NATIONAL CENTER FOR EDUCATIONAL QUALITY ENHANCEMENT

Accreditation Expert Group Report on Higher Education

Individual Programme

(International Accreditation of Educational Programmes of Higher Education Institutions Operating Abroad)

For educational programmes implemented within the first and second levels of higher education

General Medicine
(Armenian)

One-Cycle Educational Programm

Yerevan State Medical University after Mkhitar Heratsi
[Armenia]

Evaluation Date(s)
5–6 March 2026
Report Submission Date
08 May 2026

Table of Contents

Information about a Higher Education Institution (HEI) [1]

Name of the HEI in Georgia	მხითარ ჰერაცის სახელობის ერევნის სახელმწიფო სამედიცინო უნივერსიტეტი
Name of the HEI in English and Official Language	Yerevan State Medical University after Mkhitar Heratsi Մխիթար Հերացու անվան Երեվանի Պետական Բժշկական Համալսարան
Organizational-Legal Form	Foundation

Expert Panel Members

Chair (Name, Surname, HEI/Organisation, Country)	Irine Pkhakadze, Akaki Tsereteli State University, Georgia
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[1] In the case of joint education programme: Please indicate the HEIs that carry out the programme.

I. Information on the education programme

Name of the educational programme In Georgia	„ზოგადი მედიცინის ერთსაფეხურიანი საგანმანათლებლო პროგრამა
Name of Higher Education Programme (in English)	General Medicine (One-Cycle Educational Program)
Level of higher education (Bachelor's, Master's, One-cycle Veterinary, One-cycle medical, One-cycle dentistry, Other)	7th level
Qualification to be Awarded[2]	MD Physician, Republic of Armenia; Medical Doctor, Georgia
Name and code of the field according to the National Qualifications Framework (NQF) of the target Country	ref. code: 91201.00.7 (Armenian classification) 0912 – Medicine (NQF) (ISCED)
Language of Instruction	Armenian
Number of ECTS credits	360 ECTS
Programme Status (Accredited / Non-accredited/ Conditionally accredited/International accreditation) Indicating Relevant Decision (number, date)	Accredited Decision No. MES024 0000160336, dated 14.02.2024. (The program was granted international accreditation for a period of 7 years, with a provision stipulating the need for ongoing monitoring to be conducted within 2 years).

[2] In case of implementing a joint higher education programme with a higher education institution recognized in accordance with the legislation of a foreign country, if the title of the qualification to be awarded differs, it shall be indicated separately for each institution.

II. Accreditation Report Executive Summary

- **General Information on Education Programme**

The "General Medicine" Armenian One-Cycle Educational Program at Yerevan State Medical University after M. Heratsi (YSMU) is based on integrated curriculum that complies with the standards of the World Federation for Medical Education (WFME) and the sectoral benchmarks for higher medical education. In designing the programme, the university considered international and regional best practices, available resources, and labour market requirements.
The MD programme corresponds to Level 7 of both the Armenian National Qualifications Framework and the European Qualifications Framework.
Program was accredited based on the Decision of the Higher Education Program Accreditation Board of Georgia No. MES024 0000160336, dated 14 February 2024. The program was granted international accreditation for a period of 7 years, with a provision requiring ongoing monitoring to be conducted within 2 years.

- **Overview of the Accreditation Site Visit**

The evaluation was conducted on 5–6 March 2026 through a remote site visit using modern communication technologies at Yerevan State Medical University after Mkhitar Heratsi, the visit was carried out in accordance with the rules and conditions for conducting an authorization and accreditation visit in a remote or semi-remote manner at a higher education institution approved by the Center. The purpose of the evaluation was to verify the compliance of the one-cycle educational programs in "General Medicine" (taught in Armenian) with the accreditation standards, based on the materials submitted to the Center by Letter No. 01/64 dated 29 January 2026 (Center registration No. 88485). The Report on the Implementation of Recommendations and associated documents were sent to the expert panel before site visit/in advance. The visit was coordinated by the National Center for Educational Quality Enhancement. A representative of the ANQA • National Centre for Professional Education Quality Assurance Foundation was also present as an observer.

The evaluation visit was conducted in accordance with a pre-agreed agenda. During the visit, the expert panel held meetings with the following groups, according to the agenda: University leadership (Rector / Vice-Rectors), Program leadership and academic staff, Students of the "General Medicine" program, Graduates of the program, Employers and external stakeholders, Representatives of clinical bases / partner hospitals, Quality assurance service representatives, administrative staff responsible for program implementation.
The evaluation process was conducted in a constructive and academic environment, with open and productive discussions between the expert panel and the university representatives.

- **<u>Recommendations</u>**

  - To further strengthen the evaluation mechanism of programme learning outcomes, the institution is encouraged to continue monitoring the balance between theoretical knowledge and practical competencies, ensure consistent application of standardized assessment criteria across all clinical modules, and further develop a structured faculty development system to support the effective implementation of modern clinical assessment methods, including Mini-CEX and DOPS.

- While the program aims to provide opportunities for both practical and scientific skill development, this has not yet been fully achieved and requires clearer structuring and standardization of the research component in the future.
- It is recommended to design and implement targeted training sessions focused on teaching methodology, with the explicit goal of ensuring that all instructors and educators engaged in the teaching-learning process have a clear understanding of the specific competencies students are expected to achieve.
- It is recommended to develop standardized criteria and assessment indicators that clearly define levels of professionalism, ethical behavior, and empathy.
- Implement regular feedback to students based on the new criteria to ensure monitoring of professional development.
- It is recommended to ensure the consistent application of assessment criteria and rubrics across modules and examiners—particularly in practical and clinical components—and to improve the quality, timeliness, and specificity of feedback provided to students, clearly linking it to learning outcomes and individual areas for improvement.

- **Suggestions**

  - To sustain this progress, the institution is encouraged to regularly review the visibility and consistency of program objectives across all public documents and platforms.
  - The programme could further strengthen the explicit mapping between learning outcomes, courses, and assessment methods to demonstrate how each outcome is systematically assessed across the curriculum.
  - Periodic review of programme learning outcomes with the active involvement of key stakeholders (students, healthcare institutions, employers, and alumni) could further enhance their relevance and alignment with evolving healthcare needs.
  - It is suggested to further enhance the explicit mapping of clinical and research competencies across the curriculum, ensuring their clear visibility and systematic alignment with courses and assessment methods.
  - It is suggested to further develop explicit mapping between programme learning outcomes, courses, and assessment methods, as well as to ensure systematic involvement of stakeholders in the review and alignment of learning outcomes with evolving healthcare system needs.
  - The institution is suggested to further demonstrate the effectiveness of programme-level monitoring mechanisms linking preclinical and clinical phases, including the use of measurable indicators and documented outcomes related to student progression and preparedness.
  - To further strengthen the coherence between courses and programme learning outcomes, it is suggested to continue regularly reviewing course syllabi, learning materials, and credit allocation, ensuring consistent alignment with programme objectives.
  - Expand formative feedback mechanisms (e.g., structured debriefings following simulation sessions, Mini-CEX, or OSCE practice) to better support student learning.
  - Regularly analyse and communicate how assessment results are used to improve teaching and evaluation methods, ensuring that students are aware of the impact of their feedback.
  - The institution may wish to consider formalising the feedback loop between the checking and planning phases of the PDCA cycle at programme-governance level, so that monitoring findings formally trigger revision of the action plan rather than informing only individual corrective actions.
  - Greater visibility of how course coordinators and clinical supervisors engage with quality data at the operational teaching level — beyond attendance at governance meetings — would further demonstrate the depth of quality culture across the institution.

- As digital infrastructure matures, a consolidated e-learning quality assurance framework would bring coherence to what are currently well-functioning but separately governed digital quality processes.

- **Brief Overview of the Best Practices (if applicable)[3]**

- **Information on Sharing or Not Sharing the Argumentative Position of the HEI**

The institution shared an argumentative position regarding the expert evaluation, in which it emphasized that during the monitoring period the university had an established program and faculty development plan; the modernization of assessment systems had already been initiated before the accreditation process and was not merely a response to accreditation recommendations; competency-based and multi-component assessment systems have been further developed; clinical skills assessment has been formalized as a distinct assessment component. The expert panel reviewed the submitted arguments, worked on the respective document, and discussed the issues raised. At the same time, the panel particularly emphasizes that the expert evaluation is based on the requirements of the accreditation standards and assesses not only documented changes, but also the quality of their implementation and the consistency of the processes in practice, which was significantly evidenced during the interview process. Accordingly, the expert panel decided to maintain the evaluations unchanged in the final conclusion report.

