



NATIONAL CENTER FOR
EDUCATIONAL QUALITY
ENHANCEMENT

Accreditation Expert Group Draft Report on Higher Education Programme

For educational programmes implemented within the first and second levels of higher education and Georgian language preparation educational programme

**One-Cycle English-Language Educational Programme in Dentistry
LLC Georgian International University (GIU)
Tbilisi, Georgia**

Evaluation Date(s)

June 19 and 20, 2026

Report Submission Date

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Tbilisi

Table of Contents

I. Information on the education programme	4
II. Accreditation Report Executive Summary	5
III. Summary Table of Compliance of the programmes with the standards	13
IV. Compliance of the Programme with Accreditation Standards	15
1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme	15
2. Methodology and Organisation of Teaching, Adequacy of Evaluation of Programme Mastering	21
3. Student Achievements, Individual Work with Them	31
4. Providing Teaching Resources	33
5. Teaching Quality Enhancement Opportunities	40

Information about a Higher Education Institution ¹

Name of Institution Indicating its Organizational Legal Form	LLC Georgian International University (GIU)
Identification Code of Institution	204555524
Type of the Institution	University

Expert Panel Members

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¹ In the case of joint education programme: Please indicate the HEIs that carry out the programme. The indication of an identification code and type of institution is not obligatory if a HEI is recognised in accordance with the legislation of a foreign country.

I. Information on the education programme

Name of Higher Education Programme (in Georgian)	სტომატოლოგია
Name of Higher Education Programme (in English)	Dentistry
Level of Higher Education/programme	One-cycle dentistry
Qualification to be Awarded ²	Doctor of Dental Medicine (DMD)
Name and Code of the Detailed Field	0911.1.1 Dental Medicine
Indication of the right to provide the teaching of subject/subjects/group of subjects of the relevant cycle of the general education ³	-
Language of Instruction	English
Number of ECTS credits	300
Programme Status (Accredited/ Non-accredited/ Conditionally accredited/ Newly proposed/International accreditation) Indicating Relevant Decision (number, date)	Newly proposed
Additional requirements for the programme admission (in the case of an art-creative and/or sports educational programme, passing a creative tour/internal competition, or in the case of another programme, specific requirements for admission to the programme/implementation of the programme)	-
The quota for MD students requested by the HEI (In the case of Medical Doctor one-cycle educational programme)	-

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.

³ In case of Integrated Bachelor's-Master's Teacher Training Educational Programme and Teacher Training Educational Programme

II. Accreditation Report Executive Summary

▪ General Information on Education Programme:

The one-cycle English-language DMD programme at GIU is newly developed and aligned with the National Qualifications Framework (Level VII), sectoral characteristics of dental education, and international standards (WHO, FDI, ADEE, ADEA). The curriculum integrates biomedical, preclinical, and clinical components with strong horizontal and vertical integration. The programme emphasizes evidence-based dentistry, public health, research skills, and modern clinical competencies.

▪ Overview of the Accreditation Site Visit

The site visit was conducted on 19–20 June 2026 in a hybrid format. The Georgian members of the expert panel participated in person at the University, while the chair joined remotely via a Google-meet connection facilitated by the National Center for Educational Quality Enhancement (NCEQE).

Prior to the visit, a preparatory meeting was held during which the panel reviewed the agenda, confirmed the methodological approach, and discussed the key areas of focus for the evaluation.

During the site visit, the panel engaged in a series of structured sessions with university representatives. On the second day, the experts also visited the clinics, the University library, and the teaching and learning facilities, including lecture halls, seminar rooms, and practical training environments. The interview sessions were informative and provided comprehensive information, enabling the expert panel to conduct a thorough and well-substantiated review of the programme. The working process was highly professional and collaborative, with all panel members demonstrating active engagement and contributing substantively throughout the visit.

We would also like to express my appreciation to the panel members for their commitment, constructive participation, and collegial cooperation. Furthermore, we were satisfied with the support provided by NCEQE during all stages of the process.

▪ Brief Overview of Education Programme Compliance with the Standards

The programme demonstrates substantial alignment with national and international requirements. The curriculum is well-structured, the learning outcomes are comprehensive and measurable, and the internal quality assurance system is robust. Several areas require additional evidence, including syllabi, staff qualifications, resource inventories, and admission criteria.

▪ Recommendations

- 2-1-1: The panel recommends developing and documenting a student body planning methodology that considers the specific characteristics of the Dentistry programme, institutional resources, and the university's strategic vision, to ensure the sustainable implementation and smooth administration of the educational process.
- 2-2-1: The panel noted that the reviewed clinical dentistry syllabi do not consistently specify the minimum number of patient-based clinical procedures required for the achievement of practical competencies. The panel recommends defining minimum clinical procedural requirements for each clinical course and establishing their successful completion as a prerequisite for eligibility to undertake the final assessment.
- 2-2-2: The panel recommends establishing a structured system for supervision, monitoring, documentation, feedback, and evaluation of students' clinical performance during external placements.
- 2-2-3: The panel recommends developing a policy that defines individual study plans, compensatory clinical activities, and competency recovery mechanisms to ensure that all required practical skills and programme learning outcomes are achieved before course completion.
- 2-3-1: The panel recommends developing and documenting standardized assessment instruments, evaluation rubrics, and examiner guidelines for workplace-based and clinical assessment methods (e.g., DOPS, Mini-CEX, OSCE, OSPE and etc.) to ensure transparent, objective, valid, and consistent assessment of students' competencies.
- 4.4.1: In the partner-clinic agreements, clarify and document the extent to which students provide supervised treatment to patients, as distinct from observation, and provide agreements with terms covering the full clinical cycle.
- 4.4.2: Confirm the actual capacity of the clinical base (patient flow and supervisor-to-student ratio) in view of the planned growth of the student cohort.
- 5.1.1: It is recommended to strengthen the quality culture in the institution by sharing existing mechanisms with all involved stakeholders, and fully implement existing rules, which will help identify and prevent challenges in the self-assessment process.
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▪ Suggestions

- 1-1-1: Document of stakeholder involvement (students, employers, alumni) in the formulation and revision of programme objectives is suggested.
- 1-1-2: Provide explicit mapping of programme objectives to GIU's strategic plan.
- 1-1-3: The accreditation standard requires that the programme objectives be publicly accessible; however, during the evaluation process, sufficient evidence demonstrating that these objectives are publicly available and easily accessible to stakeholders was not identified.

- 1-2-1: Stakeholder involvement in the development of learning outcomes is a mandatory requirement (Programme Design Rule, Art. 2.2, IV). Therefore, the programme should ensure the participation of students in future cycles, once enrolment has commenced.
- 1-2-2: The programme reports benchmarking its PLOs against international dental curricula; however, the process is insufficiently documented, and supporting evidence is limited.
- 1-5-1: All syllabi were recently developed and reviewed during programme preparation, external peer evaluation, and internal QA checks; however, the full annual review cycle has not yet occurred because the programme has not enrolled students. Interviews confirm that the institution is prepared to implement regular syllabus reviews once the programme becomes operational.
- 3.1.1: The establishment of a dedicated professional counseling service for psychological consultation is essential. This initiative would provide critical mental health support, significantly enhancing the well-being of the diverse student population, particularly international students.
- 3.1.2: The university should develop tailored career symposia and specialized masterclasses specifically for dentistry programs, ensuring that all fields of study receive equal professional networking opportunities.
- 4.1.1: Define and document the minimum threshold (range) of the points-based academic-activity system, so that the criterion for “insufficient activity” is transparent.
- 4.3.1: Strengthen the communication of the staff-evaluation system (student feedback and peer review) to all lecturers, including invited staff.
- 4.3.2: Ensure the timely involvement of all teaching staff in the development and updating of syllabi and assessment methods, so that each lecturer is aware of the assessment approach in advance.
- 4.4.1: Document clearly the allocation of the theoretical/assessment components (conducted on campus) and the supervised clinical practice (conducted at partner clinics).
- 4.4.2: Once feasible, reflect the planned 2027 dental base in the relevant planning documents.
- 4.5.1: Add a sensitivity analysis for a low-enrolment scenario.
- 4.5.2: Align the timing of the “practice/curation” budget line with the actual start of patient contact in the curriculum.
- 4.5.3: Once feasible, reflect the planned 2027 dental base in the budget with a concrete capital cost and timeline.
- 4.5.1: Correct the mechanical labelling of the budget document so that it reflects the one-cycle status of the programme (rather than “bachelor”).
- 5.1.1: It is suggested to add specialists to the quality assurance service for medical and dental programs who would also have specialized knowledge in the field.

