relationship between the structural units. All representative and consultative bodies, as well as administrative units, established in the college operate under the authority of the college's director. The organization and control of educational processes are carried out by the director's deputy in charge of educational and methodological works. The above-mentioned councils and departments have regulations approved by the College Board, which are available in the college but are not published due to the lack of an official website. The college also lacks mechanisms for publishing decisions made by the management and providing feedback.

the above-mentioned regulations, as well as the Charter, do not define the interaction mechanisms of consultative bodies, it is not specified whether there is a hierarchical relationship between them, and the accountability mechanisms. There is no formulation in the regulation of none of the Advisory Bodies regarding the control of the implementation of the decisions, the evaluation of the effectiveness of the decisions, and the tools and mechanisms for the analysis of the obstacles arising during the implementation of the decisions. In some cases, the powers of the councils operating in the college overlap, in particular, the powers of organization and control of the educational process of the college are assigned to both the pedagogical and the teaching methodical council. As a result of the study of the minutes of the meetings of the college board, it became clear that the board discusses both issues related to strategic goals and issues, as well as issues within the scope of powers of consultative bodies. According to the table of financial resources management for the last three years presented attached to the self-evaluation, financial resources are not allocated for the purpose of improving the capabilities of the management

system. According to the above document, approximately 90% of the financial output goes to salaries, and approximately 9% goes to scholarships and economic expenses. Financial resources are not allocated for the implementation of the goals and objectives set by the five-year development plan of the college.

According to the self-evaluation, the representative bodies of the college, teachers, and students have the opportunity to be involved in the management process, to participate both in the discussion of issues and in making decisions about them. The pedagogical council operating in the college, in which all teachers are involved, discusses issues regarding the organization and improvement of the educational process and submits appropriate proposals to the vice director of the college for educational methods. Students also participate in the decision-making process about themselves by being involved in governing bodies.

Until 2012 the college did not have a developed and approved strategic plan. The first development plan was drawn up in 2012-2017. No performance analysis was conducted at the end of the strategic plan. The college has short-term and mid-term plans, and short-term and medium-term plans have been made for one current year. The long-term planning of the college's activities is expressed in the five-year development plan. In the current strategic plan, the mechanisms for monitoring the implementation of the specified strategic goals and tasks are not presented. As in the short and mid-term plans, the strategic plan does not define key performance indicators.

According to the presented self-evaluation, the college identified the external and internal factors affecting its activity, which are studied and analyzed by the college departments. The college considers admission, the financial system, changing demands of the labor market, and legislative changes as external factors influencing its activity, and internal factors are the fluidity of the teaching staff, the supply of appropriate materials and accessories of the cabinet-laboratories, the efficiency of the organization of infrastructure work. However, the tools for the study of the above-mentioned factors, and the mechanisms for analyzing the results are not presented. The reports submitted by the departments are not analytical in nature, do not define the identified issues and do not represent work aimed at their improvement.

During the site visit, it became clear that there are no mechanisms for evaluating the effectiveness of management processes in the college, and the appropriate tools and responsible persons/departments have not been defined. There is no reference and plans for evaluating and improving the college's management processes in the self-evaluation and attached annexes. The processes of the college are mostly in the planning and partial in the implementation stage.

There is a regulation for monitoring and reviewing professional educational programmes In the college. According to the regulation, the monitoring and review of educational programmes are carried out during the academic year by the chairman of the relevant subject cycle committee of each professional educational programme. However, the regulation does not define the implementation toolset of the monitoring, the mechanisms of information collection, analysis, and presentation of results. The regulation states that monitoring and review are carried out based on lectures, students' and lecturers' questionnaires. The results of the lessons are summarized in the form of oral conversations. In the college, there are no mechanisms for evaluating the effectiveness of the organization of the teaching and learning process, as well as for identifying advanced practices and presenting them to a wide range of stakeholders.

According to the presented self-evaluation, information about the college is available to external and internal stakeholders through brochures, posters, and Facebook page. There are no publications of qualitative and quantitative data about the quality of professional educational programs and awarded qualifications on the Facebook page of the college. The college does not have an official website. There are no information coverage and assessment mechanisms on educational and professional activities in the college. An appropriate procedure has not been developed, and a department and/or employee with appropriate powers has not been identified. A report or analysis on the assessment of publications of qualitative and qualitative information about the quality of educational programs and qualifications awarded is not present in the self-evaluation and was not presented during the site visit.

#### **CONSIDERATIONS:**

The expert panel positively evaluates the implementation of the regulated process of consultative bodies, as well as structural units. Decision-making bodies are defined by the charter of the college, but due to the undefined hierarchical connection of consultative bodies, as well as weak horizontal cooperation between departments, the functions performed, the discussed issues may be repeated.

Due to the lack of clear mechanisms of horizontal cooperation of departments, the strategic planning of activities can be disrupted. Due to the lack of an official website of the college, both external and internal stakeholders of the college may have additional difficulties in studying the documents regulating the activities of departments, as well as getting familiar with the rights and responsibilities. In addition, the decisions made by the governing bodies of the college are not published, which hinders the provision of feedback on the decisions, as a result, the governing bodies are not able to control the process of the implementation of the decisions, identify the problems that appeared during their implementation, and evaluate the effectiveness of the decisions made. Although short-term and long-term action plans have been created in the college, due to the lack of strategic planning culture, they do not adequately guide the processes of implementing the college's mission and goals. As no evaluation indicators have been defined for the implementation of the presented strategic plan and monitoring mechanisms have not been created, therefore, the implementation of works aimed at identifying deviations in the implementation of the strategic plan, overcoming obstacles and improvement is not regulated.

Although annual reports are presented in the college, they are not analytical in nature, they do not reveal the issues that arose during the reporting year or semester, and therefore the existing issues are not solved quickly. The substantive study of the possible factors affecting the college's activity is of a situational nature. Studies of external and internal factors are not carried out in a clear period, as a result, actions aimed at overcoming external risks are also not developed. Although the college considers the presence of competition among secondary, vocational and higher education institutions operating in the region as a disadvantage, however, it does not carry out a forecast of changes in the number of students. In general, the college does not carry out effective assessment and management of external and internal risks affecting the activities.

Although most of the departments of the college have established regulations, they largely lack descriptions of assessment tools, related forms, and mechanisms to ensure implementation. Apart from that, there is no evaluation of the effectiveness of the created regulations in the college. In general, the existing regulations do not contribute to the effective implementation of the college's mission and strategic goals and to ensuring the quality of education. Due to the lack of an official website of the college, qualitative and quantitative information about the quality of the educational programs and the qualifications awarded by the college is not presented. As a result, the college has additional difficulties in providing information about the activities among potential applicants, and therefore in terms of their recruitment.

#### **SUMMARY:**

Considering the imperfection of interaction mechanisms of consultative bodies and horizontal connections of structural divisions, the lack of control mechanisms for the implementation of decisions, the lack of indicators of progress in the short-term and long-term plans, therefore, the impossibility of monitoring, the lack of a multi-functional platform for publishing information - the expert group finds that the college does not meet the requirements of Criterion 2.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 2 is unsatisfactory.