- **Quantitative Data Analysis of the educational programme in accordance with the requirements of the accreditation standards, for** example:

  - **Staff and Supervisors** - Number of the staff involved in the programme (including academic, scientific, international and invited staff), including the staff holding PhD degree in the sectoral direction; ratio of the academic/scientific staff and invited staff; ratio of the affiliated and academic staff; ratio of Master's students to supervisors; supervisors' workload scheme;

  - **Scientific/Research Indicators** - Scientific/research index of the individuals, involved in the programme (for the last 5 years): quantitative data papers published in peer-reviewed journals with an international index; Staff participation rates in local and international conferences; other scientific/research indicators;

  - **Academic Staff Turnover Rate** (for the last 5 years) (e.g. the number of retired staff, the number of staff who left the institution and the number of new staff, etc.);

  - **Data on the Individuals Enrolled** (for the last 5 years; in case of active programmes); number of student places announced for the programme; student progression by academic years;

- **Analysis of other quantitative data** provided in the self-assessment and annexes.

The programme has adequate human, academic, and organizational resources to ensure the achievement of programme learning outcomes. The programme involves a sufficient number of academic, scientific, and invited staff with relevant qualifications, including a significant proportion holding PhD degrees in the field. The ratio between affiliated academic staff and invited staff appears balanced, ensuring institutional stability. The distribution of staff workload follows institutional regulations, supporting effective teaching and supervision. The academic staff demonstrate active engagement in scientific and research activities. Staff members have published research articles in peer-reviewed journals and have participated in national and international conferences. Information provided during the interviews indicates that staff turnover over recent years remains relatively stable, contributing to the continuity and sustainability of the academic workforce. The programme also demonstrates appropriate capacity and effectiveness, as reflected in stable student progression and alignment between student intake and available resources.

▪ **In case of re-accreditation, a brief overview of significant achievements and/or progress (if applicable) during the accreditation period, as well as a review of the fulfillment of the recommendations received during the previous evaluation process.**

The purpose of visit was to assess the institution's progress in implementing the recommendations provided during the previous accreditation process. Ten recommendations were issued for the Armenian-language programme by the Accreditation Council.

1. Make the programme objectives publicly accessible, possibly through the institution's website or other platforms, to bolster transparency and stakeholder engagement - **recommendation is implemented.**
2. In clinical settings the assessment criteria of practical skills should better be controlled and described as the portion of the assessment of the skills (in clinical courses, in general) is low. **recommendation is Substantially implemented**
3. Monitoring linkage must be assured between separate phases of the program (for example, between the preclinical and clinical parts) to promote an uninterrupted teaching and learning process, and to ensure harmony between plans and reality- **recommendation is implemented**
4. The modular structure of the programme should be reviewed and modified, integration levels (horizontal, vertical and spiral components) should be developed based on a comprehensive, agreed educational strategy. **recommendation is implemented.**
5. The structure of the modules (linking of subjects, connection between themes and topics, the prerequisites) should be reviewed. **recommendation is implemented.**
6. The University should develop an Action Plan detailing the activities, responsibilities, timelines, and the nature of expected changes. **recommendation is implemented.**
7. The curriculum map and the links between the horizontal, vertical, and spiral elements of the curriculum should be reviewed and developed. **recommendation is implemented.**
8. A balanced distribution of mandatory and elective courses during each academic year/semester is recommended. It is also recommended to offer more than 20 elective courses as stated in YSMU MD Educational Programme. **recommendation is implemented.**
9. Review the programme by clearly defining and listing the skills/research competencies in the curriculum - **recommendation is implemented.**
10. Devise and implement more detailed criteria and rubrics for scoring. **recommendation is Substantially implemented.**

Summary Table of Compliance of the programmes with the standards

	Standard	Evaluation
1.	**1.1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme**	**Complies**
1.1	Programme Objectives	**Complies**
1.2	Programme Learning Outcomes	**Complies**
1.3	Evaluation Mechanism of the Programme Learning Outcomes	**Substantially**
1.4	Structure and Content of Educational Programme	**Complies**
1.5	Academic Course/Subject	**Complies**
2.	**Methodology and Organization of Teaching, Adequacy of Evaluation of Programme Mastering**	**Substantially**
2.1	Programme Admission Preconditions	**Select Appropriate**
2.2	The Development of Practical, Scientific/Research/ Creative/ Performance and Transferable Skills	**Substantially**
2.3	Teaching and Learning Methods	**Substantially**
2.4	Student Evaluation	**Substantially**
3.	**Student Achievements and Individual Work with Them**	**Select Appropriate**
3.1	Student Consulting and Support Services	**Select Appropriate**
3.2	Master's Student Supervision	**Select Appropriate**
4	**Providing Teaching Resources**	**Select Appropriate**
4.1	Human Resources	**Select Appropriate**
4.2	Qualification of Supervisors of Master's Student	**Select Appropriate**
4.3	Professional Development of Academic, Scientific and Invited Staff	**Select Appropriate**
4.4	Material Resources	**Select Appropriate**
4.5	Programme/Faculty/School Budget and Programme Financial Sustainability	**Select Appropriate**
5	**5. Teaching Quality Enhancement Opportunities**	**Complies**
5.1	Internal Quality Evaluation	**Complies**
5.2	External Quality Evaluation	**Complies**
5.3	Programme Monitoring and Periodic Review	**Complies**

Guidelines and Standards (See link)

Accreditation Standards for Higher Education Programmes

Guideline for Assessment of Accreditation Standards of Higher Education Programmes

Assessment criteria

Definitions:

Recommendations - should be considered by the HEI in order to comply the programme with the requirements of the standard

Suggestions - non-binding suggestions for the programme development

Best Practices

A practice that is exceptionally effective and that can serve as a benchmark or example for other educational programme/programmes.

IV. Compliance of the Programme with Accreditation Standards

1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme

A programme has clearly established objectives and learning outcomes, which are logically connected to each other. Programme objectives are consistent with the mission, objectives and strategic plan of the HEI. Programme learning outcomes are assessed on a regular basis to improve the programme. The content and consistent structure of the programme ensure the achievement of the set goals and expected learning outcomes.

1.1 Programme Objectives

Programme objectives consider the specificity of the field of study, level and educational programme, and define the set of knowledge, skills and competences a programme aims to develop in graduate students. They also illustrate the contribution of the programme to the development of the field and society.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

The educational programme has been developed taking into account labour market needs, healthcare system demands, and international trends in medical education, ensuring its relevance in both local and global contexts. The program objectives are consistent and complementary to the institution's mission, objectives, and strategic plan. They are representative of meaningful objectives for the education of a physician.

Furthermore, the program has articulated a detailed list of learning outcomes/competencies that link to the objectives, also highly relevant to the education of a physician. The program curriculum its teaching and learning strategies, and its assessment methods are designed to ensure that its learners can meet all learning outcomes.

The programme clearly states its overall purpose "to prepare internationally knowledgeable and competent medical graduates for general medicine – generalists -, who can easily continue his/her postgraduate training in clinical practice, biomedical research, and public health with high responsiveness to society, based on the strong traditions in medical education.

The stated objectives are realistic and achievable, as they focus on developing the essential knowledge, clinical competencies, and professional attitudes required for general medical practice. Furthermore, the program highlights responsiveness to societal needs, which demonstrates its relevance to healthcare system demands and the broader community. The objectives of the MD educational program are aligned with the mission of the institution and reflect its commitment to preparing competent and socially responsible medical professionals. The program's vision emphasizes the training of knowledgeable and skilled general medical practitioners who are capable of continuing postgraduate education in clinical medicine, biomedical research, and public health.

The programme objectives and learning outcomes collectively reflect key domains of medical education, including knowledge, clinical skills, professional attitudes, ethical practice, and communication competencies. Particular emphasis is placed on the integration of biomedical, clinical, and behavioral sciences, as well as public health and research components. Furthermore, the curriculum is designed to ensure progressive clinical exposure, including patient interaction, clinical reasoning, and practical skills development across different healthcare settings, supporting the development of patient-centered care and professional competencies.

In response to the recommendation to improve transparency, the institution enhanced the visibility of the MD program objectives and related information. The university updated its official website to provide comprehensive information about the program, including its vision, structure, learning outcomes, teaching and assessment approaches, and available infrastructure. In addition, an institutional digital platform ("Electronic University") was introduced to facilitate access to program information for students, academic staff, and administrators, thereby improving communication and stakeholder engagement.

Evidences/Indicators

- The Report of Academic Council of the Yerevan State Medical University after Mkhitar Heratsi on the Implementation of Recommendations of the Higher Education Program Accreditation Board of Georgia
- Program description document.
- Mission from website.
- Interviews with leadership, faculty students, staff, graduates.

