



ASIIN Seal & AMSE Seal

Accreditation Report

Medical Doctor programme - M.D.

Provided by: University of Georgia, School of Health Sciences

Version: 23 June 2023

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A About the Accreditation Process

Name of the degree pro- gramme (in original lan- guage)	(Official) English translation of the name	Labels ap- plied for ¹	Previous accredita- tion (issu- ing agency, validity)	Involved Technical Commit- tees (TC) ²				
დიპლომირებული მედიკოსის ერთსაფეხურიანი საგანმანათლებლო პროგრამა	Medical Doctor pro- gramme	ASIIN <i>,</i> AMSE	-	14				
Date of the contract: 14.01.2020 Submission of the final version of the self-assessment report: 15.09.2021 Date of the onsite visit: 5. – 7.10.2021								
at: Tbilisi, Georgia								
Peer panel:								
Anika Biel, MD, Physician for Urology Prof. Dr. Eka Ekaladze, Faculty of Medicine, Tbilisi State Medical University, Tbilisi								
Prof. Dr. Hans-Joachim Wagner, University of Tuebingen								
Paul Sorin Cotoi, University of Medicine, Pharmacy, Sciences and Technol- ogy, George Emil Palade of Targu Mures, Romania, student								
Representative of the ASIIN headquarter: DiplPhys. Rainer Arnold								
Responsible decision-making committee:								
ASIIN Accreditation Commission, AMSE Executive Committee								

¹ ASIIN Seal for degree programmes;

² TC: Technical Committee for the following subject areas: TC 14 – Medicine

Criteria used:

European Standards and Guidelines as of 15.05.2015

ASIIN General Criteria as of 28.03.2014

Subject-Specific Criteria of Technical Committee 14 – Medicine as of 20.09.2019

B Characteristics of the Degree Programmes

a) Name	Final degree (original/Eng- lish transla- tion)	b) Areas of Specialization	c) Corre- spond- ing level of the EQF ³	d) Mode of Study	e) Dou- ble/Joi nt De- gree	f) Dura- tion	g) Credit points/unit	h) Intake rhythm & First time of offer
Medical Doc- tor pro- gramme	Medical Doc- tor (M.D.)		7	Full time	no	12 Se- mester	360 ECTS	Fall and Spring / 2016/17

For the <u>Medical Doctor programme</u>, the University of Georgia (UG) has presented the following profile on its webpage:

"The mission of the school is to:

Ensure highly qualified medical and scientific personal in the context of global educational and scientific society, facing to the challenges and needs of the health care system/field; Work effectively and develop evidence-based value in the dynamically changing environment. To transform divers' students into locally relevant and globally competitive professional, with a passion for lifelong learning, personal and professional integrity and ethic of work and serve, with respect and advocacy for human differences

Vision

To be the nation's leading, prominent school dedicated to excellence in teaching, research and social accountability.

Goals:

- Increase the school's operational efficiency and strengthen academic quality by developing of educational programs and increasing of integration, applying for the international standards in quality strategies and documentation to be on in the line with national and international educational requirements.
- Develop the school's productivity and innovation in research by activating scientific work in priority areas recognized by the school, supporting and enriching our teaching, research and service missions.

³ EQF = The European Qualifications Framework for lifelong learning

- Attract and graduate students, who will contribute to the economic prosperity of the national and global communities by developing relationships with leading employers in the public and private sectors, Increasing the exposure of all stakeholders at school educational programs also, to help graduates achieve gainful and timely employment.
- Maintaining and improving cooperation at European and International level by improving partnership with international bodies.
- Develop school operational supporting services by strengthen the school's infrastructure and accountability."