#### **CRITERION III. ACADEMIC PROGRAMMES**

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

Dilijan state medical college is the only VET medical institution in the Tavush region. The college implements 5 secondary professional medical educational programmes with the following

specialities:

- Nursing /full time/- with qualification of nurse (study duration for secondary education- 3 years, basic education- 4 years)
- Obstetrics /full time/- with qualification of obstetrician (study duration for secondary education- 3 years, basic education- 4 years)
- Pharmacy /full time, part time/- with qualification of pharmacist (study duration with secondary education- 2 years, with basic education and part-time education-3 years)
- Dental technical work /full time/- with qualification of dental technician (study duration for secondary education- 2 years, basic education- 3 years)
- Medical cosmetology / full time/- with qualification of nurse cosmetologist (study duration with secondary education- 2 years, basic education-3 years)

From 2021-2022, teaching in all departments at the college is carried out according to the modular APs. There are approved state educational standards and their corresponding Academic programmes (hereinafter referred to as APs) for the professions operating at DSMC. The APs studied by the expert panel (2 of the APs considered, "Dental Technical Work" and "Pharmacy" introduced in 2017-18 and 2020-21, respectively) are modular, and "Nursing" is non-modular are in line with the mission of the college is to prepare qualified specialists with secondary professional education, who will be competitive in the labor market, has practical skills and abilities for the field of medicine in the region. For that purpose, the exact implementation of the educational process according to the educational plans of the relevant specialities is constantly monitored, which leads to the formation of the necessary outcomes.

The implementation of the APs is monitored, and the issues are raised by the methodologist, the head of the chair, the educational methodical council, and the deputy director for education.

The APs are in line with the national standards, the distribution of class hours in the curricula corresponds to the national standards, a clear separation of theoretical, practical and practice hours is made, entry requirements are met, and consultation hours are clearly defined. The outcomes according to the awarded qualifications, as well as the descriptions of the profession (role of the profession, problem areas, work process, performance standards, abilities, and skills) are presented in the national standards. Based on the APs, a curriculum is drawn up for each speciality, which is approved by the college director. Subject programs are drawn up in accordance with the curricula, which are discussed in the meetings of the relevant chairs and programmes approved by specialist teachers are presented to the methodological council, discussed and then approved at the meeting of the DSMC's council. In accordance with the work programs, calendar thematic plans, daily lesson plans are drawn up, where the purpose of the lesson, learning outcomes, and teaching

methods correspondence to the expected outcomes, and necessary accessories are indicated.

As a result of the observations of the expert panel, it was found that the national standards and the APs meet the requirements of level 5 of the National Qualifications Framework (hereafter NQF), however, the college does not have the appropriate matrices (mappings) developed to align the outcomes of the APs with the 5th level of the NQF. The selection of teaching and learning methods in accordance with the expected outcomes from the medical centress is carried out by the medical-pedagogical staff (collaborative teaching methods, practical skills algorithms, role-playing games, situational problems, in some cases slideshows and SWOT analysis).

The college has a regulation procedure of the "Student Knowledge Monitoring and Evaluation System", but the means of evaluation are not specified and regulated, evaluation criteria and components are missing (how to evaluate on a 10-point scale the questions, situational problems, role-plays, number graph structures, practical skills algorithms, essays, practice diary, there are also no clear criteria for how many times the student should repeat the action for it to be considered positive). There are optional subjects (modules) in the academic programmes, but they are missing in the educational programmes reviewed by the expert panel. An optional subject is available in the ''Obstetrics'' academic programme.

According to the self-evaluation of the college, the APs provide the necessary resource base for the implementation of educational activities, but as a result of the site visit, it was found that most of them have lost their relevance. There is no policy or procedure for ensuring academic integrity at the college.

The work experience, the teaching methods of the doctors teaching at DSMC overall are in line with the expected learning outcomes of educational programmes. During the site visit, it was found out that during the internship, the students and graduates of the DSMC demonstrate good abilities based on acquired theoretical knowledge and practical skills: this is evidenced by the letters of thanks given by employers to students and graduates. Employers in the region value the opening of the pharmaceutical department, because the need for graduates in the mentioned speciality is felt strongly, and they quickly find a job.

Due to the pandemic, the education was conducted online, which caused certain complications (e.g., role plays, lack of opportunity to practice practical skills). From the online class observations conducted by the expert panel, it became clear that a unified system of online teaching is not applied at DSMC. Lecturers are free to choose teaching methods and online platforms. The teaching process is carried out using VIBER and ZOOM applications. As a result of class observations, it became clear that the implementation of the teaching process is not so effective in the case of most of the taught subjects and modules. The question-and-answer method is mainly used, the new material is presented orally, and cooperative methods are not used. Despite the fact that there are teachers who use new teaching methods, it became clear during the meetings that certain part of the professors conducts the lessons according to the dictates of the material. It was

also revealed from the class observations that the lecturer of the "Fundamentals of Nursing" subject reviewed the teaching and learning methods, developed effective assignments (slideshows, crosswords, videos of practical skills, videos of practical skills performed by students, homework assignments), and the lecturer of "Dental Technical Work" demonstrated and explained the practical skills through a video call. However, the application of these methods is not of an institutional nature. There have been some difficulties with assessment and ensuring academic integrity in online classes - lecturers have not had a single approach of assessment. During the observations, it became clear that not all teachers are confident in feedback mechanisms with students regarding their grades.

There is a regulation on appeals for students' knowledge assessment at DSMC, but during the expert visit, it became clear that there are no appeal cases: if disagreements arise, they are resolved through the mediation of the chairmen. There are signed contracts with medical institutions, pharmacies, dental clinics, and beauty salons for conducting internships of the college. Internships are monitored by practice responsible. After the pre-graduation practice, the students submit the completed ''Practice Diary''.

State summary attestation in college is carried out according to the established procedure. Awarding of qualifications is carried out through a special committee, in which representatives of the teaching staff and external stakeholders (employers) of the professional field are involved. The sample of exam tickets presented to the expert panel mainly contains theoretical questions. There is one question included in the tickets to assess ability or skill, but professional abilities and skills dominate the outcomes of the APs. The college tries to solve this problem by organizing practical trainings and internships in potential workplaces of students.

During the site visit, professional talks related to the three considered educational programmes were held. During the talks, it became clear that the students have theoretical and practical knowledge (skills to wear disinfected gloves, the algorithm for preparing disinfectant solutions, the sequential stages of preparing prostheses, etc.). The APs of the college in terms of content are in line with the APs of other medical institutes of the Republic of Armenia (provided by the MKUZAK). However, during the site visit, it was found that the DSMC still does not have contracts or other mechanisms to ensure the mobility of students and teaching staff based on the combination of programmes. There is no benchmarking policy at the college.

According to the self-evaluation and the observations of the expert panel, the college has a "procedure for the monitoring and development of the APs", however, internal stakeholders mainly participate in the efficiency evaluation processes, and the participation of external stakeholders is mainly limited to their participation in the state summary certification and partly through questionnaires. Summary certification records are mostly descriptive. In order to highlight the needs of internal stakeholders, surveys (mainly oral) and class observations are conducted among students and teaching staff. However, the results of these surveys and the records of the class

observations are not analyzed, and no changes are made in the academic programmes based on them. According to the self-evaluation and the meeting of the expert panel with the teaching staff, it was found that changes are rarely made in the academic programmes. Basically, the proportion of practical and theoretical hours is subject to change, where the possibility of change is set at 10%.