Recommendations:

- Proposal(s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- To sustain this progress, the institution is encouraged to regularly review the visibility and consistency of program objectives across all public documents and platforms.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
1.1 Programme Objectives	Complies

1.2 Programme Learning Outcomes

➢The learning outcomes of the programme are logically related to the programme objectives and the specifics of the study field.

➢ Programme learning outcomes describe knowledge, skills, and/or the responsibility and autonomy that students gain upon completion of the programme.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

The programme “General Medicine” learning outcomes are designed in accordance with the qualification requirements of the Medical Doctor degree and correspond to Level 7 of both the Armenian National Qualifications Framework and the European Qualifications Framework.
The set of Programme Learning Outcomes (PLOs) describes the knowledge, skills, professional competencies, and levels of responsibility and autonomy that students are expected to achieve upon completion of the programme.

The programme includes twelve learning outcomes (LO1–LO12) that cover major domains of medical education such as:

LO 1. Demonstrate theoretical and practical in-depth knowledge and critical understanding in the field of medicine.
LO 2. Participate in management of health care institutions.
LO 3. Perform data collection, documentation and analysis of the patient’s health condition.
LO 4. Apply algorithm to conduct modern clinical and paraclinical examinations, treatment and preventive measures.
LO 5. Carry out diagnosis and urgent medical aid in pre-hospital and hospital stages, and prediction of possible outcomes of the pathological condition.
LO 6. Make patient’s preliminary diagnosis and refer
LO 7. Perform collection and analysis of information on community health; health programme design, implementation and evaluation; as well as prediction of possible developments.
LO 8. Carry out patients, family members and community education and teaching in professional educational institutions.
LO 9. Provide profession related counselling and expertise to state and non-state institutions.
LO 10. Analyze and apply didactic, scientific, normative documents, informative and other literature sources -including in a foreign language for professional self-directed-learning and creation of new knowledge.
LO 11. Conduct scientific research work on biomedical and health care issues.
LO 12. Demonstrate effective communication, teamwork, decision-making skills in standard and non-standard situations, and ability to take responsibility for teammates consistent with ethical and proper behavior norms.
These learning outcomes cover key competency areas required for medical education, including theoretical and practical medical knowledge, clinical and diagnostic competencies, patient management and emergency care, public health and community health management, research skills and evidence-based practice, as well as communication, teamwork, ethical behaviour, and professional responsibility.

Overall, the defined learning outcomes logically support the programme objectives and define the competencies of graduates as general medical practitioners capable of continuing postgraduate clinical training and contributing to healthcare systems and biomedical research. The curriculum structure and assessment methods are designed to support the achievement of these outcomes.

The programme learning outcomes include a range of clinical, research, and professional competencies, which are reflected in the curriculum structure and demonstrated by the curriculum map. The institution has undertaken steps to clearly define and document clinical skills and research competencies within the curriculum. These competencies are reflected in module syllabi, clinical skills checklists, and logbooks. In addition, research training has been strengthened through dedicated courses and the integration of research-related activities across several modules. However, further clarification and more explicit mapping of specific skills and research competencies across the curriculum could enhance their visibility and systematic alignment.

The programme learning outcomes are aligned with international standards ensuring their relevance to contemporary medical education requirements. The development and periodic review of learning outcomes involve academic staff and are informed by feedback from stakeholders, including students and healthcare sector representatives. The achievement of learning outcomes is supported through a structured assessment system, including written examinations, clinical skills assessments, OSCE, Mini-CEX, and DOPS, which provide measurable evidence of student performance and competency development.
The learning outcomes collectively cover the key domains of medical education—knowledge, clinical skills, and professional attitudes—while also reflecting essential competencies such as patient consultation, clinical reasoning, communication, ethical practice, and emergency care. In addition, aspects of public health, prevention, epidemiology, and health systems are incorporated within the programme through relevant learning outcomes and curriculum components.
Furthermore, the programme prepares graduates with an appropriate level of responsibility and autonomy, enabling them to work under supervision and continue postgraduate clinical training.

Evidences/Indicators

- The Report of Academic Council of the Yerevan State Medical University after Mkhitar Heratsi on the Implementation of Recommendations of the Higher Education Program Accreditation Board of Georgia
- Program description document.
- University website.
- Interviews with leadership, faculty students, staff, graduates.

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- The programme could further strengthen the explicit mapping between learning outcomes, courses, and assessment methods to demonstrate how each outcome is systematically assessed across the curriculum.
- Periodic review of programme learning outcomes with the active involvement of key stakeholders (students, healthcare institutions, employers, and alumni) could further enhance their relevance and alignment with evolving healthcare needs.
- It is suggested to further enhance the explicit mapping of clinical and research competencies across the curriculum, ensuring their clear visibility and systematic alignment with courses and assessment methods.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation

1.2 Programme Learning Outcomes	Complies

1.3 Evaluation Mechanism of the Programme Learning Outcomes

- Evaluation mechanisms of the programme learning outcomes are defined; the programme learning outcomes evaluation cycle consists of defining, collecting and analyzing data necessary to measure learning outcomes;
- Programme learning outcomes assessment results are utilized for the improvement of the programme.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Based on the reviewed documentation and information obtained during the interviews, the institution has established a structured policy and procedure for the assessment and monitoring of Programme Learning Outcomes (PLOs). The policy defines a systematic and transparent evaluation cycle, including the definition of learning outcomes, data collection, analysis, and use of results for continuous improvement.

While the evaluation mechanisms are clearly defined, further development of explicit performance benchmarks and target indicators for each programme learning outcome would strengthen the measurement of achievement and enhance the transparency of the evaluation process.

The policy includes clearly defined responsibilities of institutional units and integrates both direct and indirect assessment methods. Regular data collection and analysis are conducted, and the results are documented in periodic monitoring reports. These processes support evidence-based decision-making and contribute to the ongoing development of the programme.

The evaluation of learning outcomes is implemented through diverse assessment methods, including written examinations, clinical skills assessments, structured practical evaluations, and feedback mechanisms.

Furthermore, a monitoring and analysis mechanism has been established, with implementation regularly reviewed by the programme director and quality assurance representatives, and progress reported to the University Academic Council.

The institution has introduced several mechanisms to support continuity between preclinical and clinical phases, including curriculum revisions, integrated assessment analysis, and curriculum mapping. However, further formalization of these mechanisms—particularly in tracking the progression of competencies across phases and ensuring consistent vertical alignment—would enhance the coherence and effectiveness of programme monitoring.

The institution has taken substantial steps to address the recommendation related to the control and description of assessment criteria for practical skills in clinical settings. A revised multi-component assessment system has been introduced, with increased weighting of practical skills in several modules and the implementation of standardized assessment tools such as checklists and rubrics. In clinical disciplines, practical competencies are assessed using standardized tools such as OSCE, Mini-CEX, DOPS, and structured checklists, ensuring consistency, objectivity, and transparency of the assessment process.

The report also demonstrates that assessment criteria for practical skills are now more clearly described and increasingly standardized across modules, with ongoing efforts to ensure their consistent application.

However, it should be noted that the implementation of these changes is still ongoing and being introduced gradually across the programme, with full alignment expected in the coming years.

In addition, modern clinical assessment methods have been progressively introduced; however, *interviews revealed the need for further faculty development, as in some cases the purpose and proper application of tools such as Mini-CEX and DOPS are not fully understood.* This may affect the consistent and effective implementation of assessment practices. Although faculty development activities have been initiated, further strengthening of a structured and continuous capacity-building system is recommended to ensure consistent and effective implementation of modern assessment methods across all modules.

Assessment results are systematically reviewed by academic and quality assurance bodies and are used to inform curriculum revisions, refinement of module structures, and improvement of teaching and assessment approaches. Interviews conducted during the site visit confirmed that these mechanisms are actively implemented and contribute to continuous programme improvement.

Furthermore, the evaluation process incorporates feedback from key stakeholders, including students and academic staff, which supports the identification of areas for improvement and enhances the relevance of the programme to current educational and healthcare needs. However, broader involvement of external stakeholders, including employers and healthcare sector representatives, would further strengthen the comprehensiveness and relevance of the evaluation process.

Overall, the programme demonstrates a well-defined and operational evaluation mechanism for programme learning outcomes. The assessment results are effectively utilized for programme improvement, ensuring alignment between learning outcomes, teaching, and assessment practices.

To sustain and further enhance these improvements, the institution is encouraged to continue monitoring the balance between theoretical knowledge and practical competencies, to ensure consistent application of assessment criteria across all clinical modules, and to strengthen faculty development activities to support a clear understanding and effective use of modern clinical assessment methods, including Mini-CEX and DOPS.