▪ **Brief Overview of the Best Practices (if applicable)^[1]**

1. Modern teaching and learning methods—including PBL, CBL, and simulation based education—are explicitly supported and encouraged within the University’s institutional teaching and learning framework.

2. The Student and Alumni Relations and Career Support Office collaborates closely with the International Relations Office to ensure equitable access to both local and international opportunities for all students.

3. The Buddy System facilitates students’ smooth transition into the higher education environment, assisting them in navigating academic processes and general university matters.

4. The Ombudsman unit within the Student Self-government provides a formal mechanism for students to raise rights-related concerns and receive appropriate support.

5. GIU organizes a wide range of academic and extracurricular activities—including field trips, sports events, and cultural projects—with active student participation in the annual Student Festival.

6. The University offers structured support for planning and accessing exchange and mobility opportunities, ensuring students are well-informed and prepared.

7. The institution has strong preclinical training infrastructure, enabling students to develop essential foundational skills prior to entering clinical environments.

8. The Quality Assurance staff demonstrate high professionalism, strong institutional commitment, and a clear understanding of QA responsibilities.

9. The University maintains a well-defined and comprehensive quality assurance policy and set of tools, providing a robust framework for programme monitoring, evaluation, and continuous improvement.

▪ **Information on Sharing or Not Sharing the Argumentative Position of the HEI**
Official Panel Letter in Response to the University’s Argumentative Position

The Expert Panel has reviewed the University’s argumentative position submitted in response to the Draft Accreditation Report of the One-Cycle English-Language Educational Program in Dentistry. The Panel appreciates the Institution’s detailed clarifications, its willingness to address developmental recommendations, and its commitment to strengthening program quality prior to implementation. The following constitutes the Panel’s official position on each recommendation and suggestion.

Panel Response

1. Standard 1.1

Recommendation 1.1.1 The University clarified that program objectives were not publicly posted because the program had not yet commenced and confirmed that they will be published in a clear and accessible format once student admissions begin. The Panel finds this response satisfactory and considers the issue procedural rather than substantive. **Recommendation 1.1.1 is moved to the Suggestions section.**

2. Standards 2.2 and 2.3

The University shares all recommendations under Standards **2.2** and **2.3**, acknowledging the Panel's observations and confirming that the relevant mechanisms—including minimum clinical procedural requirements, supervision and monitoring systems, individual study plans, competency recovery mechanisms, and standardized assessment instruments—will be developed and implemented prior to programme commencement.

As these recommendations were issued due to the absence of fully developed mechanisms at the time of evaluation, and the University's response confirms this context, **the recommendations under Standards 2.2 and 2.3 remain unchanged.**

3. Standard 2.1

Recommendation 2.1.1 – Student Body Planning Methodology The University states that the Student Body Planning Methodology existed prior to the accreditation application but was not included because it was not a mandatory annex. The Institution has now provided a link to the document.

The Panel recalls that this document was explicitly requested during the accreditation visit as additional evidence and was not provided at that time. In accordance with accreditation procedures, findings must be based on evidence available during the evaluation process.

Therefore, **Recommendation 2.1.1 remains unchanged.**

4. Standards 4.4 and 4.5

Recommendation 4.4.1 The University shares the recommendation and confirms readiness to further clarify and document the extent of students supervised clinical involvement within partner-clinic agreements. **The recommendation remains unchanged.**

Recommendation 4.4.2 The University shares the recommendation and outlines future steps for verifying clinical base capacity once operational data become available. **The recommendation remains unchanged.**

Recommendation 4.5.1 The University identifies this issue as a mechanical/clerical error unrelated to the substantive quality of the program. The Panel agrees that the matter is technical in nature. **Recommendation 4.5.1 is moved to the Suggestions section.**

5. Standard 5

The University shares both the recommendation and the suggestion under Standard 5.1, acknowledging the developmental nature of the feedback and expressing readiness to strengthen quality culture and stakeholder communication.

As the Institution fully accepts the Panel's observations and no new evidence contradicts the original findings, **the evaluation of Standard 5 and the associated recommendation and suggestion remain unchanged.**

6. Standard 3

The University shares the suggestions under Standard 3, including those related to stakeholder involvement and documentation of benchmarking processes. As the Institution accepts the developmental nature of these suggestions and expresses readiness to address them during program implementation, **the suggestions under Standard 3 remain unchanged.**

Conclusion

The Panel acknowledges the University's constructive engagement with the accreditation process and its commitment to strengthening the program prior to implementation. The majority of recommendations remain unchanged, as they reflect the evidence available during the evaluation period. Two recommendations—1.1.1 and 4.5.1—have been reclassified as suggestions in light of the University's clarifications. The Panel looks forward to the continued development of the program and the full implementation of the outlined mechanisms.

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

1.1 Number and composition of staff

Based on the uploaded *Academic and Invited Personnel List*, the programme involves:

- 50 staff members in total, including:
 - o Professors
 - o Associate Professors
 - o Assistant Professors
 - o Assistants
 - o Invited lecturers

1.2 Sector-specific qualifications

- A significant proportion of staff hold doctoral degrees in dentistry, medicine, or biomedical sciences.
- Clinical disciplines are taught by staff with 3–9+ years of clinical experience, in line with the Personnel Selection Procedure (Art. 4.21).
- English-language proficiency is confirmed as required for the English-taught programme.

1.3 Ratios

Because the programme has not yet enrolled students, ratios are calculated based on projected capacity:

1. Academic vs. invited staff ratio: approximately 1 : 1.2, indicating balanced staffing.
2. Affiliated vs. non-affiliated staff: GIU employs a mix of affiliated academic staff and invited clinicians; the ratio is appropriate for a practice-oriented programme.
3. Supervisor–student ratio: projected to be more than adequate, as the programme has a large pool of qualified supervisors relative to expected cohort size.

1- **Scientific/Research Indicators:**

2.1 Publications and research output

Based on CVs and the external evaluation report:

- Several academic staff have peer-reviewed publications in international journals within the last 5 years.
- Research productivity varies across individuals, which is typical for a newly developing programme.

2.2 Conference participation

- Staff have participated in local and international conferences, workshops, and professional development events.
- The Research Support Center confirmed ongoing support for research engagement.

2.3 Other indicators

- Staff demonstrate involvement in:
 - o Evidence-based dentistry
 - o Clinical case presentations
 - o Continuing professional development
 - o International training programmes

1- **Academic Staff Turnover Rate:**

- As the programme is new, there is no programme-specific turnover.
- Institutional HR data show stable staffing, with recruitment driven by programme development needs rather than attrition.
- No evidence of turnover affecting programme sustainability was identified.

1- **Data on the Individuals Enrolled:**

Because the programme has not yet admitted students, the following apply:

- No historical enrolment or progression of data exists.
- The university has defined a planned admission quota.
- Systems for academic monitoring, mobility, and student support have already been established.
- The International Relations Office and Student Support Services confirmed readiness to support the first cohort.