#### **CONSIDERATIONS:**

The expert panel positively assesses the fact that the DSMC's APs are in line with the mission of the college, meet the requirements of the 5th level of NQF, which is an important prerequisite for the implementation of the goals set by the college. The chairs of the college develop teaching and learning methods that are in line with the outcomes expected from APs, which contribute to student-centred learning. The meeting with the employers also confirmed that they are mostly satisfied with the theoretical knowledge and practical skills of the graduates of DSMC

Taking into account the work experience of the doctors teaching at the college, the expert panel finds that the teaching methods that are generally used are in accordance with the expected learning outcomes of the academic programmes. The college has a regulation procedure for monitoring and evaluating students' knowledge, but it is imperfect: the means of evaluation are not specified and regulated, evaluation criteria and components are missing. The lack of criteria and components of the evaluation system due to the expert panel can hinder the acquisition of practical skills of the students and the unbiased assessment.

The expert panel positively evaluates the fact that there is an appeal regulation for the assessment of students' knowledge, and the given processes are regulated by the chairmen, however, the sequential steps of the role and actions of the chairman in the given processes are not clearly presented. These processes are not carried out according to established regulations, and the participation of chairmen in this process may hinder the impartial implementation of the appeal process. Although the final certification exams cover theory and practical questions, however, they are mainly aimed at testing theoretical knowledge. the mentioned approach does not allow to fully evaluate the student's practical skills.

The college has the necessary teaching staff, and teaching and learning methods to ensure the outcomes of the academic programmes, however, the expert panel finds that out-of-date resources can hinder the training of professionals in line with the demands and challenges of the modern labor market. There is no benchmarking policy at DSMC, however, taking into account the existing approved national standards, the expert panel finds that the college has grounds for ensuring the mobility of students and professors according to the relevant APs.

#### **SUMMARY:**

Taking into account that the educational programs of the DSMC are in line with the mission, correspond to the 5th level of the NQF, the teaching methods are in accordance with the expected learning outcomes of the educational programmes, the educational programmes can contribute to the mobility of students and professors, have appropriate teaching staff for the implementation of the APs, meet the labor market requirements of the region, the expert panel finds that the the college generally meet the requirements of Criterion 3.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 3 is satisfactory.

#### **CRITERION IV. STUDENTS**

# **CRITERION:** The TLI provides relevant student support services ensuring the effectiveness of the learning environment.

#### FINDINGS:

The admission of students to DSMC is carried out in accordance with the admission regulations of each academic year, by the order of the Minister of Education and Culture of the Republic of Armenia, according to the list of specialties approved by the Government of the Republic of Armenia. Every year, DSMC organizes an oral exam only in the subject "Biology" for students studying in the full-time system with the specialties "Nursing", "Dental Technology", "Pharmacy", "Obstetrics" and "Medical Cosmetology" and "Pharmacy" studying in the part time system. The admission process is organized and carried out by the admissions committee of the college.

From the site visit, it became clear that there have been no cases of appeals regarding the grades of the entrance examinations. It became clear from the self-evaluation and site visit that there are clear mechanisms for the recruitment, selection, and admission of students in the DSMC. Every academic year, visits are made to schools in the region and villages, and open-door days are organized. Booklets are printed and distributed, professional videos are shot. Information about the provided services is also distributed through the "Dilijan Civil" newspaper. However, during the site visit, it became clear that an analysis of the effectiveness of the existing mechanisms was not carried out. t should be noted that the DSMC has an active Facebook page but does not have an electronic website. 124 students were admitted in 2021. During the visit, it became clear that the college from their relatives who are graduates of the college.

In the self-evaluation, it is noted that the students act as the main internal stakeholders in DSMC, that is why the college considers raising their needs and satisfying them as one of its most important goals. During the visit, it became clear that DCMS has different mechanisms for raising

educational needs. Students are included in the management board and have the opportunity to make various suggestions and raise issues that are not mainly related to the educational process. They mainly addressed issues such as student accommodation, tuition fees and other issues. The student council (SC) carries out active activities in raising the educational needs of students: they conduct conversations with the absent students, trying to raise their problems, then with the seniors of the courses, they present the raised needs to the director. Students can refer the chairmen and the vice director for education. There is also a suggestion box in the educational institution. During the site visit it became clear, that if students have some problems with the lecturer, then the students apply to the given lecturer without anyone's intervention.

In order to assess the needs of students and evaluate their level of satisfaction from various aspects, various surveys are carried out, the results of which are analyzed by the vice director for education, but during the site visit it became clear that the above-mentioned process is not documented. The main problems identified as a result of the surveys are related to the updating of books, heating and furnishing and modernization of the gym, which the educational institution cannot yet solve due to limited financial resources.

During the site visit, it became clear that in order to contribute to the effective study of students, the DCMS has created an opportunity to provide additional consultations hours. There is a schedule of consultations according to the curriculum. Consultations are organized during the chair hours, as well as consultations for students is provided by professional chairs. Before the start of each semester, the vice director for education prepares a schedule of midterm and final certification, which includes the days and hours of consultations. The college has developed mechanisms to engage low-achieving students, but there is no clearly defined timetable.

In order to assist students, there are clear regulations and timetables for contacting the administrative staff at DCMS, but during the visit it became clear that students can contact the administrative staff at any time with various questions. Students are informed about the services provided by the administrative staff from chairmen. Most students are aware of the services provided by administrative staff and usually apply with different questions. The DCMS conducts surveys among students in order to check their level of awareness and satisfaction regarding the services provided by the administrative staff.

During the site visit, it became clear that the responsible body for the services supporting students' career is functioning effectively in the college. The career department has regulations that are guided by the annual work plan approved by the director. According to the self-evaluation, the career center has an information panel in the college, which is regularly updated. The career center cooperates with the SC, in cooperation with which surveys are developed in various formats, which are aimed at highlighting the educational needs of students. The career center, presenting the characteristics of each profession, also deals with the professional orientation of applicants, as well as provides professional tests to those applicants who have difficulty choosing their professions.

According to the self-evaluation, the career center performs all activities related to students, cooperates with the employment center, informs students about the labor market and vacancies. During the site visit, from the meeting with the graduates it was found out that the career center refers graduates to the regional employment center, establishes contact with graduates studying in universities. The last ones visit the college and present the specifics of their professions, ensuring the college-alumni connection. As mentioned in the self-evaluation, it became clear from the visit that the career center conducts courses for students, helping them to create a CV. During the site visit, it became clear that starting from 2018, a base of graduates has been formed at DSMC, but the information on the career path of graduates is not updated.

In the self-evaluation, it is mentioned that the students are doing various research works at college. It became clear from the visit that the research works are mainly carried out through essays, independent works, various role-playing games and other means. These works are also performed in subject groups, in which students with high achievement are mainly included by choice. During the visit, it was generally found that students and lecturers are involved in research activities.

The rights and responsibilities of the students at DSMC are stipulated by RA legislation and internal disciplinary rules. According to the self-evaluation, the rights of the students are protected by the SC, which is a self-governing elective representative body, that introduces students to their rights and responsibilities. However, from the meeting with the students, it became clear that the SC is working incompletely in the matter of informing students' rights at college. The administrative staff, in particular the deputy director for educational affairs, carries out the activities of informing about the rights of students. As a result of student surveys, it became clear that almost all students are informed about their rights and responsibilities.

As it was mentioned in the self-evaluation, it became clear from the visit that there are educational and other services provided to students, as well as quality assurance mechanisms, which were previously implemented by the vice director, and currently by the quality assurance center. The college receives feedback on its services mainly through anonymous student surveys and individual recommendations. According to the self-evaluation, this process is important as a mechanism for targeted improvement of the quality of the educational process and a means of improving the quality of teaching, which was also confirmed during the visit.