Evidences/Indicators

- Educational Program
- Procedure for Monitoring Programme Learning Outcomes (PLOs)
- Program Evaluation & Quality Enhancement Report 2023-2025
- Evaluation of the Modular Education System, Academic Year 2024–2025
- Report on the Evaluation of the Digital Education Management System
- Interview results

Recommendations:

To further strengthen the evaluation mechanism of programme learning outcomes, the institution is encouraged to continue monitoring the balance between theoretical knowledge and practical competencies, ensure consistent application of standardized assessment criteria across all clinical modules, and further develop a structured faculty development system to support the effective implementation of modern clinical assessment methods, including Mini-CEX and DOPS.

Suggestions for the Programme Development

- It is suggested to further develop explicit mapping between programme learning outcomes, courses, and assessment methods, as well as to ensure systematic involvement of stakeholders in the review and alignment of learning outcomes with evolving healthcare system needs.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
1.3 Evaluation Mechanism of the Programme Learning Outcomes	Substantially

1.4. Structure and Content of Education Programme

- The Programme is designed according to HEI's methodology for planning, designing and developing of education programmes.
- The Programme structure is consistent and logical. The content and structure of the programme ensure the achievement of programme learning outcomes. The qualification to be granted is consistent with the content and learning outcomes of the programme.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

The "General Medicine" (MD) programme has been designed and developed in accordance with the institutional methodology for planning and development of educational programmes. The programme development process is guided by international medical education standards (including WFME), sectoral qualification requirements, and takes into account labour market needs and contemporary trends in medical education.

The programme structure is coherent and logically organized into interconnected educational pillars, including general education, structural medicine, functional medicine, preclinical medicine, and clinical medicine. This structure ensures a gradual progression from foundational biomedical knowledge to clinical practice and supports horizontal, vertical, and spiral integration throughout the programme.

The programme structure supports the gradual development of clinical responsibility, enabling students to progressively acquire competencies required for functioning as junior medical practitioners under supervision. Clinical training is distributed across different years of study through clerkships, simulation-based learning, and bedside teaching, ensuring increasing intensity and exposure to real clinical environments. Furthermore, the curriculum includes components related to public health, epidemiology, disease prevention, and health systems, which are integrated within relevant modules and support the development of population-based and preventive care competencies.

Teaching and learning activities are implemented through modular courses and clerkships using diverse methods such as interactive lectures, case-based learning, problem-based learning, simulation-based training, and workplace-based assessment tools. These approaches support the achievement of programme learning outcomes and the development of clinical, research, and professional competencies. The qualification awarded upon completion of the programme – Medical Doctor (MD Physician) – is consistent with the programme content, structure, and intended learning outcomes, which prepare graduates for clinical practice, biomedical research, and further postgraduate medical training.

Teaching and learning activities are implemented through modular courses and clerkships using diverse methods such as interactive lectures, case-based learning, problem-based learning, simulation-based training, and workplace-based assessment tools. These approaches support the achievement of programme learning outcomes and the development of clinical, research, and professional competencies. The qualification awarded upon completion of the programme – Medical Doctor (MD Physician) – is consistent with the programme content, structure, and intended learning outcomes, which prepare graduates for clinical practice, biomedical research, and further postgraduate medical training.

In response to accreditation recommendations, the institution developed and implemented a comprehensive Action Plan outlining specific activities, responsibilities, timelines, and expected outcomes. Shortly after the accreditation decision, the Action Plan-Timeline was formally approved and has since guided the systematic implementation of programme improvements.

The Action Plan includes clearly defined activities, responsible persons, implementation timelines, and performance indicators for each recommendation, demonstrating a structured and systematic approach to programme development and quality assurance.

In October 2025, a comprehensive report on the implementation of the Action Plan was presented and positively evaluated by the Academic Council, indicating that the majority of planned activities have been successfully completed. At the same time, certain actions (e.g., related to mobility indicators) remain ongoing, with additional measures planned for further improvement.

As a result, the reviewed documentation indicates that the institution has implemented several structural and curricular changes in response to accreditation recommendations. These include the gradual transition to a modular learning system, strengthening of horizontal, vertical, and spiral integration, revision and reorganization of modules, clarification of prerequisites, and enhancement of interdisciplinary coordination.

The institution has undertaken a comprehensive review of the modular structure of the programme, focusing on improving module organization and strengthening horizontal, vertical, and spiral integration. Modules have been revised, reorganized, and aligned with programme learning outcomes, contributing to improved coherence and logical progression of the curriculum.

However, the transition to the revised modular system is still ongoing, and the full impact of these changes has not yet been fully demonstrated. Therefore, this recommendation is considered to be largely addressed, although the full impact of the implemented changes is yet to be demonstrated.

The number of elective courses has been significantly increased, reaching 25 by the 2025–2026 academic year, exceeding the recommended minimum. Elective courses are distributed across different years of study, contributing to a more balanced curriculum structure. The curriculum map further confirms the integration of elective components within multiple semesters, therefore, this recommendation is considered fully implemented.

Practical and clinical training components have also been strengthened through increased emphasis on clinical skills development, simulation-based learning, and structured assessment methods such as OSCE, Mini-CEX, and DOPS.

The curriculum map clearly demonstrates the alignment between programme learning outcomes, modules, courses, and assessment methods, and illustrates the progressive achievement of intended learning outcomes throughout the six-year programme. It supports horizontal, vertical, and spiral integration by showing how key competencies are revisited with increasing complexity at different stages of study. As such, it functions as an effective tool for monitoring and continuous improvement of the programme.

The institution has introduced several mechanisms to strengthen the linkage between preclinical and clinical phases, including curriculum mapping, regular surveys, integrated assessment analysis, and the establishment of a dedicated monitoring group. These measures support continuity and alignment across different stages of the programme. However, the full effectiveness of these mechanisms has not yet been demonstrated, as the first cohort following the revised modular curriculum has not completed the preclinical phase.

It is advisable for the institution to establish clear evidence of the effectiveness of monitoring mechanisms linking preclinical and clinical phases, including measurable indicators and documented outcomes demonstrating improved continuity and student preparedness.
Overall, the programme demonstrates a coherent and well-structured curriculum aligned with programme learning outcomes and supported by ongoing improvements in modular organization, integration, and elective course distribution. While significant progress has been made in strengthening the modular structure, curriculum integration, and monitoring mechanisms, certain areas—such as demonstrating the effectiveness of programme-level monitoring—require further development.

Evidences/Indicators

- Educational Program
- Report document on "Medical Doctor" educational program improvement-related actions undertaken in response to recommendations of the Higher Education Program Accreditation Board of Georgia.
- Interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to m
- eet the requirements of the standard

Suggestions for the Programme Development

- It is advisable for the institution to further demonstrate the effectiveness of programme-level monitoring mechanisms linking preclinical and clinical phases, including the use of measurable indicators and documented outcomes related to student progression and preparedness.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
1.4 Structure and Content of Educational Programme	Complies

1.5. Academic Course/Subject

➢ The content of the academic course / subject and the number of credits ensure the achievement of the learning outcomes defined by this course / subject.
➢ The content and the learning outcomes of the academic course/subject of the main field of study ensure the achievement of the learning outcomes of the programme.
➢ The study materials indicated in the syllabus ensure the achievement of the learning outcomes of the programme.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

The review of the programme documentation indicates that the content, workload, and structure of academic courses are designed to ensure the achievement of course-level learning outcomes and their alignment with the programme learning outcomes. The MD programme is organized into modules and courses with clearly defined learning outcomes, teaching methods, and assessment approaches specified in the syllabi.

The allocation of ECTS credits reflects the workload required to achieve the learning outcomes of each course. Courses include a combination of theoretical instruction, practical training, laboratory work, and clinical activities, which together support the development of the knowledge, skills, and professional competencies expected from medical graduates. The course syllabi describe learning outcomes, teaching and learning methods, assessment strategies, and recommended study materials. Each syllabus identifies required and recommended study materials, including textbooks, clinical guidelines, and digital resources, which support the achievement of both course-level and programme-level learning outcomes and contribute to the development of the required competencies.

The programme uses diverse educational resources, including textbooks, scientific literature, clinical guidelines, digital learning platforms, and simulation-based training tools, supporting students in achieving both course-level and programme-level learning outcomes.

Based on the reviewed documentation, several improvements were implemented following the accreditation recommendations. The university revised a number of course syllabi, clarified prerequisites, and reorganized certain modules in order to strengthen the connection between subjects and improve thematic coherence.

In addition, new elective courses and updated course components were introduced, and some subjects were renamed or redistributed across different years of study to improve the logical progression of learning.

Several concrete changes were introduced at the course and module level to improve the alignment between course content, learning outcomes, and the overall programme structure. For example, the module structure in the early years of study was revised by merging or redistributing certain subjects, while some courses were renamed for better conceptual clarity (e.g., Physiology was renamed to Human Physiology, and Medical Parasitology to Basics of Parasitology). In addition, the course History of Armenian Civilization with History of Medicine in Armenia was separated into two independent subjects to ensure clearer thematic focus.

