



## ACCREDITATION COMMITTEE

DECREE N 1

21 February 2015

### On Awarding Institutional Accreditation to YEREVAN STATE MEDICAL UNIVERSITY AFTER M. HERATSI STATE NON-COMMERCIAL ORGANIZATION

#### General Information on the Institution

Full name of the Institution: **Yerevan State Medical University after M. Heratsi**  
Acronym: **YSMU**  
Legal Form: **State Non-Commercial Organization**  
Official Address: **2 Koryun str., Yerevan, 0025, RA**  
Decree and date of Previous Accreditation: **Not available**

Guided by the regulation on “State Accreditation of RA Institutions and their Educational Programs” approved by the RA Government on 30 June, 2011 N978-Ն decree; by N959-Ն (30 June, 2011) decree on approving RA Standards for Professional Education Accreditation; by the Procedure on the Formation and Functioning of Accreditation Committee of “National Center for Professional Education Quality Assurance” foundation (ANQA) as well as by ANQA Regulation on the Formation of the Expert Panel, in the open session held on 21 February, 2015 the Accreditation Committee of “National Center for Professional Education Quality Assurance” foundation (hereinafter referred to as the Committee) discussed the issue accreditation of institutional capacities of Yerevan State Medical University after M. Heratsi (YSMU) with the presence of the MoES representatives, Chair of the expert panel, ANQA coordinator of the accreditation procedure and YSMU representatives.

Having examined the self-analysis presented by YSMU; expert panel report; YSMU’s action plan for the elimination of shortcomings mentioned in the expert panel report as well as ANQA conclusion, the Committee stated the following:

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

Submission of the Application 01 March, 2012

Submission of the self-assessment report 02 April, 2013  
Site-visit 09-12 June, 2013  
Submission of the Expert panel report 21 October, 2013  
Submission of Follow-up plan 20 February, 2014

The expertise was carried out by an Expert Panel formed in compliance with the requirements set forth by the ANQA regulation on the composition of expert panel. The assessment was carried out based in line with 10 criteria of institutional accreditation established by N959-Ն (30 June, 2011) decree on approving RA Standards for Professional Education Accreditation.

During its 90-year activities Yerevan State Medical University has provided higher medical education as an educational and scientific state higher education institution (HEI). YSMU's activity is aimed at the organization of medical, pharmacological, sociological, humanities, basic scientific research and educational activities. During its activity the University has not undergone accreditation process thus the current self-assessment procedure based on 10 criteria of institutional capacities was the first attempt of the University. In accordance with RA on Higher and Postgraduate Professional Education approved in 2006, two-tier higher education system was approved at YSMU. As it is defined in the mission the University should "prepare up-to-date and competitive specialists having knowledge, skills and competences in line with Armenian National Qualifications Framework (ANQF)". All the BA and MA academic programs have been revised and approved since 2006 to align with the requirements of two-tier education. The University has a good practice of teaching foreign students in Armenian, Russian and English languages.

YSMU has taken actions aimed at improving its infrastructure and bringing it in line with the academic programs. The strategic plan gives importance to the infrastructure including lecture-rooms, building conditions, logistics base, reconstruction and re-equipment of clinics, library and other components of the learning environment. The student scholarships, funds from trainings of doctors and nurses, thematic scientific funding as well as the funds for the medical services constitute the main part of state budgetary entries. The extra-budgetary entries are mainly generated from tuition fees of students. However the University still has the lack of financial means for obtaining necessary resources and equipment aimed at the fulfilment of mission and goals. YSMU has motivated and devoted teaching staff which fosters tight cooperation and group discussions. There are 1100 staff members involved in teaching, scientific and clinical activities, 162 DR/SC of which and 80 are Professors in Medicine. In accordance with the strategic goals the teaching staff has been recruited. However there is a need to recruit more teachers from other universities as well as to carry out processes aimed at the enhancement of their qualifications and professional development.