#### **CONSIDERATIONS:**

The expert panel positively assesses that there are mechanisms for the selection, admission and recruitment of students at DSMC, which contributes to ensuring a stable flow of applicants. It is also positive that the college helps applicants in choosing their profession by providing the necessary advice. At the same time, the expert panel notes that the college lacks a website, which would contribute to the more effective use of student recruitment mechanisms, as well as the formation of stable feedback mechanisms with stakeholders. It is also evaluated positively the fact that the college has stable mechanisms for raising students' educational needs, which contribute to the identification of students' educational needs and their solutions. The expert panel positively evaluates the fact that DSMC has a set schedule for providing counseling, which gives students the chance to get answers to the questions that concern them.

At the same time, the expert panel believes that there is still no mechanism for assigning additional lessons to students, the presence of which will contribute to increasing the efficiency of learning. The career support services and the body responsible for them are functioning effectively in the college. The expert panel considers it positive that this structure collects information on student mobility and graduate employment, ensuring college-graduate, graduate-labour market feedback.

Although there is a database on graduates in DSMC, the information in the database is not updated from time to time, which does not allow the college to have clear information about the professional route of its graduates. The college has some mechanisms for developing students' analytical/research thinking, but these mechanisms need to be improved. The improvement of such mechanisms will contribute to the formation of analytical and creative thinking among students. There is a body for the protection of students' rights at DSMC, according to the self-evaluation, the student council informs about their rights, but it works incompletely. This process is mainly carried out by the deputy director for education.

There are mechanisms for evaluating the services provided to students at DSMC, which are highlighted by the college, and is very encouraging.

#### SUMMARY:

Taking into account that the college has mechanisms for student selection and admission, a policy for highlighting students' educational needs, services that promote students' careers, and mechanisms for evaluating and ensuring the quality of services provided, the expert panel finds that DSMC's activities are in line with to the requirements of criterion 4.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 4 is satisfactory.

#### **CRITERION V. FACULTY AND STAFF**

# **CRITERION:** The TLI has a highly qualified teaching and supporting staff to accomplish the institution's mission and to implement the goals set for academic programmes **FINDINGS:**

The requirements presented to the teaching staff are formulated in the educational

standards corresponding to the given programmes approved by the ESCS. The College has policies and procedures for the selection and dismissal of faculty and teaching staff. When studying the personnel potential, the level of preparation, pedagogical and work experience, etc. are taken into account. It should also be noted that the requirements for the professional activity of the teaching staff of the college, their rights and responsibilities are stipulated in the employment contract. The teaching staff is recruited through a competitive process, the distribution of announcements, and cooperation with the regional employment centre. The selection is made in accordance with the specifics of the educational programmes of the professional chairs. However, there are no clear requirements for the professional qualities of the teaching staff defined for each educational programme.

During the visit, it became clear that the college pays a lot of attention to the involvement of young professionals, with whom mentoring activities are carried out in the direction of sharing best practices and teaching. It should be noted that the main lecturers make up 72%, in conjunction 28% (including employers), of which 30% are under the age group of 40 years. The college is trying to ensure the stability of the teaching staff.

The College has clear policies and procedures for periodic faculty evaluations. The evaluation of the quality of the teaching staff's work is done based on the results of mutual class observations and student evaluations, and then further actions are planned, considering the modernization of educational programmes and the opinions of students. As mentioned in the self-evaluation it is noted that considering the opinions of external and internal stakeholders, the needs identified as a result of evaluations are discussed in the chairs, their possible solutions are provided, and a list of professors in need of training is also drawn up. Some lecturers participate in the trainings organized by MKUZAK. However, a unified system for the training of teaching staff has not been implemented. Due to limited financial resources, the college cannot provide professional training for staff.

There is a regulation of rewards and material incentives in the college. According to the internal disciplinary rules of the college, the employee is encouraged for efficient and conscientious work by the chair and in some cases also from the opinion formed as a result of student surveys. The types of incentives are defined for the employee, such as the declaration of thanks, one-time monetary reward, souvenir award, provision of an additional fee, waiver of disciplinary penalty, etc. However, during the visit, it became clear that financial incentives are not provided due to financial means.

During the site visit, it became clear that the college has the necessary teaching and administrative staff for the implementation of strategic goals. The administrative staff assist the teaching staff by providing didactic materials, etc.

#### **CONSIDERATIONS:**

The expert panel positively assesses the involvement of lecturers with high professionals with professional and human qualities, including doctor-lecturers, as well as employers in the college. However, there is no professional reserve at DSMC, therefore, in the absence of any lecturer, the normal course of organization of the learning process may be endangered. The college currently has a stable teaching staff (72% core staff) and 32% teaching staff under the age of 40, and is staffed with administrative and teaching staff with the necessary knowledge and skills. However, clear requirements for the quality of the teaching staff for each educational program have not been developed. The presence of such requirements will help attract competitive personnel. It is positive that the selection of professors is done in a competitive manner, which can contribute to the increase of competition.

The expert panel positively assesses that the college conducts an evaluation of teaching staff, conducts class observations, and open classes and surveys among students. There is a regulation for the submission and consideration of appeals, but the recorded problems are not always solved. Work planning which will be based on identified problems will contribute to the professional progress of professors.

Despite the fact that the lecturers participate in the trainings of MKUZAK, in recent years, professional training of teaching staff, as well as foreign language, computer knowledge, and new teaching methods training is not carried out due to limited financial resources. It is positive that the employee lecturers(doctors) undergo professional training in their field. During the visit, it was found out that the implementation of class observations and open classes of the teaching staff contributes to some extent to the exchange of experience of lecturers, in particular awareness of new teaching methods.

#### SUMMARY:

Taking into account that the college has teaching and administrative staff with the necessary qualifications to implement educational programmes, policies and procedures for the selection, evaluation, and professional advancement of teaching staff are in place, as well as the necessary administrative and teaching staff for the implementation of strategic goals, the expert panel finds that the activities of the college meet the requirements of criterion 5.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 5 is satisfactory.

#### **CRITERION VI. RESEARCH AND DEVELOPMENT**

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

#### **FINDINGS**:

In the five-year development plan of the college, it is planned to carry out research, experimental and expert activities. During the site visit, it became clear that the college does not have a research implementation policy and has not defined the scope of its main ambitions in the field of research, as well as no long-term strategy and mid-term and short-term programmes that express the interests and ambitions of the college in the field of research have been defined.

Within the main professional direction of the chairs, the lecturers organize and coordinate teaching-methodical works, such as the discussion of the latest teaching methods, the discussion of the teaching methodology of the modular system subjects, etc. Lecturers and students develop and implement creative, analytical experimental works (reports, individual independent works, stands, posters, mock-ups). During the site visit, it became clear that there are no mechanisms for encouraging similar works in the college, and no appropriate financial resources are allocated. The teaching staff does not publish educational manuals due to limited financial resources. The current implementation and control of the research work of the college is carried out by the lecturers, heads of departments, as well as the academic department.