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

5.1 Material and technical resources

Verified during the site visit:

- Simulation laboratories
- Phantom labs
- OSCE/OSPE examination spaces
- Biomedical laboratories
- Clinical training sites (“Smile Gallery” and “Kani Clinic”)
- Library resources with access to international databases

These resources meet modern dental education standards.

5.2 Financial sustainability

- The programme budget is aligned with projected student numbers and operational needs.
- Financial planning is consistent with GIU’s internal regulations and Governing Board decisions.

5.3 Quality assurance capacity

- GIU has a well-defined QA policy, monitoring tools, and staff with strong institutional commitment.
- QA mechanisms are quantitatively supported through structured evaluation cycles, surveys, and monitoring indicators.

▪ **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.**

III. 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	Complies
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	Substantially
2.2	The Development of Practical, Scientific/Research/ Creative/ Performance and Transferable Skills	Substantially
2.3	Teaching and Learning Methods	Complies
2.4	Student Evaluation	Complies
3.	Student Achievements and Individual Work with Them	Complies
3.1	Student Consulting and Support Services	Complies
3.2	Master's Student Supervision	Select Appropriate
4	Providing Teaching Resources	Complies
4.1	Human Resources	Complies
4.2	Qualification of Supervisors of Master's Student	Select Appropriate
4.3	Professional Development of Academic, Scientific and Invited Staff	Complies
4.4	Material Resources	Substantially
4.5	Programme/Faculty/School Budget and Programme Financial Sustainability	Complies
5	5. Teaching Quality Enhancement Opportunities	Complies
5.1	Internal Quality Evaluation	Substantially
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](#)

[Suggestions on the evaluation of the methodology for determining the threshold number of student quotas on a higher education institution educational programme of a certified medical doctor](#)

[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

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 one-cycle English-language DMD programme at GIU has clearly formulated, realistic, and achievable objectives that reflect the specificity of the dental field and the qualification level (NQF Level VII). The objectives are aligned with GIU's mission, vision, and strategic priorities as defined in the GIU Regulation (Art. 3), which emphasizes academic development, internationalization, innovation, and societal contribution.

The programme objectives are consistent with the sectoral characteristics of Dentistry, the National Qualifications Framework, and international benchmarks (ADEE, ADEA, WHO, FDI). They articulate the programme's intention to prepare graduates with:

- Comprehensive biomedical, clinical, and dental knowledge
- Clinical reasoning and evidence-based decision-making skills
- Ethical and legal competencies
- Commitment to lifelong learning and professional development

The SER demonstrates that the objectives were developed through a collaborative process involving academic staff, QA personnel, employers, and external reviewers. The objectives are publicly accessible and communicated through programme documentation and the university website.

The objectives also reflect labour market needs, as evidenced by the SER's reference to employer consultations and analysis of analogous international programmes. The programme's contribution to societal health and the development of the dental field is clearly articulated.

Evidences/Indicators

- GIU Mission, Vision, and Values (GIU Regulation, Art. 3)

- One-cycle English-language DMD Programme Document
- SER Section 1.1
- Rules for Planning, Elaboration, Development and Cancellation of Educational Programmes
- Labour market analysis and employer feedback
- Interview results

Recommendations:

-

Suggestions for the Programme Development

- Document of stakeholder involvement (students, employers, alumni) in the formulation and revision of programme objectives is suggested.
- Provide explicit mapping of programme objectives to GIU's strategic plan.
- The accreditation standard requires that the programme objectives be publicly accessible; however, during the evaluation process, sufficient evidence demonstrating that these objectives are publicly available and easily accessible to stakeholders was not identified.

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 learning outcomes (PLOs) are logically derived from the programme objectives, aligned with the NQF Level VII descriptors, and consistent with the sectoral characteristics of Dentistry. The PLOs are clearly formulated, measurable, realistic, and achievable, in accordance with the Methodology of Formation and Evaluation of Learning Outcomes.

The PLOs cover all three domains:

- Knowledge & Understanding
- Skills
- Responsibility & Autonomy

They reflect the competencies required for modern dental practice, including:

- Biomedical and clinical sciences
- Diagnosis, prevention, and treatment of dental diseases
- Communication and teamwork
- Evidence-based practice
- Ethical and legal responsibilities
- Lifelong learning

The programme provides a curriculum map demonstrating how each course contributes to the development of specific learning outcomes at the levels of introduction, deepening, and reinforcement. This mapping is consistent with the methodology described in the university's internal regulations.

Stakeholder involvement in developing the PLOs is documented, including academic staff, employers, and external experts. The PLOs support graduate employability and progression in residency or doctoral studies.

The panel finds the PLOs to be comprehensive, well-structured, and aligned with international standards.

Evidences/Indicators

- Programme Learning Outcomes (SER Section 1.2)
- Methodology for Formulating and Evaluating Programme Learning Outcomes
- Curriculum Map
- SER Section 1.2
- Map of Correspondence Between Programme Objectives and Learning Outcomes
- Stakeholder consultation documentation
- Interviews results

Recommendations:

-

Suggestions for the Programme Development

- Stakeholder involvement in the development of learning outcomes is a mandatory requirement (Programme Design Rule, Art. 2.2, IV). Therefore, the programme should ensure the participation of students in future cycles, once enrolment has commenced.
- The programme reports benchmarking its PLOs against international dental curricula; however, the process is insufficiently documented, and supporting evidence is limited.

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

GIU has a well-defined, systematic, and transparent mechanism for evaluating programme learning outcomes, regulated by the Methodology of Formation and Evaluation of Learning Outcomes. The evaluation cycle includes:

- Defining learning outcomes
- Mapping outcomes to curriculum components
- Collecting data through direct and indirect methods
- Analyzing results against benchmarks
- Implementing improvements

Direct assessment methods include: OSCE, OSPE, Mini-CEX, DOPs, written exams, oral exams, research papers, clinical skills demonstrations.

Indirect assessment methods include Student self-evaluation, graduate surveys, employer surveys, and practice supervisor evaluations.

Benchmarks are established for each learning outcome, and the methodology outlines the use of Gauss distribution for analyzing achievement levels, consistent with the internal regulation.

The SER demonstrates that evaluation results are used to improve the programme, including revisions to course content, prerequisites, and teaching methods. Stakeholders are informed of evaluation outcomes through QA processes.

The mechanism is comprehensive and aligns with accreditation requirements.

Evidences/Indicators

- o Methodology for Formation and Evaluation of Learning Outcomes
- o Programme Learning Outcomes Assessment Plan
- o Benchmarks and assessment tools
- o Interviews results
- o SER Section 1.3

Recommendations:

-

Suggestions for the Programme Development

-

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
1.3 Evaluation Mechanism of the Programme Learning Outcomes	Complies

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 DMD programme is designed according to GIU's internal methodology and complies with Georgian legislation and ECTS requirements. The structure is logical, coherent, and ensures progressive development from foundational biomedical sciences to preclinical and clinical training.

Key strengths include:

- Horizontal and vertical integration (e.g., Anatomy–Histology, Immunology–Microbiology, Dental Implantology)
- Balanced distribution of theoretical, laboratory, and clinical components
- Clear prerequisites ensuring logical progression
- Inclusion of public health, research, and interdisciplinary modules
- Internationalization elements, including English-language instruction and use of international literature

The programme reflects modern scientific achievements and integrates evidence-based practice. Stakeholders participated in programme design, and external peer review informed final revisions.

The structure ensures alignment between content, learning outcomes, and the qualifications to be awarded.

