



National Center For Professional  
Education Quality Assurance  
Foundation

**ACCREDITATION COMMITTEE**

**ANQA-2023/87**

**DECREE N 87**

May 22, 2023

**ON ACCREDITATION OF INSTITUTIONAL CAPACITIES OF  
MARTUNI STATE MEDICAL COLLEGE  
General Information about the Institution**

Full name of the Institution: Martuni State Medical College SNCO  
Official Address: 2/1 Narekatsi St., Martuni, Gegharkunik 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 the Approval of 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 Yerevan State Sports College of Olympic Reserve (hereinafter referred to as “MSMC”, “TLI”) in the session of the Accreditation Committee held on May 22, 2023.

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

Submission of application: February 28, 2022  
Submission of the self-evaluation: September 12, 2022  
Site visit by the expert panel: November 14-17, 2022

Submission of expert panel report: February 9, 2023

Submission of the preliminary follow-up plan May 6, 2023

The external review of the MSMC'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, 3 of them — **“Governance and Administration”**, **“External Relations and Internationalization”**, **“Internal Quality Assurance”** were evaluated as unsatisfactory.

Having examined the TLI'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 TLI's representatives; as well the comments and suggestions made by the Accreditation Committee members, the Committee stated the following:

***1. The MSMC generally ensures the credible award of qualifications.***

The MSMC's academic programmes (APs) adhere to its mission and state academic standards and generally align with the expected outcomes. Various teaching methods are used. There is a range of assignments for students. An effective assessment system is in place.

The APs are monitored, leading to changes generally focused on clear distribution of theoretical and practical hours. Practical hours have been added. However, the monitoring lacks systemic approach. There is no policy and procedure for this process. However, some mechanisms such as class observations, surveys have a certain impact on the APs' enhancement.

In response to internal stakeholders' recommendations, some APs have incorporated a research component, contributing to the improvement of students' knowledge and capacities, as well as the development of analytical skills.

The TLI has policies and procedures for the selection of the teaching staff, which are effectively implemented. There is a stable teaching staff with relevant qualifications and professional

experience. Doctor specialists are involved in the educational process. Though the MSMC does not have a clear policy for the evaluation of the teaching staff, certain mechanisms for evaluating teachers are used. As a result, teaching methods and evaluation mechanisms are improved. The teaching staff undergoes regular trainings.

For the implementation of the strategic plan (SP), the TLI generally recruits suitable administrative and teaching staff.

There is a shortage of laboratories and specialized cabinets. However, this issue is addressed through the joint use of the medical institutions' resources. The library is well stocked with professional literature. There has been an increase in funding in recent years. Also, the resources are acquired on a priority basis and are available to students.

## ***2. Governance and quality assurance systems generally support the enhancement of the credible award of qualifications.***

Being the only vocational education and training institution in the region, the MSMC has clearly defined its mission, goals and objectives. The TLI's mission and goals outlined in the SP are consistent with the NQF. The stakeholders are to some extent involved in the development of strategic directions.

The TLI's governance is generally characterized by sole and situational approaches. The SP's planning and management are not comprehensive. The short-term plans do not arise from the long-term planning. The financial possibilities for the SP's implementation are not assessed. The KPIs are not clearly stated yet.

There is accountability but its connection with the SP is weak. The analyses are also weak and are generally factual. The decision-making process is not data-based. The PDCA cycle does not fully function. Mechanisms for data collection, planning and enhancement are generally used in the direction of teaching and academic programmes.

The quality assurance system is still at the stage of formation. The quality assurance system needs human resources. Some documents related to quality assurance are under development. The TLI attaches importance to the quality assurance embedment. However, the steps taken so far are insufficient.

***3. Internationalization and research/creative activities have development trends and support the credible award of qualifications.***

The MSMC's student recruitment and admission mechanisms are in place. Certain processes aimed at the identification of students' needs are carried out. Students have the opportunity to receive additional recommendations. The career support services for students function effectively.

The TLI has an established alumni base. There is also a student council. A number of issues raised by it have been addressed and resolved.

The MSMC's strategic plan has defined research component a strategic issue. Analytical, research and creative assignments are provided to the students within the scope of academic programmes. An attempt is made to connect the research and teaching processes.

There is a well-formed accountability system, ensuring the functioning of certain mechanisms for accountability and feedback.

The MSMC carries out activities in the direction of transferring knowledge to the society. The involvement of the teaching staff and students in various trainings and volunteering activities, contribute to the increase in the awareness of the TLI's initiatives among the society, as well as to the development of students' practical skills.

External relations and internationalization are among the MSMC's strategic priorities. The TLI strives to develop external relations and internationalization. The internationalization processes are still weak. The processes are not clearly planned. There is no policy for internationalization. The level of foreign language proficiency is low. Currently, external relations are limited to the internships and practical training, supplementing the scarcity of resources. Local connections do not ensure the TLI's continuous enhancement.

4. The shortcomings mentioned in the expert panel report do not have crucial impact in terms of the credible award of qualifications. Grounds are laid for enhancement.

5. The follow-up plan actually involves the main recommendations provided by the expert panel. The follow-up plan is realistic and in case of implementation, will lead to positive 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 the Martuni State Medical College SNCO for 4 /four/ 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 the fields of **“Governance and Administration”, “External Relations and Internationalization”, “Internal Quality Assurance”**.
3. To pay special attention to:
  - a) the need to have clear and measurable KPIs for the evaluation of the implemented processes' effectiveness;
  - b) the decision-making based on the previously collected and analysed data;
  - c) the equal distribution of positions and responsibilities among the administrative staff;
  - d) the use of comprehensive toolset for the teachers' evaluation;
  - e) the development and diversification of assignments that form students' research and analytical skills in all APs;
  - f) the expansion of the scope of cooperation with other VET institutions and medical centers;
  - g) the improvement of the system of accountability to the stakeholders;
  - h) the formation and continuous development of the 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 2 /two/ years 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**

**May 30, 2023**

**Yerevan**