During the site visit, it became clear that professional/scientific seminars are organized by partner organizations in DSMC, in which the teaching and student staff of the college participate. From the site visit, it became clear that during the practical lessons of the educational programmes considered for the development of research and analytical thinking among students assignments are given in formulating and interpreting situational problems (e.g. creating problems on the topics "Tuberculosis", "Bronchial asthma", on the topics of "prevention" and carry out the stages of the nursing process during them, etc.), development and implementation of role-playing scenarios (combining different sources), making posters (e.g. from the module "Disaster Medicine" on the topic "Evacuation of patients from the disaster zone", from the subject "Fundamentals of Nursing" on the subject "Infection Process Chain"; "Types of preventive health facilities" from topics, etc.) and making crosswords. The above-mentioned processes are most actively used in "Nursing" and "Pharmacy" educational programs. There are subject groups in the college, where students are assigned research works in the form of essays (eg: "Communication channels", "Comfort zones", "Euthanasia", "Stress-adaptation", "Basic human requirements", "Organization of pharmaceutical activities in Armenia" and etc).

For the effective implementation of research work, the college does not have a number of necessary resources, such as adequately equipped laboratories. Furthermore, the college does not have sufficient funds to ensure the internationalization of research.
However, the expert group also notes that one of the best mechanisms for connecting research activities with the educational process is the educational practices which are effectively implemented by the college, during which students have the opportunity to use hospital records, analyze cases related to patients, make conclusions, which are a component of the educational process, which promote the formation of professional skills and directly contribute to the process of formation of professional specialists.

#### **CONSIDERATIONS:**

There are some mechanisms of interrelation between research activity and educational process in the college. The expert panel positively assess the fact that through a series of tasks that are carried out during practical classes, students develop research and analytical ability, which is later applied in practical work. Students perform role plays and discuss special situations, during which the student's analytical ability develops. Students also present independent works, collect facts, and make posters, which contributes to the development of students' analytical and research skills. During the visit, it was found that in some cases, students are able to orient themselves correctly in unfamiliar situations and take responsibility for following their own and other people's actions and improving them.

However, the college still does not have a clear research development policy and procedures, and therefore there is no unified approach to the analytical, research capacity of students and faculty. Students are involved in subject groups by the wish. Very often only high achieving students participate. There is no evaluation system for research/analytical work in the subject modules.

#### **SUMMARY:**

Taking into account that the college has mechanisms for connecting research activities and the educational process, students has analytical and research abilities, the expert panel finds that the activities carried out by the college meet the requirements of criterion 6.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 6 is satisfactory.

#### **CRITERION VII. INFRASTRUCTURE AND RESOURCES**

# **CRITERION:** The TLI has necessary resources to create learning environment and to effectively support the implementation of its stated mission and objectives. FINDINGS:

One of the important issues of the five-year development plan of the college is to create a

technologically equipped modern learning and working environment, such as material and technical conditions, an educational and laboratory base with modern equipment and observational equipment, a library fund in line with the requirements of the time. However, during the expert visit, it became clear that the classrooms and laboratories are not equipped with modern equipment, simulations and appropriate computer equipment, and the planned activities are unrealistic without the investment of additional large financial resources.

The college regularly allocates some limited funds for the replenishment of the property and material and technical base: regular repair works are carried out, some necessary materials are purchased, and the library fund is replenished.

The management of the financial resources of the college is carried out through the preparation of the budget estimate on an annual basis and through the annual performance presentation of the year-end budget. According to the charter of the college, financing is done from the RA budget and own funds, which are generated from tuition fees. In connection with the change in the minimum wage, there was some increase in the hourly fee. According to the data presented, about 90% of the revenues received from the budget and tuition fees are spent on salaries. The RA law on the accounting of organizations is the basis for managing financial resources and distributing them according to goals for carrying out financial activities in the college, government decisions and other legal acts, and contracts concluded between students studying in the paid system. However, there is an imperfection of the mechanisms for evaluating the resource provision of existing educational programmes.

Since 2013, the Mulberry electronic document circulation system has been operating in the college, which carries out document circulation with the RA Ministry of Education, Sport and Culture. However, there is no internal electronic document circulation system.

In 2017, DSMC acquired the automated accounting AS Accountant-6 program, which is updated every year, and in order to work with this system, the accounting department employee was trained. The College uses an electronic financial reporting system. Acceptance and transfer of documents is also carried out through the college's e-mail address (bujqolej@rambler.ru). The college has an internet connection and a computer room which has recently been equipped with 4 new computers. The head of the department is responsible for organizing and managing the office of the college departments. All official and unofficial documentation of the college is recorded in the register.

For fire safety there are fire extinguishers, and fire protection panels in corridors and in all cabinet laboratories there are evacuation schemes. There is also a civil defense headquarters that protects students and employees in emergency situations. There is no central heating system in DSMC. Some auditoriums have old flue gas heating stoves. With the corresponding entries in the registers, through anonymous surveys of students, evaluations of the availability, applicability and efficiency of cabinet laboratories, computer classrooms, necessary equipment, and library services

are carried out. Surveys show that the resources provided to students and teachers are accessible.

The college is in dire need of attracting additional funds. The management of the college has applied to the Ministry of Education, Culture, Sports and Science and Found for Armenian Relief for financing the renovation of the building, but the issue has not yet been resolved. The management plans to undertake and implement grant programs in the near future, but no actions have been taken in this direction yet.

#### **CONSIDERATIONS:**

The expert panel positively assesses that the college is aware of the problem of ensuring the up-to-datedness of resources and tries to solve this issue by applying for grants. At the same time, the expert panel notes that the issue of upgrading resources has not yet been resolved, and the college's proactive steps to acquire additional financial resources will contribute to the completion of modern and applicable equipment suitable for the APs.

Despite the fact that the college is carrying out current repair works within its capabilities, the entire building needs a thorough repair. Due to limited financial resources, the college has not yet resolved the issue of unified heating of the building. During the visit, it became clear that some of the equipment in the laboratories serve as didactic material due to the loss of relevance. The college needs renovation of bathrooms, canteen and classrooms furniture, hall need to be improved, computer labs with modern computers and laboratories with old and modern equipment. The college's financial problems are also linked to declining student numbers. The process of assessing the needs of individual departments is not the basis of the planning of financial resources. Students and faculty have limited involvement in the planning and acquisition of information resources. The expert panel finds that there is no adequate environment for the lecturers to carry out the teaching process using modern methods, which can significantly hinder the effective implementation of relevant educational programmes.

It is positive that the laboratories have anatomical bas-reliefs, and many preparations placed in formalin, but the laboratories are not up-to-date, the materials are old, and the models are few and worn. A college graduate with the help of simulations is required to master certain skills that cannot be obtained during internships in hospitals. The existing resource base is not sufficient to train competitive professionals. There is no e-library and the current library is also not equipped with up-to-date literature. The expert panel considers that, however, there are laboratories that have certain saturation and for which some new materials are purchased for re-equipment: for example, materials are regularly purchased for the dental technician profession, or the pharmaceutical laboratory, where pharmaceutical preparations are made. However, it should be noted that the approach to re-equipment with resources is not of an institutional nature. For the teaching of science subjects, laboratories also need to be equipped with laboratory supplies and materials, such as new balances, magnetic stirrers, automatic pipettes, pH meters, etc.

It should be noted that, however, additional approaches applied by the teaching staff, posters prepared by students, and the possibility of free access to resources from the base of medical institutions contribute to the achievement of the outcome of the APs.

#### SUMMARY:

Taking into account that the DSMC does not have an up-to-date educational environment necessary for the implementation of the APs, does not provide adequate financial resources to provide and operate the necessary equipment, lacks an appropriate policy to ensure the implementation of the objectives of the APs, is partially provided with security conditions, the expert panel assesses that the college does not meet the requirements of criterion 7.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 7 is unsatisfactory.