Evidences/Indicators

- o Programme Curriculum and Syllabi
- o Curriculum Map
- o Methodology for Planning and Developing Educational Programmes
- o Comparison with international programmes
- o SER Section 1.4
- o Interviews results

Recommendations:

-

Suggestions for the Programme Development

-

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

Each academic course has clearly defined learning outcomes aligned with the programme learning outcomes. Course content, teaching methods, and assessment components are appropriate for the level and ensure achievement of intended outcomes.

Credit allocation and workload distribution are justified and consistent with course complexity. The ratio of contact to independent hours is appropriate and aligned with ECTS principles.

Study materials include up-to-date international textbooks, scientific articles, and access to electronic databases, ensuring alignment with modern achievements in dentistry.

Assessment methods are varied and appropriate, including OSCE, OSPE, Mini-CEX, DOPs, written exams, and practical evaluations.

The panel finds the academic course structure to be fully compliant with accreditation requirements.

Evidences/Indicators

- o Syllabi and course descriptions
- o Curriculum Map
- o Course learning outcomes assessment results
- o Teaching materials and library resources
- o Interview results with university authorities
- o SER Section 1.5

Recommendations:

-

Suggestions for the Programme Development

- o All syllabi were recently developed and reviewed during programme preparation, external peer evaluation, and internal QA checks; however, the full annual review cycle has not yet occurred because the programme has not enrolled students. Interviews confirm that the institution is prepared to implement regular syllabus reviews once the programme becomes operational.

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, Adequacy 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

The expert panel reviewed the programme documentation and conducted interviews with the Rector, Programme Chair, representatives of the International Office, and other relevant stakeholders to evaluate compliance with Criteria 2.1.

In GIU university, dentistry programme admission requirements are clearly defined within the programme documentation and are generally aligned with the national legislation governing admission to higher education institutions. The programme specifies admission through the Unified National Examinations, mobility procedures, and admission without the Unified National Examinations in accordance with the applicable legal framework. The programme admission requirements incorporate the minimum English language competency recommended by the Subject Benchmark Statement for Dentistry, requiring applicants to demonstrate English language proficiency at a minimum B1 level.

During the interviews, the Programme Chair and representatives of the International Office confirmed that applicants who do not possess an internationally recognized English language certificate are required to pass an internal English language examination administered by the GIU university. The panel was informed that, considering potential visa-related constraints, the university plans to conduct the internal English language examination online. The examination will include both written and oral components to assess applicants' language competence. It was further explained that applicants who do not successfully demonstrate the required level of English language proficiency will not be eligible for admission to the programme. This approach contributes to the transparency, accessibility, and fairness of the admission process for international applicants.

The programme documentation also presents programme-specific admission requirements, including subject prerequisites for applicants entering through the Unified National Examinations. These requirements are appropriate for a Dentistry programme and are consistent with the expected entry-level knowledge required for successful achievement of the programme learning outcomes.

During the interviews, the panel was informed that the development of the English-language Dentistry programme was preceded by labour market analysis and consultations conducted by a multidisciplinary working group established by the university. The programme has been designed with a strategic focus on attracting international students, particularly from China, Thailand, Bangladesh, and India, and the university has developed admission procedures intended to support this target group.

The panel noted that the programme plans to admit approximately 30 students annually, resulting in a projected total enrolment of approximately 150 students across the five-year programme. However, although requested during the accreditation process, documentary evidence supporting student body planning and the rationale for determining the planned student intake was not provided to the expert panel. Consequently, the panel was unable to fully evaluate the methodology used to determine the proposed enrolment capacity in relation to the available academic, clinical, infrastructural, and human resources.

Overall, the programme admission procedures are transparent, publicly accessible, and adequately described within the programme documentation. Nevertheless, additional documentary evidence supporting student body planning would further strengthen the justification for the proposed admission capacity.

Evidences/Indicators

- GIU Dentistry Programme documentation;
- Course syllabi;
- Self-Evaluation Report (SER);
- Interview results.

Recommendations:

- The panel recommends developing and documenting a student body planning methodology that considers the specific characteristics of the Dentistry programme, institutional resources, and the university's strategic vision, in order to ensure the sustainable implementation and smooth administration of the educational process

Suggestions for the Programme Development

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Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
2.1 Programme Admission Preconditions	Substantially

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

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

As the GIU Dentistry programme is newly established, there is currently no historical evidence regarding the implementation of the programme, student achievement, or the effectiveness of mechanisms related to the development of practical, research, and transferable skills in dentistry. Therefore, the panel's evaluation was based on the programme documentation, the Self-Evaluation Report, course syllabi, interviews with relevant stakeholders, and supporting documentation.

The programme has been designed to ensure the progressive development of students' professional competencies through an integrated curriculum consisting of theoretical, preclinical, clinical, research, and public health components. The curriculum comprises 300 ECTS, including general education, biomedical sciences, preclinical and clinical dentistry, research-oriented courses, public health, and elective courses. The programme documentation indicates that students progressively acquire theoretical knowledge, simulation-based practical skills, and clinical competencies through laboratory exercises, supervised clinical practice, role-play activities, and evidence-based learning approaches. The curriculum also incorporates dedicated research courses, including Academic Writing, Scientific Research Methods, Epidemiology and Biostatistics, and Evidence-Based Dentistry, supporting the development of research competencies and critical appraisal skills.

According to the Self-Evaluation Report and programme documentation, practical training is organised through simulation-based education, university facilities, and clinical placements in affiliated healthcare institutions. The university further stated that each clinical syllabus is supported by a clinical practice logbook intended to document students' clinical activities, supervisor feedback, and competency development.

However, during the review of individual course syllabi, particularly within the clinical dentistry disciplines, the panel noted that the planned practical component described in the programme documentation is not consistently reflected at the syllabus level. Although clinical courses define learning outcomes requiring students to examine patients, establish diagnoses, and perform treatment under supervision, the syllabi do not consistently specify the minimum

number of patient-based clinical procedures required for the achievement of competencies. For example, the Semester X course Practice in Therapeutic Dentistry states that students should examine patients, establish diagnoses, and provide treatment under supervision. The syllabus also identifies chairside teaching as one of the principal teaching methods. However, the assessment system primarily consists of quizzes, clinical case analyses, presentations, role-play, a midterm examination, and an OSCE, while no assessed patient-based clinical procedures or minimum clinical procedural requirements are specified as prerequisites for progression to the final assessment. Consequently, the panel was unable to identify documented mechanisms ensuring that all students achieve an equivalent level of clinical experience through direct patient care before completing the final practical exam. Furthermore, the completion of a defined minimum number of supervised clinical procedures is not established as a prerequisite for eligibility to undertake the final examination. As Practice in Therapeutic Dentistry represents one of the final clinical courses within the programme, the panel considers that explicit documentation of minimum patient-based clinical requirements would strengthen the consistency of competency-based clinical education and provide objective evidence that programme learning outcomes have been achieved prior to graduation.

During the interviews, the university confirmed that clinical training will also be conducted in external dental clinics undersigned cooperation agreements. Nevertheless, the panel noted that documented procedures describing the monitoring and evaluation of students' learning experiences, achievement of competencies, and quality assurance during external clinical placements were not sufficiently demonstrated. In addition, no formal institutional procedure was presented describing how students who miss a significant part of a clinical rotation due to justified reasons (e.g., illness) would recover missed clinical competencies through individual study plans or compensatory clinical activities.

Overall, the programme demonstrates an appropriate conceptual framework for the development of practical, research, and transferable competencies. However, further alignment between the programme-level documentation and individual course syllabi, together with clearer documentation of clinical competency requirements and monitoring

mechanisms, would strengthen the implementation of the practical component and ensure consistent achievement of the intended programme learning outcomes.