Students YSMU are involved in different structural units of the University which fosters their active participation in educational process. Currently, there are about 5.500 students enrolled in the studies at

seven faculties of the University, 1140 of them are foreign students. The admission of students is carried out in accordance with the regulation approved by RA Government. The University carries out activities which are aimed at the organization of additional courses for students and provision of consultancy by the teaching staff as well as student support services. YSMU develops plans for career planning of students. The structure of governance of the University is multilayer which ensure regulated decision making process. The internal structure of collecting information on academic programs and other processes is not yet coordinated at institutional level. The management system of the University gives opportunity to the teaching staff and students to be enrolled in different Councils of University management however there is still a need to ensure the cooperation with external stakeholders.

To ensure education quality at YSMU the Department for Reforms and Integration functioned during 2006-2011. The aim of the Department was to study the practices of European and American medical schools and to make suggestions on making changes in education process, derived from the requirements of Bologna system. In 2012 the Centre for Quality evaluation and assurance as well as Steering committee and respective faculty committees were established. Policy and strategy of the Centre as well as corresponding regulations and procedures have been developed which are aimed at quality evaluation of activities carried out by different units of the University.

The University is advised within the framework of its strategic plan to follow the below mentioned recommendations which are aimed at solving the problems revealed by the expert panel during the accreditation procedure and further improvement of the activities of the University.

### ***Mission and Goals***

1. To ensure compliance among the University's stated ambitions, policy and performance taking into account the current strategy which is directed towards the integration into the European Higher Education Area;
2. To pay attention to the establishment of effective cooperation with external organizations with the aim to ensure compliance between the learning outcomes of the academic programs and the labour market demands;
3. To develop mechanisms for efficient involvement of stakeholders in the education processes;
4. To expand opportunities for external stakeholders' involvement and impact;
5. To define a more structural approach to the evaluation of the University's mission and goals, to identify indicators and to appoint staff members responsible for the evaluation and follow-up.

### ***Governance and Administration***

6. To enhance the efficiency of the management system through set mechanisms;

7. To elaborate or improve the mechanisms for short-term and mid-term planning and monitoring in accordance with the University's mission and goals;
8. To develop indicators which permit the "diagnosis" and follow up of the factors that impact all the spheres of the University's performance, actively involving external stakeholders and taking into account their feedback in decision-making processes;
9. To apply the principle of quality management in the development of mechanisms for policy and procedure management;
10. To improve the mechanisms for assessing data collection on the effectiveness of the University's academic programmes and other processes, their analyses and application, using integrated digital system.

### ***Academic programs***

11. To consider a multidisciplinary thematic approach for the programs;
12. To implement a clearly defined policy on the selection of teaching and learning methods promoting student-centred learning taking into account the importance of students' interactive participation and learning in small groups;
13. To improve the policy on the assessment of program effectiveness;
14. To strengthen the link between education and research.

### ***Students***

15. To establish a career centre which will strengthen the link between the labour market and the programmes, and will help the students to find their way after graduating;
16. To develop the mechanisms and tools for quality assurance, so as to evaluate and improve the efficiency of student consultancy and support services;
17. To focus more on research and research activities in all programs;
18. To drastically increase efforts in internationalisation for students.

### ***Teaching and Support Staffs***

19. To ensure active participation of the teaching staff in research activities;
20. To develop a clearly defined policy and procedures for the professional development of the teaching staff, and to identify the specific needs for further improvement;
21. To organize professional training for young teachers;
22. To engage teachers from abroad;
23. To give the teaching staff an opportunity to implement trainings outside YSMU.

### ***Research and Development***

24. To redevelop the policy that reflects the University's interests and ambitions in research; teachers and students should be actively involved in research and leaders in research programs need to adhere to international standards;
25. To focus on specific research areas in accordance with the University's strategy;
26. To give research a more central role and structure in the organisation and the academic programs;
27. To ensure more active contribution of the teaching staff in terms of internationalization of scientific activity and to evaluate the effectiveness of those activities;
28. To clarify more the mechanisms for linking research and educational process by evaluating their efficiency;
29. To promote international cooperation and actively establish scientific relations with leading foreign medical centres and universities;
30. To reconsider the budget allocated for research and deploy strategies to attract external financial resources for research programs.