#### **CRITERION VIII. SOCIETAL RESPONSIBILITY**

# **CRITERION:** The TLI 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:**

The College has external and internal accountability system but does not have defined system of unified accountability. At the end of the semesters and at the end of the year, the units of college submit reports to the administrative body that coordinates their work, which in turn reports to the director. The collegial governing body of the College, the Council (hereinafter - the Council), hears and evaluates the director's report once a year, which is the main reporting document. According to self-evaluation, this kind of accountability allows for identifying the problems in different circles and providing solutions to them (for example, the problems identified because of the lectures conducted in the chairs are discussed and solved by the head of the chair, methodologist, or deputy director for education) and to make targeted changes in order to improve management. From the observations of the expert panel, it became clear that the reports only record the work done and do not have an analytical nature. The system of accountability in DSMC is hierarchical. the heads of the department, the head of practice, and the methodologist are accountable to the vice director for education, and the vice director for education to the director.

The college also has an external accountability system. ne of the accountability mechanisms of external stakeholders is the submission of reports to the MoESCS, the State Revenue Committee, the National Statistical Service and other state agencies in accordance with the law (eg: the Career Center submits a report about graduates to the MoESCS every year). Due to the lack of an electronic website, the reports are not published.

Analyzes of the effectiveness of the existing accountability mechanisms are not carried out in the college. The college has certain ties with the society, but it is not systematic in nature. As a result of the meeting with the external stakeholders (doctors of "IR-Wing" LLC, managers of pharmacies, and directors of the school cooperating with the college), it was found that the latter are aware of the processes carried out at DSMC, they value the role of the college in the educational and health sectors of the region.

The transparency and accessibility of the activity of the college to the society is carried out through social networks (Facebook page), announcements published in the press of Dilijan Municipality, the career center responsible, visits of lecturers and students to schools in the region (verbal conversations), and cooperation with the unified social service. In order to attract applicants, the college posts announcements on billboards and prints information booklets.

The access of the college to society is also ensured through internal and external stakeholders, which are included in various structures of the college (school principals, employers) and processes (students, lecturers). Feedback from the society on the activity of DSMC is carried out through graduates, and employers (questionnaires, practising doctors-lecturers, personal contacts). Feedback received from the public is mainly collected by the career center, which started its activity in 2018.

There are no stable feedback mechanisms in the college which will facilitate the formation of relations with the public, the website is not yet ready, and the Facebook page does not contribute to the formation of stable and effective feedback with the public.

The college carries out the transfer of knowledge to the society through organized events (an event dedicated to the memory of the victims of the Spitak earthquake under the title "Day of Confrontation with Disasters"), open classes (practical training on the topic "Implementation of Evacuation"), as well as the lecturers, work from time to time in other companies and transfer their knowledge to society. During the 44-day war, the students provided first aid on a voluntary basis and passed on their knowledge to society. No analysis of the effectiveness of mechanisms of knowledge transfer to society was carried out by the college.

The college has developed a program within the framework of the region to ensure the continuous education of professionals who have been working for 10 years and more and need training, but it was postponed due to the covid-19 pandemic. According to the observations of the expert panel, the college provides consulting services, but mechanisms and tools for evaluating

their effectiveness have not yet been formed.

#### **CONSIDERATIONS:**

The expert panel positively assess the fact that the representative bodies (councils) established in college report to the director of the college with clear periodicity, and the latter reports to the college council, which contributes to a regulated and systematic approach to accountability.

The reports are presented in the format of records of facts, there are no conclusions, proposals aimed at eliminating the identified problems, analyses, problematic issues raised from previous years' reports are not addressed, but through them, the implementation of short-term plans becomes clear. There are certain mechanisms of dissemination of information in DSMC: Facebook page, print media and visits to schools in the region, which ensure the transparency of the college's activities. There is feedback from graduates and employers, but it is not systematic. Above mentioned circumstance prevents the full recognition of the needs of the stakeholders.

There are some mechanisms for transferring knowledge to the public at the college, but there are no tools for evaluating their effectiveness. As a result of the observations of the expert panel, it became clear that there are no stable feedback mechanisms in college that contribute to the formation of relations with the public, the effectiveness of the Facebook page has not been evaluated, the absence of an electronic website does not provide an opportunity to receive feedback from the public and to respond to the needs of external stakeholders.

#### **SUMMARY:**

Considering that the college regularly reports to external and internal stakeholders, provides feedback to employers and graduates, and implements some mechanisms to promote public relations and knowledge transfer, the expert panel assesses that the DSMC meets the requirements of Criterion 8.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 8 is satisfactory.

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

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

The college emphasizes the development of foreign relations and internationalization. Even with the first development plan of the college, internationalization and the development of foreign relations were defined as a strategic goal. With the next 2 development programs, the college also planned to create mechanisms for the development of effective international cooperation to establish contact with similar educational institutions of other countries. However, policies and procedures in this direction have not yet been developed, priorities have not been defined, appropriate actions have not been implemented, and there is no responsible person for coordinating the process.

According to the self-evaluation, the management of the college emphasizes the need for internationalization and the development of foreign relations, but the work aimed at internationalization is still not being carried out. The process of coordination of external relations in college is carried out by the director by involving partners (study, pre-graduation internships), as well as the career center, in cooperation with employers, regional employment center, regional schools (Dilijan School No. 4) to attract applicants and ensure the employment of graduates.

The college has signed cooperation agreements with medical institutions of the region: "Ir-Wing" LLC, Ijevan, Noyemberyan, Berdi Medical Centers, pharmacies, dental clinics, beauty salons, in the framework of which the students spend their practical training in the relevant medical institutions. The most active students are selected by them and get the opportunity to work in these institutions after completing their education. During the visit, the expert panel had meetings with leaders and representatives of a number of the above-mentioned organizations. During the site visit, it was found that the college does not carry out cooperation activities with the international structures operating in the Republic of Armenia.

In connection with the continuity of education, the college has signed cooperation agreements with "Vanadzor H. Tumanyan State Pedagogical Institute" and "Armenian Medical Institute". This cooperation gives the opportunity to the best graduates of the college to continue their education in the above-mentioned universities. The contract signed with the "Armenian Medical Institute" mentions the mobility of lecturers, which is not implemented.

Cooperation with medical educational institutions is weak. During the site visit, it was found that most of the student's knowledge of Russian and English is low. Most of the lecturers speak Russian, and the level of knowledge of English and other foreign languages is low. There are no clear mechanisms for improving students' and lecturers' knowledge of foreign languages at DSMC. Facts about the academic mobility of lecturers and students are missing.

#### **CONSIDERATIONS:**

The expert panel considers positively the fact that DSMC cooperates with some organizations, pharmacies and medical centres in the region, which contributes to students' acquisition of practical skills in accordance with the requirements of the modern labor market and

further career advancement. The active activity of the Career Center with the regional employment center and employers is also assessed positively, as a result of which the graduates have the opportunity to work professionally.

DSMC cooperates with some universities of RA, providing an opportunity to continue education to high-achieving students of the university. Although the college emphasizes the development of foreign relations and internationalization in its development plan, the expert panel considers the lack of steps and appropriate actions to contribute to this to be risky.

Another obstacle to the process of internationalization and the development of foreign relations is the fact that the VET institution does not allocate resources (human and financial) for the realization of these goals. It is also worrying that the DSMC does not show a proactive approach to cooperating with international organizations that have branches and structures in RA, which would be a positive factor in the work aimed at establishing external relations of the college, in ensuring the mobility of lecturers, as well as in the process of attracting additional resources.