At the clinical stage of the programme, several modules were reorganized to better reflect clinical specialization and learning progression. For instance, a separate Urology and Andrology module was introduced, and a new Traumatology and Orthopedics module was established, while surgical disciplines were further specified into areas such as abdominal, thoracic, cardiac, and vascular surgery. These changes contributed to a clearer disciplinary structure and improved alignment with the clinical competencies expected from graduates.

In addition, the programme expanded elective offerings across different years of study, introducing courses such as Public Communication Skills in Medicine, Advanced Research Skills, Artificial Intelligence in Medicine, Medical Ecology, and Emotional Intelligence. These courses broaden students' competencies and support the development of interdisciplinary and professional skills alongside core medical training.

Furthermore, the transition to a modular learning system and the introduction of a multi-component assessment framework have strengthened the alignment between course content, learning outcomes,

and assessment methods. Practical and clinical components within courses are increasingly assessed using structured tools such as OSCE, Mini-CEX, DOPS, and standardized checklists.

Overall, the reviewed evidence demonstrates that the academic courses are structured in a way that supports the achievement of both course-level and programme-level learning outcomes, while the ongoing revisions of syllabi, modules, and assessment mechanisms reflect the institution's commitment to continuous improvement of the programme.

Evidences/Indicators

- Programme description, Course syllabi
- Curriculum map and curriculum documentation
- Interviews results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- To further strengthen the coherence between courses and programme learning outcomes, it is suggested to continue regularly reviewing course syllabi, learning materials, and credit allocation, ensuring consistent alignment with programme objectives.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
1.5. Academic Course/Subject	Complies

2. Methodology and Organisation of Teaching, Adecuacy of Evaluation of Programme Mastering

Prerequisites for admission to the programme, teaching-learning methods and student assessment consider the specificity of the study field, level requirements, student needs, and ensure the achievement of the objectives and expected learning outcomes of the programme.

2.1 Programme Admission Preconditions

The HEI has relevant, transparent, fair, public and accessible programme admission preconditions and procedures that ensure the engagement of individuals with relevant knowledge and skills in the programme to achieve learning outcomes.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
2.1 Programme Admission Preconditions	Select Appropriate

2.2. The Development of Practical, Scientific/Research/Creative/Performing and Transferable Skills

Programme ensures the development of students' practical, scientific/research/creative/performing and transferable skills and/or their involvement in research projects, in accordance with the programme learning outcomes.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

The university maintains a robust system of requirements and assessment, ensuring students' continuous professional development and regular feedback on the effectiveness of their learning process. The process is transparent and based on unified principles. Practical skills are taught in the university's simulation center, university clinics, and various affiliated hospitals.

In the initial semesters, technical skills are developed using simulators and mannequins in the skills center before students transition to clinical practice. The development of clinical skills, as well as ethical, communication, and professional attitudes, continues within the clinical medicine modules.

Dedicated spaces are allocated for simulation-based training, equipped with the necessary tools and materials. Students are given the opportunity to acquire and refine a wide range of technical and clinical skills—from basic procedures such as intravenous injections, cannulation, and wound care, to more advanced techniques. This ensures that each student gains the required practical experience while also providing additional opportunities for highly motivated students to deepen their knowledge.

The refinement of technical skills takes place in the auditoriums located in the building of the Mikaelian Institute of Surgery, owned by the university. These facilities meet the parameters of OSCE stations and are used for conducting examinations.

In terms of developing technical and practical skills, the university has ensured better coordination in teaching both the fundamentals of surgery and more advanced techniques—starting with topographic anatomy and operative surgery, and continuing with general surgery and its subspecialties in the skills center, using minimally invasive surgery workstations and simulation box trainers. Medical imaging simulation using diagnostic ultrasound (with anatomical phantoms and in vivo protocols) is also highly beneficial.

In addition, bedside clinical practice plays a significant role in the MD program. A 12-month rotational clinical practice has been implemented. Before this period begins, students receive a special logbook listing the expected competencies and learning outcomes. At the end of the rotation, the supervisor records the student's achievements. Similar to the assessment in the simulation center, the evaluation of practical skills and competencies in clinics is carried out using specially designed assessment forms.

The expert panel highlights as a major advantage that the higher education institution has its own hospitals, where students have extensive clinical access to both outpatient and hospitalized patients for practice and skill development.

The research component is an essential part of the program, and the development of students' research skills is thoroughly described in the university's Science Development Concept (2018–2038). The program includes the course "Fundamentals of Research," which covers research concepts, methodology, use of literature, information retrieval skills, analysis of scientific articles and guidelines, report writing, and presentation. At the end of the course, students are required to present a final project.

The "Fundamentals of Research" course has also introduced a mentoring initiative, where graduates assist younger students while simultaneously developing their own research skills.

Students also participate in voluntary research activities at the COBRAIN scientific-educational center, where they acquire both theoretical and practical skills for conducting laboratory research. However, it is desirable to involve more students in practical scientific research to further develop their experimental skills in biomedicine.

The individuals involved in implementing the program have demonstrated that their goal is to ensure the development of scientific and transferable skills and student engagement in research activities to the greatest extent possible. While the program aims to provide opportunities for both practical and scientific skill development, this has not yet been fully achieved and requires clearer structuring and standardization of the research component in the future.

Evidences/Indicators

- Program description document.
- Syllabi, curriculum map.
- Report document on "Medical Doctor" educational program improvement-related actions undertaken in response to recommendations of the Higher Education Program Accreditation Board of Georgia.
- Interviews with Head of Program, leadership of university, faculty, staff, students, graduates, employers.

Recommendations:

- While the program aims to provide opportunities for both practical and scientific skill development, this has not yet been fully achieved and requires clearer structuring and standardization of the research component in the future.

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
2.2. The Development of practical, scientific/research/creative/performing and transferable skills	Substantially

2.3. Teaching and Learning Methods

The programme is implemented by use student-oriented teaching and learning methods. Teaching and learning methods correspond to the level of education, course/subject content, learning outcomes, and ensure their achievement.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

The university has implemented a student-centered teaching and learning strategy that leverages modern and diverse educational methods. The teaching process actively incorporates simulators in skills laboratories, small-group instruction with an optimal number of students for specific tasks, and video and audio recording of OSCE courses to allow for objective analysis of both teaching and learning outcomes.

The curriculum is structured into theoretical, preclinical, and clinical modules. The theoretical component provides students with the foundational knowledge necessary for both scientific understanding and clinical practice.

Preclinical courses focus on developing technical and clinical skills within the skills center, ensuring their effective application in clinical environments. The university has also implemented activities that allow students to apply acquired knowledge during bedside teaching.

The institution is committed to the continuous improvement of teaching methods and learning activities, as well as to the integration of modern information technologies into academic and research practices. Documentation and interviews with university representatives confirm the use of both traditional methods—including lectures, small-group teaching, practical and workshop seminars, laboratory courses, written assignments, presentations, and bedside teaching—and modern approaches, audio and video materials, streaming, journal clubs, team-based learning, and interactive and problem-based learning. The university has implemented a student-centered teaching and learning strategy that leverages modern and diverse educational methods. The teaching process actively incorporates simulators in skills laboratories,

small-group instruction with an optimal number of students for specific tasks, and video and audio recording of OSCE courses to allow for objective analysis of both teaching and learning outcomes.

Preclinical courses focus on developing technical and clinical skills within the skills center, ensuring their effective application in clinical environments. The university has also implemented activities that allow students to apply acquired knowledge during bedside teaching.

Interviews indicate that academic staff are proficient in both traditional and modern teaching and assessment methods, including MINI-CEX, DOPS, OSCE, and OSPE. However, some lecturers noted that the university conducts methodology training only once every 3–4 years, highlighting the need for more systematic and frequent professional development.

To support the development of research skills, the program includes dedicated courses (research fundamentals and relevant electives) that foster analytical, critical, and creative thinking. Each course clearly defines learning outcomes, teaching and assessment methods, the balance between theory and practice, and appropriate learning resources.

The institution demonstrates a commitment to advancing scientific research; however, it is recommended to further strengthen curriculum-integrated student research activities.

Overall, the teaching and learning methods are fully aligned with the program level, course content, and specific requirements, ensuring that intended learning outcomes are achieved. The educational system is well-supported by advanced information technologies.

E-learning approaches also are used more extensively to improve the didactic concept.

Interviews revealed that lecturers do not have unified, structured criteria for assessing students' professionalism and empathy. This inconsistency leads to subjective evaluations and makes it difficult to provide effective feedback, which may, in turn, impact students' professional development.

