



National Center For Professional
Education Quality Assurance
Foundation

ACCREDITATION COMMITTEE

ANQA-2021/43

DECREE N 43

5 May 2021

ON ACCREDITATION OF INSTITUTIONAL CAPACITIES OF ARMENIAN MEDICAL INSTITUTE

General Information about the Institution

Full name of the Institution:	Armenian Medical Institute
Official Address:	14 Titogradian St, Yerevan 0087, Republic of Armenia
Previous Accreditation decision and date:	have not been made

Guided by the regulation 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; by the RA Government Decree N 959-N as of 30 June 2011 on the “Approval of RA Standards for Professional Education Accreditation”; by the procedure on the “Formation and Functioning 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 the Expert Panel of ANQA”, the ANQA Accreditation Committee (hereinafter referred to as the Committee) discussed the issue of accreditation of institutional capacities of the “Armenian Medical Institute” PC (hereinafter referred to as the TLI) in the session of the Accreditation Committee held on 5 May 2021.

Having examined the TLI's self-evaluation, remarks and suggestions on the draft report of the expert panel, the expert panel report, the TLI's action plan on the elimination of shortcomings mentioned in the expert panel report, having heard the conclusions on the expert panel evaluation of the TLI which were made by the three members selected by the Chairman of the Accreditation Committee and were formed as a result of the meetings with the expert panel members and the TLI's representatives; as well the comments and suggestions made by the Accreditation Committee members, the Committee stated the following:

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

Submission of application:	19 December 2018
Submission of self-evaluation:	13 September 2019
Site-visit by the expert panel:	16-18 December 2019
Submission of expert panel report:	11 March 2020
Submission of action plan on the elimination of shortcomings:	5 May 2020

The expertise of “Armenian Medical Institute” Producers Cooperative 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 of the ANQA”. The evaluation was carried out according to the 10 criteria of institutional accreditation approved by the RA Government Decree N 959-N as of 30 June 2011. Among 10 criteria of the institutional accreditation – “**Governance and Administration**”, “**Academic Programmes**”, “**Research and Development**” and “**Societal Responsibility**” were evaluated as unsatisfactory.

While carrying out the evaluation, the expert panel took into consideration that “Armenian Medical Institute” PC is a state higher education institution according to its mission, "AMI is a private higher education institution with a medical orientation, the main mission of which is to provide students with quality theoretical knowledge, practical skills and shape clinical thinking through professional competencies. The fact that the AMI is currently in the stage of reforms has also been taken into account and the grounds for the introduction of plan-do-check-act cycle in different fields of AMI are still being formed.”

1. The TLI generally ensures the credible award of qualifications.

AMI has launched the development and implementation of outcome-based educational programmes. The academic programmes include all the necessary components, as well as documents related to all processes of the programmes. For acquisition of practical skills, resources of Erebuni Medical Center are available to students.

However, there are some shortcomings in terms of teaching, learning policy, assessment methods and guidelines. Monitoring of the effectiveness of academic programme implementation is available, but there is uncertainty in the assessment of practical skills. There are problems regarding the control of different cycles. The processes of planning, implementation and monitoring of academic programmes need to be improved. The faculty consists mainly of acting, experienced doctors, who have a significant positive impact on the quality of educational services provided. AMI has a specific policy on the selection of faculty and supporting staff. There are specific approaches to the evaluation and training of the teaching staff, which are aimed at the enhancement of the teaching staff. The rejuvenation of the teaching staff is also highlighted. Sustainable cooperation with clinics, as well as everyday accessibility of resources and the real hospital environment to students is a positive fact. In general, the existing academic programmes, teaching staff, material and technical equipment ensure the training of graduates in accordance with the requirements of employers, mainly ensuring a credible award of qualifications.

2. Governance and quality assurance systems generally support the improvement of the credibility of qualifications awarding

In recent years, AMI has launched certain approaches of strategic planning. However, strategic planning has not yet been implemented at all levels. The governance of the TLI is carried out by the four founders on a rotating basis. However, it is not clear to what extent this approach contributes to the effective governance.

Powers and authorizations are not distributed among AMI’s governance system.

Although data collection mechanisms and systems are in place, there is a lack of data-driven decision-making and result-based management approaches.

Although the internal quality assurance system has just been introduced, there are some prerequisites for the introduction of continuous improvement of quality culture. The internal system of AMI's quality assurance generally contributes to the continuous improvement of the processes and tries to promote the formation of the quality assurance and control system.

There is a qualitative growth of QA processes in AMI, and the stability of the quality assurance centre, the involvement of internal stakeholders in those processes is appreciable.

3. *Internationalization and research /creative activities have trends for development.*

There are certain problems in the field of research at AMI. There is no strategy expressing the research directions and ambitions of the HEI. There are no clear long, mid and short term programmes. The link between research and learning processes is not clear, which is due to incomplete mechanisms for managing scientific activities.

AMI is still very passive in societal responsibility. At the same time, relations with external stakeholders are effective. Through external relations, AMI provides some exchange of experience and development, and maintaining close and stable links with various local clinical organizations, contributes to the credible award of qualifications.

AMI takes the first steps towards internationalization, has goals, and gradually adapts resources to the needs of international students. The planned work will create opportunities for further development and advancement of the TLI.

The external relations of the TLI and the prerequisites for the introduction of internationalization support the credible award of qualifications. Research /creative approaches still need to be developed.

4. There are shortcomings that do not have key impact in terms of credible award of qualifications, and there are bases established for improvement.

5. The TLI's plan for elimination of shortcomings mentioned in the expert report is mainly realistic; the planned reforms will lead to qualitative changes.

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

DECIDED

1. **To award institutional accreditation to “Armenian Medical Institute” PC for 4 /four/ years.**
2. After the publication of the decision on accreditation award, to submit the revised action plan for the elimination of shortcomings mentioned in the expert panel report and respective time-schedule to ANQA within two months taking into account:
 - a) the urgent need to give solutions primarily to the problems existing in the fields of **“Governance and Administration”, “Academic Programmes”, “Research and Development”, and “Societal Responsibility”**;
 - b) the necessity to clarify the measurability of key performance indicators for the evaluation of progress and efficiency of the HEI's processes
 - c) the necessity to clarify the amount of human and financial resources, the timeframe for the evaluation and implementation of the processes carried out by the HEI;
3. To pay a special attention to:
 - a) the distribution of power and authorizations between the governing bodies, clear distribution of work;
 - b) the conduct of reports based on analyses, clear quantitative and qualitative data;

- c) the conduct of systematic analysis of the external environment;
 - d) the reinforcement of the link between learning and research;
 - e) the improvement of the result-based management system;
 - f) the identification of research priorities and formation of strategy;
 - g) to clearly define the number of simulations for formation of outcomes as well as introduce student portfolio as an assessment tool with the purpose to ensure practical education;
 - h) to introduce the factor of key performance evaluation and enhancement-led mechanisms for academic programmes' implementation and monitoring, taking into account the peculiarities of clinical teaching;
 - i) to develop and carry out programmes aimed at the improvement of the teaching staff and development of medical doctors' pedagogical capacities;
 - j) to continue the implementation of continuous improvement of quality throughout entire HEI.
4. To organize internal audit of academic programmes with the involvement of external experts.
 5. In accordance with the requirements set by the Clause 12 of the regulation 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 improvement of the institution's activity, innovations and achievements.
 6. To assign the ANQA to carry out mandatory monitoring of effectiveness of the TLI's activity in accordance with the KPIs.

Chairman of the Accreditation Committee:

A. Saghyan

**5 May 2021
Yerevan**