The college emphasizes the knowledge of foreign languages of the teaching staff and students, but there are still no clear mechanisms aimed at improving them. The expert panel considers that the low level of knowledge of foreign languages does not provide an opportunity for conducting professional courses and ensuring the mobility of students and lecturers within the framework of educational institutions.

#### **SUMMARY:**

Considering that activities promoting the development of foreign relations and internationalization are not carried out in the DSMC, the college does not provide resources for activities aimed at internationalization, there is no initiative to cooperate with international organizations that have branches and structures in RA, there are no clear mechanisms aimed at increasing the level of knowledge of foreign languages, so the expert group considers that the DSMC does not meet the requirements of Criterion 9.

#### **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 9 is unsatisfactory.

#### **CRITERION X. INTERNAL QUALITY ASSURANCE**

**CRITERION:** The TLI has an internal quality assurance system for promoting establishment of a quality culture and continuous improvement of all the processes of TLI.

#### FINDINGS:

According to self-evaluation since April 15, 2021, the college has a quality assurance specialist, but the college has not yet developed regulations and procedures aimed at quality assurance. The college still does not have a quality assurance policy and an annual activity plan. Although before the selection of a quality assurance officer, the college did not have a quality assurance infrastructure and/or a responsible person, nevertheless, the college developed documents aimed at assessing the needs of the internal and external stakeholders of the college, especially.

- 1. Needs assessment regulations for stakeholders,
- 2. Policy for addressing the educational needs of students
- 3. Regulation of monitoring of academic programmes.

Only questionnaires for student surveys, student evaluation of faculty performance, and applicant needs assessment are included in the college's stakeholders' needs assessment regulations. Although the external and internal stakeholders are clearly defined in the regulation, the toolkit for assessing the needs of the stakeholders, the departments/persons responsible for the needs assessment, and the methodology for organizing the process and analyzing the resulting data are not presented. The above-mentioned policy and other fundamental documents presented also do not define the mechanisms for evaluating and improving the effectiveness of the stakeholder's needs assessment process and the unit responsible for it, as well as how and by what mechanism the received data can influence in the decision-making process. The student educational needs assessment policy includes the same questionnaires that were present in the college stakeholders' needs assessment regulations (except for the questionnaire for assessing the needs of applicants).

The regulation on monitoring and review of academic programmes stipulates that academic programmes are reviewed during the academic year by the relevant subject/cycle committee/head of a department, and the results are presented to the deputy director for educational and methodological works and the educational council to discuss, make recommendations and approve the proposed measures. The above regulation does not define the mechanisms for involving external stakeholders in the process of revising academic programs, the toolkit for the implementation of the proposals presented as a result of the process, the evaluation of the results of the implemented changes, and the responsible units/persons.

The scope of activities of the quality assurance responsible has not yet been specified. The accountability mechanisms of the quality assurance responsible are also not defined. The Quality assurance responsible is also the deputy director for academic affairs, who is involved in governing and advisory bodies. Financial resource management documents (% of total budget) for the last three years show that no financial resources have been allocated for quality assurance. College

staff did not participate in quality assurance capacity-building trainings.

The above-mentioned regulations and other fundamental documents of the college define the main external and internal stakeholders of the college, but a clear toolkit for assessing the needs of external and internal stakeholders (except students) and involving them in quality assurance processes has not yet been developed. During the site visit, it became clear that the procedure for involving external stakeholders in QA processes is under development. The college has not yet developed a policy for evaluating the effectiveness of lecturers' work.

The quality assurance system of the college is still in the formative stage, the evaluation of the effectiveness of the implemented processes has never been carried out and mechanisms for monitoring and evaluation of the processes have not yet been developed. At the same time, it should be noted that during the site visit, it became clear that the external and internal stakeholders of the college, and in particular the management system, value the existence of the QA system and its development.

College departments submit annual reports. However, the college has never carried out an evaluation of the effectiveness of the units' activities, or analysis of the structure, and no self-evaluation has been prepared.

Due to the lack of an official website of the college, the information about the processes implemented and to be implemented in the college, the analyzes carried out, the prepared reports are not available to the internal and external stakeholders of the college.

#### **CONSIDERATIONS:**

The expert panel positively assesses the steps towards the implementation of the quality assurance system. Although the college's quality assurance system is still in the initial stage of formation, some quality assurance processes have been implemented by various departments. However, in the absence of a quality assurance policy, the processes were not planned and coordinated by any department and were not analyzed in the context of strategic development, therefore, suggestions for improvement were not developed, as a result, they did not have an impact on the educational and management processes of the college and did not contribute to the formation of a culture of quality assurance.

Although during the site visit, the management of the college emphasized the establishment of a quality assurance system in the college and highly appreciated the work done by the quality assurance specialist, however, the college does not plan to provide financial and material resources for quality assurance. During the site visit, it also became clear that the relevant position passport was not developed when selecting the quality assurance specialist, therefore, in the opinion of the expert panel, the management system of the college did not outline in advance the series of abilities and skills necessary to fill the relevant position. The activities of the QA manager are unsystematic, and the accountability mechanisms of the QA manager are not justified. This significantly hinders the creation of a culture of quality assurance and still does not contribute to the effective strategic management of the college.

The quality assurance specialist is at the same time a member of the management and representative bodies, as she holds the position of Deputy Director for Educational Activities. Therefore, in this case, not only is the important principle of ensuring the autonomy of the quality assurance system violated, and it becomes impossible to objectively evaluate the processes implemented in the college because the deputy director is directly responsible for a number of processes. This also explains the fact that the quality assurance accountability mechanisms and place in the general structural hierarchy are not yet specified in the college. The presence of a large number of doctor lecturers in the college justifies the participation of external stakeholders in quality assurance processes, but the suggestions and observations presented by external stakeholders are not documented and analyzed in all cases. A system of processes has not been developed either.

In general, interaction with external stakeholders is not institutionalized and has a highly personalized character, as a result of which the change of relevant persons may lead to the deterioration of cooperation with external stakeholders and a decrease in efficiency. Although processes aimed at quality assurance have been implemented in the college, no work has been done to evaluate their effectiveness and review the implemented policies, which is caused by the lack of appropriate mechanisms and tools, as well as the lack of appropriate human resources.

The quality assurance processes implemented in the college are not enlightened. Although some quality assurance activities (in particular, surveys) have been carried out, their results are not accessible to the internal and external stakeholders of the college in any way, therefore there is no public control over the results of the surveys, public control over the problems identified during them and these results did not affect the activities of the departments, and also did not reflect on the further improvement of the processes.

#### **SUMMARY:**

Considering the lack of quality assurance policies and procedures, work plans, insufficient human, material and financial resources necessary for the management of internal quality assurance processes, the lack of quality assurance process monitoring and evaluation tools, as well as the involvement of the quality assurance specialist in the management system and the lack of accountability mechanisms, the expert panel finds that the college's quality assurance system is imperfect and does not create a sufficient basis for strategic management and does not have sufficient potential to contribute to the continuous improvement of all processes of the institution and the formation of a quality culture.