The panel noted that this issue was consistently identified across the reviewed syllabi within the dentistry disciplines. While the programme documentation emphasises the development of practical clinical competencies, the individual course syllabi do not consistently define minimum patient-based clinical procedures or practical competency requirements necessary to ensure uniform achievement of programme learning outcomes.

The panel noted that the programme provides a structured and progressive approach to the development of research competencies. Research skills are integrated throughout the curriculum, beginning with Academic Writing, followed by Methods of Scientific Research, Epidemiology and Biostatistics, and Evidence-Based Dentistry, enabling students to progressively develop competencies in scientific reasoning, research methodology, critical appraisal of scientific literature, and evidence-based clinical decision-making.

The reviewed syllabi demonstrate that students are expected to acquire competencies in research ethics, literature searching, research design, epidemiological methods, statistical analysis, critical evaluation of scientific evidence, and interpretation of research findings. The courses also promote the application of evidence-based principles in clinical decision-making through case analysis, scientific discussions, and research-oriented assignments. Furthermore, the assessment strategy includes research papers, presentations, clinical case analyses, and written examinations, providing students with opportunities to demonstrate scientific reasoning, critical thinking, literature appraisal, and communication skills. The panel considers that the curriculum provides an appropriate framework for the development of research competencies expected from undergraduate dental students and supports the principles of evidence-based dentistry.

The programme has established cooperation agreements with seven affiliated dental clinics that are intended to support the implementation of the clinical practice component. During the accreditation visit, the expert panel visited two of these clinical sites to assess their suitability as practice environments. The findings related to the quality of the clinical learning environment are presented under the relevant accreditation standards.

The programme also demonstrates a commitment to internationalization through cooperation agreements with international partners, including Waseda Medical College and Waseda Dental Clinic. According to the reviewed documentation, these agreements provide opportunities for student and staff mobility, joint research activities, academic exchange, participation in international initiatives, development of joint educational activities, organization of scientific meetings and conferences, and short-term professional development programmes. Such partnerships have the potential to support the internationalisation of the Dentistry programme and contribute to the development of students' academic, research, and professional competencies.

Overall, the panel considers that the established national and international partnerships provide an appropriate framework to support the achievement of the programme learning outcomes, particularly in relation to clinical education, academic cooperation, research activities, and international mobility.

Evidences/Indicators

- Self-Evaluation Report (SER);
- Course syllabi;
- Memoranda of Understanding (MOUs) and clinical practice agreements/contracts with affiliated healthcare institutions;
- Interview results.

Recommendations:

- The panel noted that the reviewed clinical dentistry syllabi do not consistently specify the minimum number of patient-based clinical procedures required for the achievement of practical competencies. The panel recommends defining minimum clinical procedural requirements for each clinical course and establishing their successful completion as a prerequisite for eligibility to undertake the final assessment.
- The panel recommends establishing a structured system for supervision, monitoring, documentation, feedback, and evaluation of students' clinical performance during external placements.
- The panel recommends developing a policy that defines individual study plans, compensatory clinical activities, and competency recovery mechanisms to ensure that all required practical skills and programme learning outcomes are achieved before course completion.

Suggestions for the 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 using 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

As the GIUs Dentistry programme is newly established, there is currently no historical evidence regarding the implementation and effectiveness of the teaching and learning methods. Therefore, the panel's evaluation was based on the programme documentation, the Self-Evaluation Report, course syllabi, and the information obtained during the accreditation interviews.

The panel noted that the GIU Dentistry programme has adopted a student-centred educational approach and incorporates a broad range of contemporary teaching and learning methods appropriate for a one-cycle Dentistry programme and aligned with the intended programme learning outcomes. The programme documentation demonstrates that the curriculum has been developed in accordance with the Subject Benchmark Statement of Dentistry and integrates modern educational approaches that support the progressive development of theoretical knowledge, clinical reasoning, communication, professionalism, and critical thinking.

The reviewed syllabi consistently include diverse teaching and learning methods, including interactive lectures, seminars, discussions, demonstration, problem-based learning (PBL), case-based learning (CBL), role-playing, simulation-based learning, chairside teaching, clinical case analysis, Mini-CEX, DOPS, and OSCE/OSPE. The panel observed that these methods are appropriately linked to the intended learning outcomes and assessment strategies, promoting active student participation, clinical reasoning, analytical thinking, communication skills, teamwork, and evidence-based decision-making.

During the interviews, academic staff demonstrated a clear understanding of contemporary student-centered teaching approaches and confirmed that they had participated in

professional development activities related to modern teaching methodologies. The panel considers this to be an important prerequisite for the successful implementation of the programme and the achievement of the intended learning outcomes.

The programme is designed for international students and is delivered entirely in English. During the interviews, the university explained that international students will receive academic and language support where necessary through additional language courses, facilitating their successful integration into the educational environment.

The panel noted that the programme incorporates electronic educational resources to support the teaching process.

Overall, the panel considers that the planned teaching and learning methods are appropriate for the level and objectives of the programme and are consistent with the requirements of the Subject Benchmark Statement of Dentistry.

The panel noted that contemporary assessment methods, including DOPS, Mini-CEX, OSCE and OSPE, are described within the programme documentation and course syllabi. However, following the panel's request, the university did not provide the corresponding assessment documentation (e.g., assessment forms, evaluation rubrics, scoring criteria, or examiner guidelines). Consequently, the panel was unable to verify the standardization and implementation of these assessment methods.

Evidences/Indicators

- Self-Evaluation Report (SER);
- Course syllabi;
- GIU Dentistry program;
- Interview results;

Recommendations:

- The panel recommends developing and documenting standardized assessment instruments, evaluation rubrics, and examiner guidelines for workplace-based and clinical assessment methods (e.g., DOPS, Mini-CEX, OSCE, OSPE and etc.) to ensure transparent, objective, valid, and consistent assessment of students' competencies.

Suggestions for the Programme Development

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Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
2.3. Teaching and learning methods	Complies

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 evaluation system is transparent and divided into 5 positive categories grading from excellent to sufficient 91-51 and two negative categories (fx and f)

To pass a course, a student must achieve a total score of at least 51 points which is calculated by combining the points earned from both midterm and final assessment after meeting the minimum thresholds set for each. Course lecturers determine the distribution and which of these components based on the specific needs of the subject, typically using a 70/30 or 60/40 split between midterm and final evaluations.

For students who do not pass on the first try but achieve an FX (41-50) the university provides an opportunity to retake exam within the same semester scheduled at least 5 days after final results. The score from this additional exam serves as the final grade for the course. If the final score remains under 52 after this attempt, a grade of F is recorded.

The academic year runs on a 18-week semester schedule. Midterm exams take place during week 8 and 9, final exams are held in week 17 and 18, and the final week is dedicated to retake the exam.

All academic information, course registration, syllabi and grades are accessible to students remotely via an electronic portal using individual login credentials.

The program combines direct and indirect methods to evaluate learning outcomes. Direct evaluation assesses academic performance within individual courses using tailored formats such as quizzes, multiple-choice tests, short answer questions, clinical case presentations, and research papers. In practical settings, skills are measured through problem-based learning, case-based learning, OSCE, and OSPE examinations.

Indirect evaluation relies on surveys and interviews with students, graduates, lecturers, and employers. The quality assurance team and program managers review this data to make curriculum adjustments. This feedback loop leads to practical updates, such as modifying teaching methods, adjusting course workloads, changing evaluation formats, updating textbooks, or revising course prerequisites.

Evidences/Indicators

- Self-Evaluation Report (SER)
- Interview results

Recommendations:

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Suggestions for the Programme Development

-

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
2.4. Student evaluation	Complies

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.