In conclusion, teaching strategies are consistent with the program's objectives and learning outcomes. Teaching and assessment methods are applied flexibly, accommodating diverse student needs.

Evidences/Indicators

- Program description document.
- Syllabi, curriculum map.
- Report document on "Medical Doctor" educational program improvement-related actions undertaken in response to recommendations of the Higher Education Program Accreditation Board of Georgia.
- Interviews with Head of Program, leadership of university, faculty, staff, students, graduates, employers.

Recommendations:

- It is recommended to design and implement targeted training sessions focused on teaching methodology, with the explicit goal of ensuring that all instructors and educators engaged in the teaching-learning process have a clear understanding of the specific competencies students are expected to achieve.
- It is recommended to develop standardized criteria and assessment indicators that clearly define levels of professionalism, ethical behavior, and empathy.

- Implement regular feedback to students based on the new criteria to ensure monitoring of professional development.

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
2.3. Teaching and learning methods	Substantially

2.4. Student Evaluation

Student evaluation is conducted in accordance with the established procedures. It is transparent, reliable and complies with existing legislation.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Student assessment is conducted in accordance with established procedures. It is transparent for each student and complies with current university regulations and national legislation. A description of the assessment system is included in all syllabi and is accessible to students through the Electronic University platform. Final certification is carried out by the State Final Examination Commission and complies with national requirements. Since the 2022–2023 academic year, the Objective Structured Clinical Examination (OSCE) has been implemented as a key component of final certification.

The MD programme has transitioned from a predominantly final exam–based assessment system to a multi-component model aligned with modular learning and intended learning outcomes. This transformation has included the diversification of assessment methods (introduced in 2015, 2020, and 2022) and a gradual increase in the proportion of practical skills assessment (reaching 30–50% in several clinical modules such as General Surgery, Propaedeutics of Internal Diseases, Rheumatology, Allergology and Clinical Immunology).

The programme applies a range of assessment methods appropriate to the learning outcomes of individual modules and the programme as a whole. In clinical modules, practical skills are assessed using Mini Clinical Evaluation Exercise (Mini-CEX), Direct Observation of Procedural Skills (DOPS), OSCE, as well as structured checklists and logbooks. In preclinical modules, assessment includes practical identification tasks (e.g., specimens, histological slides, images), while in humanities modules, methods include participation in discussions, presentations, and other interactive formats.

The final attestation process follows a structured three-stage format, including OSCE (as Stage 1, with a defined threshold for practical skills), followed by an electronic test and an oral examination. A minimum performance level in the practical component is required to proceed to theoretical assessment stages. All final examinations are conducted in a computer-based testing centre, allowing students to receive immediate feedback upon completion.

The grading system is based on a 10-point scale: 9–10 – Excellent; 7–8 – Good; 5–6 – Satisfactory; 1–4 – Fail. Negative grades include (FX), which allows the student to retake the exam after additional preparation, and (F), which requires repeating the module.

The university ensures transparency and fairness in assessment through established appeal procedures, with students confirming awareness of these mechanisms. Academic integrity is supported through institutional policies on plagiarism prevention and detection.

While significant progress has been made in aligning assessment with learning outcomes and strengthening the practical component, further improvements are being implemented. These include ensuring more consistent application of assessment criteria and rubrics across modules and examiners, particularly in clinical and practical components, in order to enhance transparency and fairness.

In addition, the programme is working to improve the quality, timeliness, and specificity of feedback provided to students, with clearer links to learning outcomes and individual areas for improvement. Formative feedback mechanisms are being expanded, including structured debriefing following simulation-based learning, Mini-CEX, and OSCE practice.

The programme also plans to strengthen the systematic analysis of assessment results and to communicate more clearly how these results are used to improve teaching and assessment methods, ensuring that students are aware of the impact of their feedback on programme development.

Recommendations:

- It is recommended to ensure the consistent application of assessment criteria and rubrics across modules and examiners—particularly in practical and clinical components—and to improve the quality, timeliness, and specificity of feedback provided to students, clearly linking it to learning outcomes and individual areas for improvement.

Suggestions for the Programme Development

- Expand formative feedback mechanisms (e.g., structured debriefings following simulation sessions, Mini-CEX, or OSCE practice) to better support student learning.
- Regularly analyse and communicate how assessment results are used to improve teaching and evaluation methods, ensuring that students are aware of the impact of their feedback.

Evidences/Indicators

- Program description document.
- Course Syllabi
- Report document on “Medical Doctor” educational program improvement-related actions undertaken in response to recommendations of the Higher Education Program Accreditation Board of Georgia.
- Interviews with Head of Program, leadership of university, faculty, staff, students, graduates, employers.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
2.4. Student evaluation	Substantially

3. Student Achievements, Individual Work with Them

The programme ensures the creation of a student-centered environment by providing students with relevant services; promotes maximum student awareness, implements a variety of activities and facilitates student involvement in local and/or international projects; proper quality of scientific guidance is provided for master's student.

1.3 Student Consulting and Support Services

Students receive consultation and support regarding the planning of learning process, improvement of academic achievement, and career development from the people involved in the programme and/or structural units of the HEI. A student has an opportunity to have a diverse learning process and receive relevant information and recommendations from those involved in the programme.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
3.1 Student Consulting and Support Services	Select Appropriate

3.2. Master's Student Supervision

- A scientific supervisor provides proper support to master's student to perform the scientific-research component successfully.
- Within master's programmes, ration of students and supervisors enables to perform scientific supervision properly.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Data related to the supervision of master's students	
Number of master theses supervisors	
Number of master's students	
Ratio - supervisors of master's theses/master's students	

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	**Evaluation**
3.2. Master's Students Supervision	Select Appropriate

4. Providing Teaching Resources

Human, material, information and financial resources of educational programme ensure sustainable, stable, efficient and effective functioning of the programme and the achievement of the defined objectives.

4.1 Human Resources

➢ The personnel management policy and selection procedures at HEI ensure the recruitment and employment of qualified staff for academic, scientific, and invited positions within the educational program.
➢ The number and workload of programme academic/scientific and invited staff ensures the sustainable running of the educational process and also, proper execution of their research/creative/performance activities and other assigned duties. Quantitative indicators related to academic/scientific/invited staff ensure programme sustainability.
➢ The Head of the Programme possesses necessary knowledge and experience required for programme elaboration, and also the appropriate competences in the field of study of the programme. He/she is personally involved in programme implementation.
➢ Programme students are provided with an adequate number of administrative and support staff of appropriate competence.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Number of the staff involved in the programme (including academic, scientific, and invited staff)	**Number of Programme Staff**	**Including the staff with sectoral expertise[4]**	**Including the staff holding PhD degree in the sectoral direction[5]**	**Among them, the affiliated staff**
Total number of academic staff				
- Professor				
- Associate Professor				
- Assistant-Professor				
- Assistant				
Visiting Staff				_
Including International Stuff				

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

[4] Staff implementing the relevant components of the main field of study
[5] Staff with relevant doctoral degrees implementing the components of the major field of study

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
4.1 Human Resources	Select Appropriate

4.2 Qualification of Supervisors of Master's Students

The Master's students have qualified supervisor/supervisors and, if necessary, co-supervisor/co-supervisors who have relevant scientific-research experience in the field of research.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Number of supervisors of Master's theses	Thesis supervisors	Including the supervisors holding PhD degree in the sectoral direction	Among them, the affiliated staff
Number of supervisors of Master's thesis			
- Professor			
- Associate Professor			
- Assistant-Professor			
Visiting personnel			_
Scientific Staff			_
Including International Stuff			

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
4.2 Qualification of Supervisors of Master's Students	Select Appropriate

4.3 Professional Development of Academic, Scientific and Invited Staff

➢ The HEI conducts the evaluation of programme staff and analyses evaluation results on a regular basis.
➢ The HEI fosters professional development of the academic, scientific and invited staff. Moreover, it fosters their scientific and research work.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
4.3 Professional development of academic, scientific and invited staff	Select Appropriate

4.4. Material Resources

Programme is provided by necessary infrastructure, information resources relevant to the field of study and technical equipment required for achieving programme learning outcomes.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
4.4 Material Resources	Select Appropriate

4.5 Programme/Faculty/School Budget and Programme Financial Sustainability

The allocation of financial resources stipulated in the programme/faculty/school budget is economically feasible and corresponds to the programme needs.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

Describe, analyse and evaluate the compliance of the education programme with the requirements of the component of the standard, based on the information collected through the self-evaluation report (SER), the enclosed documents and site-visit.