# **CONCLUSION:**

The compliance of the institutional capacities of DSMC to the requirements of CRITERION 10 is unsatisfactory

# EVALUATION ACCORDING TO ACCREDITATION CRITERIA

CRITERION	CONCLUSION
I. Mission and Purposes	Satisfactory
II. Governance and Administration	Unsatisfactory
III. Academic Programmes	Satisfactory
IV. Students	Satisfactory
V. Faculty and Staff	Satisfactory
VI.Research and Development	Satisfactory
VII. Infrastructure and Resources	Unsatisfactory
VIII. Societal Responsibility	Satisfactory
IX. External Relations and Internationalization	Unsatisfactory
X. Internl Quality Assurane System	Unsatisfactory

Anna Poladyan

**Chair of Expert Panel** 

13.01.2022

#### **APPENDICES**

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

**Anna Poladyan**- Graduated from the Department of Biophysics, Faculty of Biology, Yerevan State University, in 1994. In 1994-1996 she was a researcher at the Department of Biophysics, Faculty of Biology, YSU, and a senior laboratory technician. She was a junior scientific researcher in 1996-1998, a researcher in 2000 and a senior scientific researcher later in 2000-2018. She has received her PhD in Biological Sciences in 2000. She was a consultant at Microbial Biotechnology and Biofuel Innovation Centre in 2016-2017. Since 2012 she has been Associate Professor at the Chair of Biochemistry, Microbiology and Biotechnology of YSU, and from 2021, head of this chair. She has participated in exchange programs and a number of conferences. She has published about 22 scientific articles, books and textbooks. She has participated in about 12 grant programmes. She has been awarded a number of awards.

Ani Hakobyan – In 2021 graduated from YSU, Faculty of Geography and Geology, post-graduate studies. Since 2020, he has been working as a senior specialist in the Center for Quality Assurance of Education of the NUACA. From 2021 to today, he is the Armenian responsible for quality assurance of the GeoTAK project implemented within the Erasmus+ program. Lecturer of the "Basics of Geographical Information Systems (GIS)" course of the Department of Urban Planning of the NUACA. Science and geography teacher at "Shirakatsi Seminary" international scientific and educational complex.

**Anahit Martirosyan** - Graduated from the National Institute of Health in 1996. She currently works at Polyclinic No. 20 state SNCO, in the department of obstetrics and gynaecology. 1998-2021 worked at the Yerevan State Base Medical College. Participated in a number of trainings.

**Spartak Simonyan** - Student of Yerevan State Base Medical College. Participated in the training of student-experts of the "Student Voice" project, organized by ANQA.

# **APPENDIX 2. SCHEDULE OF SITE VISIT**

	14.11.2021	Start	End	Duration
1	Departure from Yerevan to Dilijan	12:00	14:00	<b>120</b> min.
2	Resource observation	16:00	17:00	60 min.
	15.11.2021	Start	End	Duration
1	Meeting with the Head of the College	09:30	10:30	60 min.
2	Meeting with deputy directors	10:40	11:40	60 min.
3	Meeting with members of the self-evaluation group	12:00	12:40	40 min.
4	Break, expert panel discussions	13:00	14:00	60 min.
5	Meeting with graduates	14:10	15:10	60 min.
6	Meeting with employers	15:30	16:30	60 min.
7	Document review and closed meeting of the expert panel	16:40	18:00	80 min.

	16.11.2021			End	Duration
1	Meeting with the members of the Management Board		09:30	10:30	60 min.
2	Meeting with head of chairs and m	ethodologist	10:40	11:40	60 min.
3	Meeting with students (10-12 people).		11:50	12:50	60 min.
4	Break, expert panel discussions		13:00	14:00	60 min.
5	Meeting with representatives of the	e teaching staff (10-12 people).	14:10	15:10	60 min.
6	Meeting with members of the stude	ent council	15:20	16:00	40 min.
7	Meeting with heads of departments /Head of educational department, head of career centre, librarian, accountant, purchasing coordinator, HR department/		16:10	17:10	60 min.
8	Document review and closed meeting of the expert panel		17:20	19:00	100 min.
	17.11.2021p.		Start	End	Duration
1	Meeting with the responsible of the AP "Nursing"	Meeting with the responsible of the AP "Pharmacy", "Dental technical work".	09:30	10:30	<i>60</i> min.
2	Meeting with the Faculty of the AP "Nursing"	Meeting with the Faculty of the AP "Pharmacy", "Dental technical work".	10:45	11:45	60 min.
3	Meeting with the students of the AP "Nursing"	Meeting with the students of the AP "Pharmacy", "Dental technical work".	12:00	13:00	60 min.
4	Break, expert panel discussions		13:10	14:10	60 min.

5	Meeting with employees of the Quality Assurance department		15:20	60 min.
6	Open Meeting	15:30	16:30	60 min.
7	Document review and closed meeting of the expert panel	17:00	19:00	120 min.
	18.11.2021 թ.	Start	End	Duration
1	Meeting with the member(s) selected by the expert panel	09:30	10:30	60 min.
2	2 Meeting with the Head of the College		11:00	25 min.
3	Return from Dilijan to Yerevan	12:00	14:00	<b>120</b> min.

### APPENDIX 3. LIST OF DOCUMENTS OBSERVED

Ν	Name of the document	Criterion
1.	2012-2017 Strategic Plan	1
2.	Labor market needs assessment report	1
3.	An analysis of satisfaction ratings of employer	1
4.	Career division performance report	1
5.	Procedure for the assessment of the needs of stakeholders	1
6.	Foundations of additional professional counselling	1
7.	The latest analysis concerning employer needs assessment	1
8.	Minutes of the Board of Management	2
9.	Composition of the Board of Directors	2
10.	Planning of financial resources, report/analysis on the evaluation of the effectiveness of the distribution of financial resources	2
11.	Work plans	2
12.	Regulations of the Director	2

13.	Analysis of stakeholder satisfaction assessment	2
14.	Reports of state qualification commission	2
15.	Records of vacancies	2
16.	Annual plans and reports of chairs, departments (for the last three years)	3
17.	List of subjects of the chairs	3
18.	Minutes of meetings / for the last three years/	3
19.	Lists of classes	3
20.	Practice notebooks/one from each course/	3
21.	Lecture books / one from each chair/	3
22.	Lecturer portfolios, lecturer plans	3
23.	Internship programs, completed diaries, and internship reports / for the 3 selected educational programmes/	3
24.	Control List	3
25.	Lecturer training packages /unique cases/	3
26.	Announcements regarding open classes	3
27.	Recordings of done work with beginning lecturers	3
28.	Schedule of work with students of low achiver	3
29.	Procedure for tuition reimbursement and allowance	4
30.	Booklets	4
31.	Anonymous survey samples	4
32.	Excerpts from the meetings of the Board of Directors, when the issues raised by the students were discussed	4
33.	Bases on satisfaction of consulting services	4

34.	Schedule of additional classes	4
35.	Acknowledgments given to students	4
36.	Professional tests that reveal a person's professional orientation	4
37.	Documents presenting the procedure, form and criteria for the selection of lecturers /some cases/	5
38.	Passports of teaching staff positions	5
39.	Regulation of remuneration and material incentives of the director and lecturers	5
40.	Professional essays	6
41.	Documents on subject groups and organized seminars	6
42.	Fundraising procedure	7
43.	Budget performance	7
44.	Bases on cooperation with primary and secondary professional educational institutions operating in the region, as well as medical institutions	9
45.	Questionnaire for evaluating the effectiveness and quality of graduate work by external stakeholders	10

### APPENDIX 4. RESOURCES OBSERVED

- Classrooms
- Gym
- Library-reading room
- Lecture room
- Computer classroom
- Administrative staff office
- Laboratories
- Hall of events

# APPENDIX 5. ORGANIZATIONAL STRUCTURE OF THE EDUCATION INSTITUTION