C Analysis and Findings of Peers

1. Mission and Outcomes

Criterion 1.1 Statements of purpose and outcome

Evidence:

- Self-Assessment Report
- Webpage MD Programme: https://online.ug.edu.ge/programs/programs_full.php?programID%5b%5d=271&lang=eng
- Webpage University of Georgia, School of Health Sciences: https://www.ug.edu.ge/en/jan-skolis-shesakheb
- Sample Diploma Supplement
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The intended learning outcomes of the MD programme and the mission statement of the School of Health Sciences are mentioned in the Self-Assessment Report and published on the programme's webpage and respectively on the school's webpage. The intended learning outcomes are divided into the categories "Knowledge and Understanding", "Skills", and "Attitudes & Responsibility".

The aim of the MD programme is to prepare competent, compassionate, just, experienced medical doctors who will possess the necessary theoretical knowledge, practical skills and values to become a successful medical practitioner. They should be able to apply for clinical positions as junior doctors, participate in scientific and academic activities in Georgia, as well as in other countries.

In addition, graduates should be qualified to successfully continuing their medical education e.g. by enrolling in Masters or Ph.D. programmes.

Finally, graduates should be ready to continuously improve their knowledge and skills and to facilitate improvement of health and wellbeing of local communities as well as global society.

The intended learning outcomes define competencies, skills and attitudes required for future doctor, which should be achieved by the MD programme. They are designed to answer and adapt to the recent developments in medicine and healthcare in general, as well as in medical education. Behaviour features of society and changing demographics in medicine and healthcare related in particular to increasing cardiovascular diseases and elderly populations are also taken into account.

During the audit, the peers discuss with UG's management why the new MD programme was implemented and why it is taught in English. The peers learn that UG as a private university, has to take the market for higher education into account. The management realised that there is growing demand for medical programmes but not enough study places are available all over the world. Since the market for higher education in Georgia is rather small, the goal is to attract international students. To this end, the MD programme is taught in English. The MD programme is attractive for international students, because the living expenses in Georgia and the tuition fees are quite low in comparison to medical programmes in other European countries.

Criterion 1.2 Participation in the formulation of mission and outcomes

Evidence:

- Self-Assessment Report
- Discussions during the audit

Preliminary assessment and analysis of the peers:

As described in the Self-Assessment Report, internal (programmes coordinators, lecturers, and students) as well as external stakeholders were involved in formulating and further developing the mission statement and the intended learning outcomes. They were last modified in 2019 in accordance with the recommendations developed by the LEPL National Center for Educational Quality Enhancement of Georgia (NCEQE) based on the results of the visit of an expert group this also included the consideration of the requirements of the WFME standards for basic medical education.

The peers confirm that there is a well described and established process for designing and validating the objectives and learning outcomes. All relevant stakeholders are involved in the process.

Criterion 1.3 Institutional autonomy and academic freedom

Evidence:

- Self-Assessment Report
- Discussions during the audit

Preliminary assessment and analysis of the peers:

As a private university, UG is able to formulate and implement policies and degree programmes according to their own agenda, this includes the design of the curriculum and use of the allocated resources necessary for implementation of the curriculum. Academic freedom is one of the main principles of management, which is declared in § 3 of the Management Regulations of the University of Georgia.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 1:

UG does not comment on this criterion in its statement.

The peers consider criterion 1 to be fulfilled.

2. Educational Programme

Criterion 2.1 Curriculum model and instructional methods

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Webpage MD Programme: https://online.ug.edu.ge/programs/programs_full.php?programID%5b%5d=271&lang=eng
- Webpage University of Georgia, School of Health Sciences: https://www.ug.edu.ge/en/jan-skolis-shesakheb
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The MD programme was established in 2016, initiation and development included staff members, independent experts, and potential employers in the relevant field. For example, interviews with managers of medical facilities were conducted. The interviews showed an increased demand for skills in working with information and information technologies and experience in working in a clinical environment. In addition, a survey among employers was conducted. According to the results, the employers indicated that there is an increasing demand for qualified doctors.

In addition, the programme coordinator and a QA-officer paid a visit to the University of Maastricht (Netherlands) and a comparative analysis of similar programs of two local higher education institutions (Ivane Javakhishvili Tbilisi State University and Davit Tvildiani Medical University) was also taken into account during the design of the MD programme.