3.1 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 Programmer's Compliance with the Requirements of the Component of the Standard

Georgian International University has built a solid, functional network of services aimed at assisting students throughout their academic journey. At the beginning of each academic year, the university conducts structured informational sessions and presentations. These meetings are highly useful because they clarify complex academic procedures such as semester registration, Credit accumulation, specific rules of grading and evaluation system.

Beyond these introductory meetings, student consulting is deeply integrated into the daily routine of the students – they can arrange a pre-determined schedule for individual consulting hours with course leaders. This ensures that students who are struggling with specific subjects or those who simply want to improve their academic performance have direct and regular access to their professors.

University has centralized online platform which is available both in Georgian and English languages. This bilingual setup successfully removes language barriers allowing international students to access services starting from checking their schedules and reserving study spaces to managing extracurricular activities. It also allows students to establish student clubs and request institutional fundings which encourages student-led initiatives.

The university frequently hosts career developmental events where representatives from local and international companies offer practical masterclasses and share professional insights. This give students a unique opportunity to network directly with potential employers. Additionally, the university's online platform includes a CV generator that helps students create professional resumes matching international standarts.

Apart from academic events, The University also supports extracurricular activities such as: Sports and cultural projects, field trips and students are actively involved in annual Student Festivals.

GIU shows strong results in terms of internationalization and promotion of exchange programs. The student support services work in close partnership with the international relations office to make sure that everyone is fully aware of international opportunities. Information about studying abroad is actively distributed, resulting in successful student participation in Erasmus+ projects in Slovakia, China, Hong Kong.

The "Buddy System" pairs incoming students with student mentors. This program is effective because it provides immediate, informal support for daily navigation, helping new arrivals adopt smoothly to both the country and the university culture. Additionally, the student self-government includes Ombudsman Unit which serves as an essential safety net, giving students an independent internal space to report any rights related issues or unfair treatment.

University is closely following students' voices sending them feedback questionnaires at the end of every academic semester taking into consideration students' recommendations and issues.

Evidences/Indicators

- Self-Evaluation Report (SER);
- Interview results;

Recommendations:

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Suggestions for the Programme Development

- The establishment of a dedicated professional counseling service for psychological consultation is essential. This initiative would provide critical mental health support, significantly enhancing the well-being of the diverse student population, particularly international students.
- The university should develop tailored career symposia and specialized masterclasses specifically for dentistry programs, ensuring that all fields of study receive equal professional networking opportunities.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
3.1 Student Consulting and Support Services	Complies

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

- Not applicable.

Evidences/Indicators

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[Recommendations:](#)

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[Suggestions for the Programme Development](#)

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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

- Programme staff consists of qualified persons, who have necessary competences in order to help students to achieve the programme learning outcomes.
- 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

The programme is delivered by 51 staff in total: 30 academic staff (5 professors, 11 associate professors, 12 assistant professors and 2 assistants) and 21 invited specialists. According to the information provided, 11 of the academic staff are affiliated. The HEI applies a “Staff Selection Rule” (approved 30.01.2026) with detailed qualification requirements: professor – at least 6 years of pedagogical and 9 years of clinical experience; associate professor – at least 3 and 5 years respectively; assistant professor – at least 3 years of clinical experience; invited staff – at least 3 years of clinical experience; and, for English-medium teaching, English at B2 level or at least 3 years of teaching/professional experience in a foreign language. Academic activity is measured through a points-based system: lecturers are required to enter their activities into the self-evaluation form, and the results feed into decisions on academic positions; the absence of activity may, in principle, lead to termination of the contract (no precedent so far). During the site visit it could not be established that a clear minimum threshold (range), below which activity is considered insufficient, has been defined. Overall, the human-resource framework and qualification requirements are in place; the qualification of staff assigned to clinical/field courses and their total workload across institutions should continue to be monitored as the programme is implemented.

Category	Number of Programme Staff	Incl. staff with sectoral expertise	Incl. staff holding PhD in the sectoral direction	Among them, affiliated staff
Total number of academic staff	30	8	3	11
– Professor	5	3	3	.
– Associate Professor	11	0	0	.
– Assistant-Professor	12	3	0	.
– Assistant	2	2	0	.

Visiting Staff	21	8	0	—
Scientific Staff	0	0	0	—
Including International Staff	0	0	0	0

The Programme Head, Magda Sigua (Assistant Professor), is a practicing dentist with relevant field experience: according to the submitted documentation, since 2023 she has worked as a dentist (therapist-dentist, oral surgery) at the dental clinic of the Medical Centre of Ivane Javakhishvili Tbilisi State University and has taught as a specialist at its Department of Prosthetic Dentistry and Implantology. On the programme she teaches core dental courses (therapeutic, pediatric and surgical dentistry), which is consistent with the requirements for the programme head.

Evidences/Indicators

- Self-evaluation report; Staff Selection Rule (30.01.2026); list of implementing personnel; staff CVs; workload scheme.
- Interviews with academic and invited staff during the site visit.

Recommendations:

-

Suggestions for the Programme Development

- Define and document the minimum threshold (range) of the points-based academic-activity system, so that the criterion for “insufficient activity” is transparent.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
4.1 Human Resources	Complies

[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

- Not applicable

Evidences/Indicators

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Recommendations:

-

Suggestions for the Programme Development

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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

The HEI has institutional mechanisms for professional development: a staff-evaluation rule, a PDCA cycle, a Professional Development Centre and a Research Support Centre, a peer-reviewed journal, and regular conferences. Invited staff participated in the dentistry-specific WFME/AMEE training held in May 2026. During the site visit, some lecturers were not familiar with the staff-evaluation system (student feedback and peer review). Involvement in updating syllabi and programme content was described as uneven: some staff confirmed their participation, while one invited member noted that the assessment methods were not yet known to her and that she would familiarise herself with them at a later stage.

Evidences/Indicators

- Quality assurance policy; staff-evaluation rule; May 2026 dentistry (WFME/AMEE) training materials.
- Interviews with academic and invited staff during the site visit.

Recommendations:

-

Suggestions for the Programme Development

- Strengthen the communication of the staff-evaluation system (student feedback and peer review) to all lecturers, including invited staff.
- Ensure the timely involvement of all teaching staff in the development and updating of syllabi and assessment methods, so that each lecturer is aware of the assessment approach in advance.

Evaluation

Please, evaluate the compliance of the programme with the component

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

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

The HEI's own infrastructure is strong at the simulation/pre-clinical stage: a phantom/pre-clinical laboratory (three spaces, including one with 12 phantoms), two OSCE rooms, pathology/microbiology/histology and anatomy-physiology laboratories, two simulation rooms, an e-learning system, and a library with printed and electronic resources, including international databases. This campus infrastructure was reviewed during the site visit and is adequate for the simulation/pre-clinical stage.

The principal consideration concerns the clinical base for work with patients. At present the university does not have its own dental clinic (with dental units); the strategy envisages establishing its own base in 2027, which is a positive commitment that is not yet realized and is not yet reflected as a dedicated capital item in the budget. Clinical training is therefore currently based on partner clinics. The Aversì clinic serves non-dental modules (paediatrics, child neurology, internal medicine). The extent to which students provide treatment to patients under supervision, as distinct from observation, is not clearly established: it is not directly specified in the content of the partner agreements, and the interviews did not resolve

the point, as differing views were expressed. Given the importance of supervised hands-on practice for a one-cycle DMD programme, this aspect would benefit from clarification. In addition, the partner clinics visited do not have dedicated space for the theoretical/seminar and assessment (e.g. OSCE) components; the HEI clarified that these are conducted on the university campus, which is acceptable provided the partner bases are used for supervised clinical practice, though the allocation of components between campus and clinical base would benefit from clear documentation.