Evidences/Indicators

- Component evidences/indicators, including the relevant documents and interview results

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
4.5. Programme/ Faculty/School Budget and Programme Financial Sustainability	Select Appropriate

5. Teaching Quality Enhancement Opportunities

In order to enhance teaching quality, programme utilises internal and external quality assurance services and also, periodically conducts programme monitoring and programme review. Relevant data is collected, analysed and utilized for informed decision making and programme development.

5.1 Internal Quality Evaluation

For the purpose of improving the quality of teaching, programme staff collaborates with internal quality assurance department(s)/staff available at the HEI when planning the process of programme quality assurance, developing assessment instruments, and implementing assessment process. Programme staff utilizes quality assurance results for programme improvement.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

YSMU's internal quality assurance system for the MD programme demonstrates a well-developed and formally grounded approach to continuous improvement, embedded in institutional structures and reflected in consistent programme-level practice.

The institution demonstrates a well-structured and formally grounded commitment to the Plan–Do–Check–Act cycle as the organising logic of its quality assurance system. The PDCA framework is not merely referenced in policy documents; it is concretely evidenced across all four phases through the monitoring period under review.

The Centre for Education Quality Assessment and Assurance conducts regular surveys of students, lecturers, and administrative staff, with findings systematically reported to faculty governance bodies. Assessment data from modular learning — showing student performance improvements of 1.2% to 10.7% across selected courses between the 2022–2023 and 2023–2024 academic years — provided quantitative evidence for the continuation and scaling of the modular curriculum. In October 2025, the Vice-Rector for Academic Affairs presented a comprehensive implementation report to the University Science Council, which received a positive assessment, confirming that the checking function reaches the highest institutional governance level.

The act phase is perhaps the most compelling dimension of the institution's PDCA implementation. Findings from internal surveys have directly resulted in module structure revisions, changes in assessment

ratios, and departmental reorganisation. The Monitoring Procedure institutionalises the act phase by requiring improvement action plans following self-analysis (Clause 18) and mandating effectiveness assessment of implemented amendments within eighteen months (Clause 31). The ongoing curriculum transformation plan for 2025–2030 is itself a product of the act phase of the current monitoring cycle, embedding quality-driven reform into the medium-term institutional development trajectory.

While the PDCA cycle is operationally strong, the documentation does not present explicit evidence of a formal feedback loop from the checking phase back to the planning phase at the programme-governance level — that is, a documented mechanism by which monitoring findings formally trigger revision of the action plan rather than simply informing individual corrective actions. This distinction matters because it determines whether quality improvement is reactive and incremental or genuinely cyclical and systemic. The institution is encouraged to formalise this linkage in its governance procedures to ensure the PDCA cycle operates as an integrated system rather than a sequence of parallel activities.

The structural integration of programme staff with the internal quality assurance service is one of the genuinely strong aspects of YSMU's quality assurance architecture. The Monitoring Procedure (Clause 5) formally establishes a multi-party internal monitoring structure that includes the Centre for Education Quality Assessment and Assurance, the faculty-level quality assurance officer, the Department of Educational Programmes, and the head of the educational programme. This institutional design ensures that quality assurance is not a function external to programme management but is constitutively embedded within it.

In practice, this structural integration is evidenced by the formation of a dedicated monitoring and analysis group that, together with the MD Programme Director and the quality assurance officer, conducted regular discussions and evaluations and reported to the Faculty Academic Council of General Medicine throughout the monitoring period. The CEQAA conducted research — including surveys, discussions, and observations — across all stages of programme implementation, and the faculty quality officer may additionally pursue investigations on issues raised by the programme director (Clause 6), indicating a responsive rather than merely routine mode of collaboration.

Collaboration in the development of assessment instruments is also documented. Programme staff and quality assurance representatives jointly developed standardised checklists and rubrics for modules across clinical disciplines, and faculty development workshops on OSCE, Mini-CEX, and DOPS formats were conducted to train assessors and ensure shared understanding of assessment standards. Discussions on curriculum and syllabus changes were held within five subject-area academic-methodological commissions and within the University Academic-Methodological Council, all of which include both programme staff and quality assurance representation.

The documentation consistently describes collaboration as a process driven primarily by the CEQAA and the quality assurance officer, with programme staff as recipients of survey findings and participants in meetings. There is less evidence of programme staff actively initiating quality inquiries or co-designing quality processes, which would indicate a deeper integration of quality culture at the faculty level. The Monitoring Procedure's provision allowing the faculty quality officer to conduct additional research on issues raised by the programme head (Clause 6) suggests the infrastructure for staff-initiated quality inquiry exists, but documented examples of its use would strengthen the evidence base. Greater visibility of how individual course coordinators and clinical supervisors engage with quality data — beyond attending meetings and implementing decisions — would demonstrate that quality assurance collaboration is embedded at the operational teaching level, not only at the managerial level.

The institution has established a framework for multi-stakeholder engagement in quality assurance processes, and the documentation provides solid evidence of student and academic staff involvement. Student participation is operationalised through regular surveys at module and programme level: the 512-student survey on the Essentials of Foundational Research course, the 350-student surveys on modules 2 and 6, the Electronic University user satisfaction surveys among students and lecturers, and the evaluation of the AI-assisted Doctor Lex platform through student feedback all demonstrate systematic solicitation of student perspectives. Academic staff engagement is evidenced through five academic-methodological commissions operating across major disciplinary domains, regular module-level faculty meetings, and involvement in the development of assessment instruments and curriculum revisions.

Administrative staff participate through the Electronic University platform, which integrates administrative processes and generates data used in quality review. External experts — particularly in the area of practical skills assessment — have contributed to the enhancement of assessment frameworks, as noted in the monitoring report's references to ongoing collaboration with international medical education specialists.

YSMU has made substantial and documented investments in digital learning infrastructure during the monitoring period, and the quality assurance adaptations accompanying this transformation are explicitly evidenced. The Electronic University platform, launched in February 2025 following an institutionally governed development process initiated in January 2023, represents the most significant digital transformation. The platform integrates student data management, curriculum administration, scheduling, assessment records, and communication functions across the full student–department–dean's office chain. Quality assurance of the platform itself is evidenced through satisfaction surveys among students, lecturers, and administrative staff conducted by the faculty quality officer, with results documenting platform effectiveness.

The Moodle e-learning platform is actively deployed within the Essentials of Foundational Research module with documented quality monitoring: student engagement and satisfaction data inform course improvements, faculty members completed two rounds of training in 2024–2025 to ensure competent pedagogical use of the platform, and outcomes were presented at the academic-methodological conference in May 2025. The AI-assisted trilingual clinical case platform Doctor Lex, supporting individualised practical skills training, has been evaluated through student surveys that yielded specific findings — including a strong preference for extending the tool to non-clinical disciplines — which were formally discussed at institutional level. This demonstrates that digital learning quality data is integrated into institutional deliberation and decision-making processes, not merely collected and stored.

The Electronic University platform's rubric and checklist repository — which makes assessment instruments accessible to both students and faculty through the e-learning environment — represents a specific quality assurance adaptation for the digital context, ensuring consistency and transparency of assessment regardless of delivery modality. The forthcoming Digital Curriculum Management System, currently being developed, will enable real-time tracking of course content, teaching methodologies, and learning outcomes, further strengthening the institution's capacity for quality-assured digital learning governance.

While the quality assurance of individual digital platforms is well-evidenced, the documentation does not articulate a consolidated institutional policy or framework specifically governing the quality assurance of electronic and digital learning as a modality — as distinct from the quality assurance of the physical programme supplemented by digital tools. As the proportion of digitally mediated learning increases — particularly through the Electronic University, AI-based tools, and the forthcoming Digital Curriculum

Management System — the institution should consider developing an explicit e-learning quality assurance framework that addresses standards for digital content quality, accessibility, data security, student digital literacy support, and equity of access. The absence of such a framework is not currently a critical gap, given that the institution's digital learning tools are primarily supplementary rather than replacing face-to-face delivery, but it will become increasingly important as the digital transformation matures.

Evidences/Indicators

- Procedure of Monitoring and Reviewing of educational programs
- Interview results
- Surveys

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- The institution may wish to consider formalising the feedback loop between the checking and planning phases of the PDCA cycle at programme-governance level, so that monitoring findings formally trigger revision of the action plan rather than informing only individual corrective actions.
- Greater visibility of how course coordinators and clinical supervisors engage with quality data at the operational teaching level — beyond attendance at governance meetings — would further demonstrate the depth of quality culture across the institution.
- As digital infrastructure matures, a consolidated e-learning quality assurance framework would bring coherence to what are currently well-functioning but separately governed digital quality processes.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
5.1 Internal quality evaluation	Complies

5.2 External Quality Evaluation

The programme periodically analyzes the results of external quality evaluations and the implementation of received recommendations, which are used for the programme's development.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

YSMU demonstrates a structured and institutionally committed approach to analysing and responding to external quality evaluation outcomes. The evidence presented confirms that the MD programme does not treat external accreditation as a terminal event but rather as a continuing driver of programme

development and improvement. The most significant external quality evaluation during the review period is the international accreditation decision issued by the Higher Education Program Accreditation Board of Georgia (Decision No. MES024 0000160336, dated 14 February 2024), under which the integrated one-cycle MD programme was granted international accreditation for a period of seven years. The accreditation was accompanied by a monitoring provision requiring demonstrated progress within two years, reflecting the external panel's expectation of continued and verifiable improvement in identified areas.

