



National Center For Professional
Education Quality Assurance
Foundation

ACCREDITATION COMMITTEE

ANQA-2022/68

DECREE N 66

July 21, 2022

**ON ACCREDITATION OF INSTITUTIONAL CAPACITIES OF
DILIJAN STATE MEDICAL COLLEGE**

General Information about the Institution

Full name of the Institution: Dilijan State Medical College SNPO
Official Address: Myasnikyan Str., Dilijan, Tavush province
province, RA

Previous Accreditation **Not available**
decision and date:

Guided by the Statute on the State Accreditation of RA Education Institutions and their Academic Programs approved by the RA Government Decree N 978-N as of 30 June 2011, the RA Government Decree N 959-N as of 30 June 2011 on approval of Establishing Accreditation Criteria for Tertiary Education of RA, the Procedure on the Formation and Operation of the Accreditation Committee of the National Center for Professional Education Quality Assurance foundation (hereinafter referred to as ANQA)” as well as by the Regulation on the Formation of ANQA Expert Panel, ANQA’s Accreditation Committee (hereinafter referred to as the Committee) discussed the issue on accreditation of institutional capacities of the Dilijan State Medical College (hereinafter referred to as “DSMC”, “TLI”) in the session of the Accreditation Committee held on July 21, 2022.

The main phases of the accreditation process were carried out within the following periods:

Submission of application: February 12, 2021
Submission of the self-evaluation: July 15, 2021
Site visit by the expert panel: November 15-18, 2021

Submission of expert panel report: January 17, 2022

Submission of the follow-up plan March 17, 2022

The external review of the DSMC's institutional capacities was carried out by an independent expert panel formed in compliance with the requirements set by the Regulation on the Formation of the Expert Panel. The evaluation was carried out according to the 10 criteria of institutional accreditation approved by the RA Government Decree N 959 as of 30 June 2011.

Among 10 criteria of the institutional accreditation, 4 of them — **“Governance and Administration”**, **“Infrastructure and Resources”**, **“External Relations and Internationalization”**, **“Internal Quality Assurance”** were evaluated as unsatisfactory.

Having examined the DSMC's self-evaluation of institutional capacities, remarks and suggestions on the preliminary version of the expert panel report, the expert panel report, the follow-up plan; having heard the conclusions on the expert panel evaluation, which were made by the three members selected by the Chair of the Accreditation Committee and were formed as a result of the meetings with the expert panel members and the DSMC's representatives; as well the comments and suggestions made by the Accreditation Committee members, the Committee stated the following:

1. There are some problems in terms of the credible award of qualifications. However, there are trends and examples of development.

The DSMC offers professions that are highly demanded in the labour market. The academic programmes (APs) align with the TLI's mission and comply with the state academic standards and the requirements of the NQF Level 5.

The DSMC pays sufficient attention to the APs' development and review. The outcomes have been defined and are sometimes discussed with employers. Chairs develop teaching and learning methods that support student-centered learning in line with the APs' expected outcomes. The APs meet the region's labour market demands. Employers are generally satisfied with the theoretical knowledge and practical skills of the TLI's alumni.

The DSMC has necessary and quite stable teaching and supporting staff. The doctors' involvement in the educational process is high.

The professions arising from the needs of the labour market create good opportunities for students' employment.

For the ensurance of outcomes, the DSMC tries to fill the resource (material, building, modern equipment) gaps in close cooperation with employers. However, no work has been actively carried out for the improvement of its own resources.

The production of staff specialized in highly demanded medical professions, close relationship with the relevant employers, in this case, the involvement of a large percentage of doctors in the educational process and the conduct of internships in medical institutions, has enabled the DSMC to provide alumni with up-to-date, practical skills in accordance with the requirements of the NQF and employers. Though not up-to-date state of material-technical equipment creates problems for the effective formation of students' practical skills, Dilijan Medical Center and other medical institutions are the bases for organizing students' practical courses.

2. Governance and quality assurance systems are at the stage of formation. However, there are development trends and the governance is aimed at quality enhancement and the credible award of qualifications.