Evidences/Indicators

- Self-evaluation report; strategy (own base envisaged in 2027); partner-clinic agreements; library resources list.
- On-site inspection of the campus facilities and clinical bases; interviews.

Recommendations:

- In the partner-clinic agreements, clarify and document the extent to which students provide supervised treatment to patients, as distinct from observation, and provide agreements with terms covering the full clinical cycle.
- Confirm the actual capacity of the clinical base (patient flow and supervisor-to-student ratio) in view of the planned growth of the student cohort.

Suggestions for the Programme Development

- Document clearly the allocation of the theoretical/assessment components (conducted on campus) and the supervised clinical practice (conducted at partner clinics).
- Once feasible, reflect the planned 2027 dental base in the relevant planning documents.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
4.4 Material Resources	Substantially

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

A five-year financial projection (2026–2031) is provided: 30 new students per year (147 by year five), tuition of USD 5,000; year-one revenue of GEL 605,000 (including a GEL 200,000 investment), expenses of GEL 449,800 and an operating profit of GEL 155,200; teaching inventory of GEL 160,000 (then approximately 35,000 per year); the “student practice/curation” line appears from year three onwards. The budget document is titled “budget of the bachelor programme”, which is a mechanical/technical inconsistency, since the programme is a one-cycle, 300-ECTS (Level VII) programme; it would be appropriate to correct this labelling. Further points for attention include: the realism of the (relatively low) salary lines once the programme is fully operational; the alignment of the practice/curation costs with the point in the curriculum at which patient contact actually begins; and the fact that the 2027 commitment to establish an own clinical base is not yet reflected in the budget. The interviews indicated that the founders' involvement was mainly related to defining their own role rather than to the content-level development of the programme. Overall, the financial model is profitable and internally coherent.

Evidences/Indicators

- Programme budget document; strategy; self-evaluation report.
- Interviews with the administration and founders during the site visit.

Recommendations:

-

Suggestions for the Programme Development

- Add a sensitivity analysis for a low-enrolment scenario.
- Align the timing of the “practice/curation” budget line with the actual start of patient contact in the curriculum.
- Once feasible, reflect the planned 2027 dental base in the budget with a concrete capital cost and timeline.
- Correct the mechanical labelling of the budget document so that it reflects the one-cycle status of the programme (rather than “bachelor”).

Evaluation

Please, evaluate the compliance of the programme with the component

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

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

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

Quality assurance at the Georgian International University (GIU) is regulated by the quality assurance policy document. The quality assurance system is an integral part of management of the University and whole process of quality assurance is coordinated by the Quality Assurance Office of the University (<https://giu.edu.ge/en/quality>) and Vice-Rector for Quality Assurance Affairs. The university's quality assurance system includes a combination of quality policies, procedures, instruments, and monitoring mechanisms, which contributes to the achievement of the goals defined by the university's mission and strategic development plan. Internal quality evaluation is conducted once a year. Depending on the evaluation needs, the university additionally determines the evaluation of objects and periods. Based on the analysis, the quality service develops relevant conclusions and recommendations. Based on the recommendations, the review and implementation of the recommendations is carried out with the involvement of relevant stakeholders, and at the final stage, the quality service evaluates the implementation of the recommendations.

Quality assurance at the University is a continuous process and is based on the widely used "PDCA" method, also known as the Deming Cycle, which includes planning, implementation, checking, and action. Quality assurance and evaluation apply to all key areas of the University's activities and include the following: Educational Programmes; Student-Centred Teaching, Learning and Support Mechanisms; University Staff; Scientific Research Activities and Internationalisation; Management Effectiveness, Information Management; Material-Technical, Information and Financial Resources; Effectiveness of Quality Assurance.

To organize the self-assessment process of the dentistry program, in February 2026 a self-assessment group was created at the first stage by the order of the rector. The group initially was composed of Rector, Vice-Rectors, representatives of the University administration, and heads of different administrative-support units. The self-evaluation group got acquainted with the regulatory documents of the institution and the accreditation process. The group's priority was the compliance of the program with regulatory documents, as well as the compatibility of the program with the institution's mission and strategic development plan. At the second stage, academic and invited personnel were selected for the preparation of the educational program. Program heads, academic and invited personnel along with specialists in the field/employers, and students from related specialties were also involved in the self-evaluation process.

The self-assessment group initially analyzed labor market need. Then, a benchmarking/comparison document with similar programs was developed. During the self-assessment and program preparation process, the staff involved in the program implementation received consultations from the institution's administration and representatives of the quality assurance service. Several training courses were conducted for the staff involved in the preparation of the dentistry program with the participation of local and foreign specialists. During the interviews, it was noted that since the beginning of the self-assessment process, the establishment of a dental clinic has been ongoing in parallel. The diplomas of university graduates will be recognized in China. An agreement was signed between the governments on this issue last year.

The self-assessment group was guided by the university's quality assurance regulatory documents and the methodology for measuring learning outcomes. The program is new, and neither direct nor indirect assessment of learning outcomes has been implemented yet. Once the program is implemented, an assessment will be conducted. The program director, the school council, the quality service, and the university board of governors are responsible for the content of the program.

Based on the self-evaluation report submitted by the university, the enclosed documents and site-visit interviews it is evident that there is cooperation between representatives of the quality assurance service and representatives of the self-assessment group/personnel involved in the implementation of the program as well as a multi-component assurance system. Nevertheless, as a result of the self-assessment process, certain shortcomings of the educational program remained a challenge (see details in the description of standards 1-4). It is necessary to effectively use existing mechanisms and develop specific mechanisms tailored to medical programs. It is recommended to strengthen the quality culture in the institution by sharing existing mechanisms with all involved stakeholders, and fully implement existing rules, which will help identify and prevent challenges in the self-assessment process. In addition, it is desirable to add specialists to the quality assurance service for medical and dental programs who would also have specialized knowledge in the field.

As revealed during interviews with the institution's administration and representatives of the self-assessment group, as well as through a study of the submitted documentation, the university occupies a different niche in the Georgian higher education market - the university operates under the umbrella of the China International Education Group. Georgia International University (GIU) is the only university in Georgia, which since 2020 is a member of a large international educational holding – [China International Education College](https://giu.edu.ge/en/history/). Several large universities and educational institutions worldwide operate under the umbrella of the group. China International Education Group is headquartered in Hong Kong. During the 22 years of activity in the field of education, the group has established many vocational, pre-school, secondary, and higher education institutions. Various educational institutions of the mentioned group are represented in: China, USA, Japan, Singapore, Malaysia, Georgia and others <https://giu.edu.ge/en/history/> .

The presented program does not include an electronic/distance learning component. During interviews with students, academic/visiting/administrative staff, it was determined that the institution has an online teaching/learning practice for other educational programs. The university has adopted regulations to administer electronic/distance teaching and adapted internal quality assurance mechanisms for the distance/electronic/hybrid study process.