In response, the institution produced a structured document systematically addressing each recommendation set forth in the annex to the accreditation decision, organised in sequential order corresponding to the original recommendations. This approach is itself indicative of a mature quality culture: rather than providing a general narrative of improvement activity, the programme has mapped its responses directly and traceably to each specific external finding, enabling clear verification of follow-through. The structured format demonstrates institutional accountability and facilitates meaningful external scrutiny during the forthcoming monitoring review. The improvement actions documented in response to the accreditation recommendations span multiple dimensions of programme quality, reflecting the breadth of the external panel's observations and the programme's capacity to mobilise institutional resources in response to externally identified priorities. The systematic linkage between each recommendation and its corresponding institutional response confirms that external evaluation findings are treated as actionable quality intelligence rather than as formal compliance requirements to be acknowledged and filed. The institution's engagement with this external evaluation process is further reinforced by the regulatory framework established in the Monitoring and Reviewing Procedure, which formally identifies external assessment conclusions as one of the grounds for triggering periodic programme review (Clause 24) and requires the programme group to develop recommendations taking into account external expert conclusions (Clause 25). This alignment between regulatory obligation and demonstrated practice confirms that responsiveness to external evaluation is institutionally embedded rather than situationally motivated.

YSMU's approach to external quality evaluation demonstrates a responsible, transparent, and development-oriented institutional response. The programme's systematic engagement with the accreditation board's recommendations, structured follow-up documentation, and the regulatory foundation supporting this practice collectively reflect a quality assurance culture in which external evaluation outcomes are substantively integrated into the programme's ongoing development trajectory.

Evidences/Indicators

- Decision by the Accreditation Council For Educational Programmes (Georgia)
- Procedure of Monitoring and Reviewing of educational programs
- Interview results
- Surveys

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
5.2. External Quality Evaluation	Complies

5.3 Programme Monitoring and Periodic Review

Programme monitoring and periodic evaluation is conducted with the involvement of academic, scientific, invited, administrative, supporting staff, students, graduates, employers and other stakeholders through systematic data collection, study and analysis. Evaluation results are applied for the programme improvement.

Summary and Analysis of the Education Programme's Compliance with the Requirements of the Component of the Standard

YSMU has established a formally grounded framework for programme monitoring and periodic evaluation, as codified in the Procedure for Monitoring and Reviewing of Educational Programs approved by the Scientific Council on 26 March 2023. The Procedure demonstrates a structured commitment to multi-stakeholder engagement across the full monitoring and review cycle, with clear mechanisms for translating evaluation findings into programme improvement.

The institutional architecture for monitoring formally brings together the Education Quality Assessment and Assurance Centre, the faculty-level quality assurance officer, the Department of Educational Programmes, and the head of the educational programme (Clause 5), coordinated under the Vice-Rector for Academic Affairs (Clause 23). Clause 6 explicitly mandates that research activities — surveys, discussions, and observations — involve both internal and external beneficiaries across all stages of programme implementation, establishing a broad and inclusive perimeter of engagement.

Student involvement is systematically operationalised through module and programme-level surveys. Graduate and employer perspectives are formally embedded in the review process: Clause 24 identifies their quality assessments as grounds for triggering periodic review, Clause 25 requires recommendations to be developed on the basis of their survey results, and Clause 27 mandates that three years of satisfaction survey data from graduates and employers be attached to the self-analytical report. Academic and administrative staff contribute through subject methodological commissions, faculty meetings, and platform-generated data, while external specialists participate in the Expert Committee formed for accreditation purposes (Clause 16).

The pathway from evaluation to improvement is clearly regulated. Clause 18 requires an action plan following expert recommendations, Clause 28 mandates collaborative improvement planning involving all relevant quality assurance bodies, and Clause 31 requires effectiveness assessment of all implemented amendments within eighteen months — ensuring the improvement cycle is completed and verified rather than merely initiated. In practice, survey findings have resulted in module structure revisions, changes in assessment ratios, and departmental reorganisation, with the 2025–2030 curriculum transformation plan representing the most substantial expression of evaluation-driven reform.

One area warranting further development is the documented evidence of graduate and employer engagement in practice. While their involvement is comprehensively regulated, more explicit documentation of how their feedback concretely informs specific programme decisions would strengthen the evidence base. Similarly, greater visibility of how individual course coordinators and clinical supervisors engage with quality data — beyond governance-level participation — would confirm that evaluation culture is embedded at the operational teaching level.

Overall, YSMU's approach to programme monitoring and periodic evaluation reflects a well-structured, inclusive, and improvement-oriented quality assurance culture, firmly anchored in institutional regulation and evidenced in consistent programme-level practice

The evidence presented throughout the monitoring period reflects a coherent commitment to inclusive data collection and the application of evaluation findings for programme improvement.

Student involvement in the monitoring process is among the most consistently documented dimensions of stakeholder engagement. Systematic surveys conducted at both module and programme level — including the 512-student survey on the Essentials of Foundational Research course and the 350-student surveys on modules 2 and 6 — demonstrate that student perspectives are regularly and deliberately solicited. Satisfaction surveys administered through the Electronic University platform further extend this engagement across the student body, while student feedback on the AI-assisted Doctor Lex platform yielded specific and actionable findings — including a documented preference for extending the tool beyond clinical disciplines — which were formally deliberated at the institutional level. This confirms that student-generated evaluation data is not merely collected but actively integrated into institutional decision-making.

Academic staff engagement is evidenced through the operation of five academic-methodological commissions spanning major disciplinary domains, regular module-level faculty meetings, and direct involvement in the development of assessment instruments and curriculum revisions. Administrative staff contribute to the monitoring process through the Electronic University platform, which integrates administrative data into quality review processes. External experts, particularly in the domain of practical skills assessment, have contributed to the enhancement of assessment frameworks through documented collaboration with international medical education specialists, reflecting an openness to expertise beyond the institution's internal boundaries.

The Centre for Education Quality Assessment and Assurance plays a central coordinating role in this process, conducting surveys, discussions, and observations across all stages of programme implementation and reporting findings systematically to faculty governance bodies. The faculty-level quality assurance officer additionally holds the capacity to pursue investigations on issues raised by the programme director, indicating a responsive mode of engagement rather than a purely routine one.

Evaluation results are demonstrably applied to programme improvement. Student performance data from modular learning, showing improvements of 1.2% to 10.7% across selected courses between the 2022–2023 and 2023–2024 academic years, provided the quantitative basis for continuing and scaling the modular curriculum. Internal survey findings have directly resulted in module structure revisions, changes in assessment ratios, and departmental reorganisation. The ongoing curriculum transformation plan for 2025–2030 is itself a product of the evaluation and improvement cycle, embedding quality-driven reform into the institution's medium-term development trajectory.

One area for further development concerns the depth of engagement of certain stakeholder groups — particularly graduates and employers — whose involvement, while referenced within the institutional framework, is less explicitly evidenced in the documentation reviewed. Strengthening the systematic inclusion of graduate feedback and employer perspectives would further enrich the evidence base for programme relevance and graduate outcomes. Additionally, while programme staff participate in monitoring activities, greater visibility of how individual course coordinators and clinical supervisors independently engage with and act upon quality data would demonstrate that evaluation culture is embedded at the operational teaching level, not only at the managerial and governance levels.

Overall, YSMU's approach to programme monitoring and periodic evaluation reflects a mature and multi-layered stakeholder engagement model, underpinned by systematic data collection and a demonstrated commitment to applying evaluation outcomes for continuous programme improvement.

Evidences/Indicators

- Procedure of Monitoring and Reviewing of educational programs
- Interview results

- Surveys

Recommendations:

- Proposal (s), which should be considered by the HEI, the programme to meet the requirements of the standard

Suggestions for the Programme Development

- Non-binding suggestions for programme development

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
5.3. Programme monitoring and periodic review	Complies

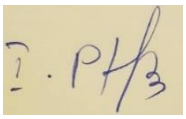
Attached documentation (if applicable):

Signatures:

Chair of Accreditation Expert Panel

Full name, signature

Irine Pkhakadze



Accreditation Expert Panel Members

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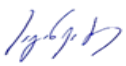

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Vladimir Voskanyan