Due to the feedback of students and potential employers, the curriculum of the MD programme was modified. The new integrated model will be implemented in 2022. It is important to notice, that the report focuses on the new modified curriculum, which encompasses 360 ECTS points and includes 6 years of teaching. It consists of compulsory (333 ECTS points) and optional (27 ECTS points) components.

The curriculum consists of the following areas: basic / biomedical, social and behavioural, clinical sciences, and development of clinical and scientific skills. The core courses of the first semesters are designed to provide students with a solid foundation in scientific principles and evidence-based inquiry that they can build on throughout their studies, along with courses on existing and emerging technologies that are likely to impact the future of medicine. In addition, students are introduced to personalised patient care and can begin to explore their personal interests with a mentor through the modules "Scientific Research and Project Course I + II".

The clinical core courses (from the fourth to the sixth year of studies) consist of required interdepartmental clerkships and clinical elective. Clinical teaching provides intensive clinical experiences in the hospital, ambulatory clinics, emergency room, labour and delivery suite, and operating rooms. During the clinical core courses, students participate in history-taking, physical examination and assessment, development of a differential diagnosis, diagnostic decision-making, interpretation of laboratory results, treatment planning, transitions of care, and re-evaluation of patient status after treatment is initiated. These activities are designed to provide medical students with opportunities to develop skills in lifelong self-directed learning, critical analysis of evidence, and clinical problem solving.

Possible thematic areas of the research project are Laboratory (Basic) Science Research, Clinical Science Research, Public Health and Epidemiology. Non-clinical electives in the first, sixth, and tenth semesters supplement the required courses and provide additional experiences that allow for career exploration and support the diverse interests of students.

The clinical electives in the twelfth semester are designed to foster the clinical skills as well as broaden the overall medical education of each student. It serves the purpose of career exploration and prepares students for graduate medical education.

The programme has the following modes of teaching: lectures, small group teachings, clinical skills sessions, simulation sessions, clinical rotations, tutorials, and seminars. Audiovisual aids and e-learning supplement the attendance-based classes. These methods require students to gather information, solve problems, make reports, and discuss and present the results.

According to Georgian legislation, graduates of the MD programme are not allowed to run an independent medical practice. She/he can be employed as junior doctors, performing the duties of a doctor according to the instructions and under the responsibility of an independent medical practitioner. However, graduates can complete a postgraduate vocational training programme in order to acquire the right to work as independent medical practitioners after passing a state certification examination. Alternatively, they can carry out research and teaching activities in the theoretical fields of medicine or other fields of health care that do not require an independent medical practice.

It is important to point out that the peers agree with UG to offer an integrated curriculum in MD programme. Nevertheless, it must be ensured that all medical fields are systematically covered and that the name of the block is aligned with the actual content. For example, in the module "cell" anatomy is taught, although, the skeletal elements and joints have nothing to do with the cell and little with tissues. However, the gross anatomy of the muscular systems and its function on the various joints are missing. This is irritating for interested students and it is not clear, why anatomy is part of the module "cell". This issue is also relevant for the blocks "tissue I" and "tissue II". Since the Department of Medicine has the goal of implementing Problem Based Learning (PBL) and of applying modern teaching and learning methods (case studies, hybrid learning etc.), it would be very useful to align the curriculum to current international standards and taking a close look at the integrated curricula of renowned medical faculties (e.g. University of Maastricht, University of Groningen, RWTH Aachen, Heidelberg University). This concept should also be reflected in the course descriptions (see ASIIN 5.2).

The auditors confirm that the MD programme has a defined study plan and the curriculum ensures that students are prepared for lifelong learning. In addition, the individual forms of teaching and learning (lectures, tutorials, seminars, electives, project work, and practise) are defined in a way that students know what to expect. However, during the discussion with the peers, the students point out that in case there are several different teachers involved in teaching one course, the communication between them could be improved. The students have the impression that the different teachers do not always communicate well with each other about the course's content and about the exams.