Evidences/Indicators

- o Normative documents of GIU <https://giu.edu.ge/en/normatic-documents/>
- o University Charter
- o Strategic planning methodology
- o Methodology for planning students contingent
- o Human Resources Management Politics
- o Legal acts regulating the educational process <https://giu.edu.ge/normatic-documents/>
- o Rules for organizing and implementing e-learning <https://giu.edu.ge/wp-content/uploads/2025/06/planing-students-contigent-ENG.pdf>
- o Rules and conditions for affiliation of academic staff
- o Strategy for the development of scientific activities
- o Internationalization Policy
- o Management Efficiency Monitoring Mechanisms and Evaluation System
- o Statute of the Governing Council
- o Program Planning and Development Procedures
- o Quality Assurance Policy
- o Strategic documents (2025-2031 Development Strategy; 2025-2027 Annual Action Plan; Strategic Planning Methodology) <https://giu.edu.ge/en/strategic-documents/>
- o Annual reports <https://giu.edu.ge/en/annual-reports/>
- o Scientific reports <https://giu.edu.ge/en/scientific-reports/>
- o Rule for evaluation of academic and invited staff
- o Procedure for Planning, Designing, Developing, and Discontinuing an Educational Program
- o Results of the surveys of graduates and employers (similar programs)
- o Results of the survey of students and personnel (similar programs)
- o Annual report on the implementation of educational program (similar programs)

- o Quality Assurance report 2025
- o Student/graduate/employer/staff survey forms;
- o Results of classroom observation and evaluation of lecturers by peers (similar programs)
- o Academic/scientific and invited staff teaching evaluation results (similar programs)
- o Satisfaction Survey results (students, alumni, academic and administrative staff) conducted by higher education institution (similar programs)
- o Program evaluation/monitoring results by the Faculty/University QAS (similar programs)
- o Academic/scientific and invited staff research activities evaluation results (similar programs)
- o Evaluation results of research paper/bachelor thesis/master thesis supervisors by students (similar programs)
- o Evaluation results of program learning outcome (similar program)
- o Reports on program development (similar programs)
- o Analyses of students' academic performance (similar programs)
- o Results of Evaluation of Educational Program by QA (similar programs)
- o External evaluations of foreign and local experts/ professionals
- o Mechanisms for evaluating the learning outcomes of the program
- o Comparative analysis with analogous programs/benchmarking
- o Educational program and syllabi
- o Site-Visit interviews
- o Self-evaluation report submitted by the university

Recommendations:

- It is recommended to strengthen the quality culture in the institution by sharing existing mechanisms with all involved stakeholders, and fully implement existing rules, which will help identify and prevent challenges in the self-assessment process.

Suggestions for the Programme Development

- o It is suggested to add specialists to the quality assurance service for medical and dental programs who would also have specialized knowledge in the field.

Evaluation

Please, evaluate the compliance of the programme with the component

Component	Evaluation
5.1 Internal quality evaluation	Substantially

5.2 External Quality Evaluation

Programme utilises the results of external quality assurance on a regular basis.

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

The external mechanisms for the evaluation of the quality of educational process are authorization and accreditation processes according to the Georgian Legislation: the external mechanisms for evaluating the implementation of the educational programme are based on the "Regulation on the Accreditation of Educational Programmes of Educational Institutions" and the "Regulation on the Authorization of Educational Institutions".

The University periodically submits information about educational programme to the legal entity under public law to the National Center for Education Quality Enhancement (NCEQE) in the form of a self-evaluation report in accordance with the established deadlines and forms. The personnel involved in the programmes consider the recommendations received by experts during authorization and accreditation and make appropriate changes to the program. The changes to be implemented in the programmes are discussed by the heads of the program and the staff involved in the programme.

The educational program "Dentistry" is a new program. The educational program incorporates external quality evaluation results. External collegial evaluations from foreign and local experts (Doctor from Waseda Dental Hygienist School, (Japan) and Head of Stomatology Department at Batumi Shota Rustaveli State University) are utilized.

In General, periodic external evaluation of the quality of the educational programme at the university is carried out with the involvement of graduates and employers. The results of the survey of industry professionals, partners, and other interested parties such as alumni are taken into account. The results of the analysis of the employer's requirements are also taken into consideration.

Evidences/Indicators

- Educational program and syllabi
- External evaluations of foreign and local experts/ professionals
- Document of comparative analysis with analogous programs/benchmarking document
- Quality Assurance Policy
- Program Planning and Development Procedures
- Normative documents of GIU <https://giu.edu.ge/en/normatic-documents/>
- Results of the surveys of graduates and employers (similar programs)
- Site-Visit interviews
- Self-evaluation report submitted by the university

Recommendations:

-

Suggestions for the 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

At GIU monitoring process is implemented on the basis of Quality Assurance Policy of the University which defines the mechanisms for realizing the principles of quality assurance policy. The planning, development, effective implementation, continuous improvement, and monitoring of educational programs are coordinated by both the university-level and faculty-level Quality Assurance Offices. The continuous monitoring process of the program the Quality Assurance Service of the Faculty/School, different structural units of the University and the program leaders are involved.

The monitoring mechanism of the study process is systematic, complex, and focused on learning outcomes of the study courses. The University analyzes the academic achievement/performance of students. For the assessment of the study courses The University conducts a student satisfaction survey. Several methods such as class observation, assessment of educational and exam materials, oversight of exams, and analysis of survey results are used in the monitoring process. At the end of every semester, GIY conducts students survey which includes a detailed assessment of each study course as well as scientific supervision.

Periodic evaluation of the educational programs involves assessment based on direct and indirect evidence. The University analyzes the results of the academic/invited/research staff

and students surveys, graduate surveys, employer surveys/focus groups results. Subsequently, the University uses the feedback received from stakeholders in the process of revising and improving the curriculum and individual components included in the educational program. Quality Assurance Service develops recommendations after the study process evaluation. The results of such evaluation are discussed and adopted at the governing structures of the University. Recommendations are sent to the structural units of the University for implementation.

As part of monitoring and evaluation of the program, the University also evaluates the achievement of the learning outcomes of the study courses and the program. In addition, analysis and evaluation of employer and graduate feedback, statistical data on graduate employment rates, and comparisons with similar programs in Georgia and abroad are conducted and documented. The University has in place academic staff assessment procedures that assess their involvement in pedagogical, scientific, and other university activities. The results of these assessments are considered in the selection process for academic staff. Internal quality assessment is conducted through the electronic platform.

To assess the effectiveness of the program, identify its strengths/weaknesses, and highlight trends, the University also conducts: an analysis of student enrollment, progression, and completion rates, and employment rates; periodic external (collegial) evaluation of the program, which involves a complete evaluation of the program by Georgian and/or foreign colleagues; lecture observation according to a specific schedule and pre-defined evaluation criteria; program analysis according to the best international practices in the field, the program is compared regularly based on the analysis of learning outcomes, goals, structure and identification of the best local and international practices.

Based on the analysis of the above-mentioned complex research results and indicators, the Quality Assurance Department assesses the efficiency of implementation of educational programmes and offers recommendations and suggestions to programme personnel for further development of the education programmes.

Evidences/Indicators

- Normative documents of GIU <https://giu.edu.ge/en/normatic-documents/>
- University Charter
- Strategic planning methodology
- Methodology for planning students contingent
- Legal acts regulating the educational process <https://giu.edu.ge/normatic-documents/>
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- Analyses of students' academic performance (similar programs)
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- External evaluations of foreign and local experts/ professionals
- Mechanisms for evaluating the learning outcomes of the program
- Comparative analysis with analogous programs/benchmarking
- Educational program and syllabi
- Site-Visit interviews
- Self-evaluation report submitted by the university

Recommendations:

-

Suggestions for the Programme Development

-

Evaluation

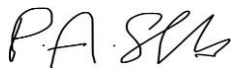
Please, evaluate the compliance of the programme with the component

Component	Evaluation
5.3. Programme monitoring and periodic review	Complies

Attached documentation (if applicable):

Chair of Accreditation Expert Panel

Full name, signature: Pouyan Aminishakib



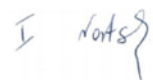
[07.16.2026](#)

Accreditation Expert Panel Members

Full name, signature: Elene Gigineishvili



Full name, signature: Ia Natsvlshvili



Full name, signature: Zurab Alkhanishvili

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Student Expert, Panel Member: Tsitsi Papunashvili

A handwritten signature in blue ink, featuring a stylized 'P' and 'A' with a long horizontal stroke extending to the right.