An attempt has been made to implement strategic planning, but the process is still in its infancy. For the fulfilment of the DSMC's mission, a five-year development plan has been designed. The plan includes the development goals and objectives. Formulated problems are generally aimed at the realization of the defined strategic goals. Though long-term, mid-term and short-term plannings have been developed, there are no clear mechanisms for their implementation and monitoring.

The DSMC's governance system is not provided with sufficient human, material and financial resources.

Strategic documents are not considered to be an important basis for the activity of the governance system. Administrative as well as other substantive documents are not available to stakeholders, which is one of the key problems.

The decision-making is based on the DSMC's overall understanding of problems and practice. The TLI has recently undertaken the introduction of a quality assurance system, which is still at the

stage of formation. The quality assurance system does not have influence on the DSMC's governance and decision-making yet.

The DSMC has been established to carry out medically oriented secondary vocational academic programmes. However, being the only TLI of the region, it needs reforms.

3. Internationalization and research/creative activities do not sufficiently support the credible award of qualifications.

The DSMC does not have a policy for the conduct of research and has not defined the scope of main ambitions in the research field. A long-term strategy, mid-term and short-term plans that express the DSMC's interests and ambitions in the research field have not been defined as well. For the conduct of research activities, the DSMC is in dire need of replenishment of resources, laboratories, as well as preparation of academic manuals for the conduct of laboratory and practical work and introduction of a joint system for students' research and analytical activities. However, at the initiative of doctors, some mechanisms for the connection of learning and research activities, as well as the development of students' analytical thinking have been set. Nonetheless, there are no mechanisms for the evaluation and encouragement of these results.

External relations are mainly limited to regional relations (with employers). Cooperation with the capital or regional HEIs and other institutions is strictly limited. Meanwhile, feedback from external stakeholders has contributed to the APs' enhancement.

Due to the lack of the DSMC's official website, the information about the TLI's processes, submitted reports are not available to the stakeholders.

The DSMC tries to take steps towards the creation of the website with its own resources.

There are mechanisms for the selection and admission of students, a policy for the identification of the students' educational needs, as well as services promoting students' careers. There are also mechanisms for the evaluation and assurance of the services' quality.

4. The shortcomings mentioned in the expert panel report have crucial impact in terms of the credible award of qualifications. Meanwhile, grounds are laid for enhancement.

5. The follow-up plan is realistic and in case of implementation that will lead to qualitative positive changes.

Taking into consideration the above mentioned, as a result of an open voting, the Accreditation Committee:

DECIDED

1. **To award conditional institutional accreditation to Dilijan State Medical College SNPO for 2 /two/ years.**
2. After the publication of the decision on accreditation award, to submit a revised follow-up plan based on the expert panel report and respective time schedule to ANQA within two months, taking into account the need to give urgent solution to the problems existing in governance and administration, resources, external relations and internationalization, internal quality assurance .
3. To pay special attention to:
 - a) the need to have clear and measurable qualitative and quantitative indicators for evaluating the effectiveness of the TLI's mission and goals, as well as implemented processes;
 - b) the decision-making based on the previously collected and analyzed data;
 - c) the development and introduction of effective mechanisms that ensure stakeholders' active involvement in the processes of monitoring and evaluation of the APs' effectiveness;
 - d) evaluation of the teaching staff's effectiveness, use of clear mechanisms for the ensurance of professional progress;
 - e) the creation of conditions for those with special needs;
 - f) the connection of research and educational processes, the acquisition of practical skills;
 - g) the organization of teaching aimed at the development of students' analytical, creative and critical skills;
 - h) the formation and continuous development of quality culture, implementation of the PDCA cycle in all the processes.

4. In accordance with the requirements set by point 12 of the the Statute on the State Accreditation of RA Education Institutions and their Academic Programs, every 6 /six/ months to submit a written report to the ANQA on the results of carried out activities by ensuring the evaluation of enhancement of the TLI's activity, innovations and achievements.
5. To assign the ANQA to carry out mandatory monitoring of effectiveness of the activities of the TLI in accordance with the KPIs.

Chair of the Accreditation Committee:

A. Saghyan

August 19, 2022

Yerevan