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

From the first semester of the MD programme, students are introduced to critical thinking and scientific methods. Especially in the practical courses, students need to solve clinical cases by using a scientific approach.

Students are introduced to scientific methods and evidence-based medicine in the course of the modules "Scientific Research and Project Course I + II". The goal is to convey students' knowledge about research design and types of scientific research, key aspects of research methodology, as well as to develop the skills of searching, analysing and reviewing scientific literature, and writing a research project.

During clinical practice students should not only acquire specific clinical skills but also learn about modern aspects of evidence-based medicine. Evidence-based medicine is also taught in the module "Biostatistics and Epidemiology" with the aim of reviewing different types of epidemiological research papers and mastering of statistical techniques. This should prepare the students for the "Research Project in Health Sciences", which is conducted in the 11th semester. The goal of the research project is to impart knowledge in public health, biomedical sciences, and clinical fields and to develop the skills of independently finding, evaluating and using simple statistical techniques in accordance with the principles of good scientific practise.

The peers confirm that students learn the principles of scientific methods and are introduced to medical research methods and evidence-based medicine.

Criterion 2.3 Basic Biomedical Sciences

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Classes in basic biomedical sciences such as "Introduction to Basic Medical Sciences", "Cell", "Tissue I+ II", "Energy and Metabolism", "Cardiovascular System", "Respiratory System", "Gastrointestinal System and Metabolism", "Nervous system", "Urogenital and Endocrine Systems" and "Biostatistics and Epidemiology" are offered in the first two years of the MD programme. Biomedical subjects are taught as thematic blocks in an integrated manner covering macromolecular, organic, cellular, tissue, systemic and pathogenetic features of the human body.

It is expected that students acquire the necessary knowledge in basic biomedical sciences in order to be able to understand the underlying scientific principles and fundamental concepts, which enables them to follow and apply the methods of clinical sciences in the next level of studies.

Criterion 2.4 Behavioural and social sciences and medical ethics

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Behavioural and social sciences are taught in courses such as "Medical Ethics and Medical Law" and "Public Health and Social Medicine". In addition, behavioural and social sciences are covered in the blocks "Introduction to Clinical Practice I + II", which are taught in third year of studies and include following disciplines: behavioural science, medical ethics, medical psychology, medical anthropology and medical sociology. The modules include the study of biological, psychological, social, cultural, behavioural, and economic factors that affect human health, which provides students with competencies in developing physicianpatient communication, professional behavior, ethical reasoning and understanding of cultural and social differences.

The auditors confirm that students of the MD programme are well educated in social sciences and ethics and are introduced to evidence based medicine.

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Clinical sciences and skills are introduced during the MD programme through students' exposure to the clinical setting and through the provision of a clinical environment from the third year of studies. Bedside teaching in small groups as well as simulation equipment (mannequins etc.) are used to expose students to the application of clinical science.

Supplementing the lectures, small group teaching (clinical skills sessions, simulation sessions and case-based scenarios) are conducted during the professional stage of the MD Programme. Students are required to attend clinical placements on rotation basis in the different medical areas.

Students are introduced to clinical practice in order to increase their self-confidence before they encounter patients in real clinical settings during the clinical stage. Introduction to clinical practice is designed as communication skills training in the context of history taking, physical examination, and patient-physician relationship. Communication skills practices in medicine are carried out with simulated/standardized patients.

During the clinical stage, which starts in the fourth academic year, students become increasingly actively involved in patient care through rotational placements. Clinical rotations are conducted in groups and include seminar courses and practical trainings (not more than 6 students in a group), most of which take place in a hospital. The typical seminar includes discussions, sharing of demonstration materials, role-playing and physical tasting exercises facilitated by the teacher. Depending on the objectives and outcomes of the course, there is a possibility of using different multimedia tools and/or standardised patients within some seminars.