#### ***Infrastructure and Resources***

31. To increase the financial resources for acquiring necessary resources and equipment;
32. To consider investing in IT-facilities;
33. To take the evaluation of the needs of subdivisions as a basis for the allocation of financial resources;
34. To develop procedures, tools and schedule for the assessment of efficiency, applicability and availability of educational resources;
35. To implement an integrated IT-system and clarify the policy on information and documentation process management.
36. To improve the facilities for students with special needs.

#### ***Social responsibility***

37. To develop more diverse tools to ensure the accountability of YSMU's processes and procedures;
38. To develop formal procedures of getting feedback as well as mechanisms to evaluate the efficiency of these procedures.

#### ***External relations and internationalization***

39. To set up a clear policy and regulations fostering a structured international relations;
40. To put more emphasis on international benchmarking;
41. To localise and make use of international best practices for research and education;
42. To develop standards and mechanisms to assess the performance effectiveness in regard with foreign relations and internationalization;

43. To enlarge the opportunities for foreign language teaching.

***Internal quality assurance system***

44. To ensure that formal quality assurance procedures are put into practice;

45. To continue to invest in the actual involvement of especially the teaching staff so as to further develop the quality culture;

46. To enlarge the human, material and financial resources aimed at raising the efficiency of management of internal quality assurance processes, involving more stakeholders;

47. To regularly carry out self-evaluation processes and to ensure the existence and applicability of feedback mechanisms;

48. To strengthen the link between management and quality assurance processes.

Having examined the presented package of documents, having heard the opinions of the head of the expert panel and the representatives of the University, the Committee finds that Yerevan State Medical University after M. Heratsi adequately accomplishes the primary goals set before the institution. The provided academic programs, teaching staff, educational resources and QA system form a sufficient learning environment to ensure the provision of professional education in line with National Qualifications Framework.

The shortcomings revealed in the fields of “Research and Development and “External Relations and Internationalization” do not put in a danger the preparation of necessary specialists with the specialty of doctor in this transitional stage. However the elimination of those shortcomings will ensure both the student-centered and research nature of the provided education services and will their compliance with international standards.

Accepting all the recommendations mentioned in all 10 criteria, the fulfillment of which is a matter of time, the University has developed an Action Plan for the elimination of the shortcomings mentioned in the expert panel report. The Action plan is aimed at the further development of the University activities. At the same time there is a need to clarify the Action plan in terms of deadlines, performance indicators and responsables.

Taking into consideration that methodically using its internal QA mechanisms the University will manage to eliminate the shortcomings mentioned in the expert panel report as well as implement the recommendations, as a result of voting the Committee

**DECIDED**

1. To award Yerevan State Medical University after M. Heratsi an **Institutional Accreditation with a 4 /four/ year period.**
2. Within two months after the publication of the Decree on Awarding Institutional Accreditation to submit a reviewed action plan and corresponding time-schedule to ANQA taking into account:
  - a. the necessity of finding solutions primarily to the problems existing in the fields of “Research and Development” and “External Relations and Internationalization”;
  - b. the results and recommendations of the peer-review according to international standards.
3. In order to improve the activities of the University in line with current demands it is necessary to pay special attention to the improvement of quality assurance system, the upgrading of academic programs and necessary material-technical base, the mobility of teaching staff and students, strengthening of the link between teaching and research as well as to the trainings of the teaching staff.
4. According to the requirements of clause 12 of the Regulation on “State Accreditation of RA Institutions and their Educational Programs” every two year to submit a written report to ANQA on the results of the carried out activities.
5. Based on RA Government N1407 decree as of 27 November, 2014 give the Accreditation Certificate to “Yerevan State Medical University after M. Heratsi” foundation which is a legal successor of Yerevan State Medical University after M. Heratsi state non-profit organization.

**Chairman of the Accreditation Committee**

**V. Urutyanyan**

February 27, 2015  
Yerevan