Clinical practice during the clinical rotations allows students to activate, integrate, and apply theoretical knowledge, practical skills, clinical ethics, and evidence-based medicine principles acquired at the early stages to real patients. At the same time, students become acquainted with the public health, health promotion and disease prevention. This is represented in the curriculum as "Community Medicine and Health Promotion". The practical training includes active methods of teaching such as case based learning and role playing. Clinical courses are conducted in hospitals and outpatient facilities (see criterion 6.2) under the supervision of clinical specialists and mentors. In particular, for assessing patient's condition students participate in the processes of circumvention, collection of anamnesis and physical examination, monitoring, differential diagnosis, development of treatment plan, decision-making related to patient care. In addition, they are taking part at team meetings, councils, conferences, and discussions.

Criterion 2.6 Curriculum structure composition and duration

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The MD programme consists of two stages: The preclinical stage, which is designed for 6 semesters with 180 ECTS points, and the clinical stage, which also encompasses 6 semesters with 180 ECTS points.

The preclinical stage is subdivided into "Basic Medical Sciences I to IV" and "Introduction to Clinical Sciences I + II". After finishing the preclinical stage, students are registered to the clinical stage. The learning process at the clinical stage focuses on clinical sciences.

Criterion 2.7 Programme management

Evidence:

- Self-Assessment Report
- Discussions during the audit
- Academic Study Guides

Preliminary assessment and analysis of the peers:

The School of Health Sciences at UG manages the MD programme. All decisions concerning the content of program and teaching and evaluation methods are taken by the programme development council, which consists of all stakeholders such as staff members, students, employers, and external experts. Alumni will be added to the council after the programme has its first graduates. The council meets regularly, e.g. 10 times within the last two years.

Implementation of the decisions taken by the programme development council is within the responsibility of the Department of Medicine, which is a structural unit of the School of Health Sciences. The Head of the Department of Medicine in coordination with the Dean of the School of Health Sciences allocates financial, material and other resources, provides relevant procedures, addresses the university administration units for further activities, and ensures an efficient implementation of the decisions.

Criterion 2.8 Linkage with medical practise and the health sector

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Students at the School of Health Sciences learn from the beginning of their studies how to interact with patients and doctors in hospitals. The peers confirm that there is a strong cooperation with medical practise and the regional health sector.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 2:

The peers appreciate that UG has decided to modify the curriculum and the module descriptions. For this reason, the names of the teaching blocks will be changed: Basic Medical Sciences I (instead of "Cell"), Basic Medical Sciences II (instead of "Tissue I"), Basic Medical Sciences III (instead of "Tissue II"), and Basic Medical Sciences IV (instead of "Energy & Metabolism"). However, the new names do not make transparent what the course is really about. It would be more useful to align the name of the courses with its actual content. In addition, the peers point out that just renaming the courses is not sufficient. Some essential topics are still missing (e.g. the gross anatomy of the muscular systems and its function on the various joints) and UG should align the curriculum to current international standards.

The peers consider criterion 2 to be mostly fulfilled.

3. Assessment of Students

Criterion 3.1 Assessment methods

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Regulation for Undergraduate Studies
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The methods of assessment and the weighting, if there is more than one component for each module, are indicated in the respective module description and are announced to the students at the beginning of each semester. The grade for each class takes into account all assessment components.

Assessment methods in the MD programme depend on the intended learning outcome of each course. They include oral and written examinations, projects, essays, presentations, reports, case assessments, case based discussions (CBD), workplace based assessment (WPBA), mini-clinical evaluation exercises (Mini-Cex), professionalism mini-evaluation exercises (P-MEX), direct observations of procedural skills (DOPS), objective structured practical examinations (OSPE), and objective structured clinical examinations (OSCE). The teacher is required to ensure an objective, fair and transparent assessment process. In case where student assessment is performed by more than one person (e.g. in the process of clinical teaching), components to be assessed by each teacher are defined and made known in advance.

Learning outcomes related to cognitive skills are usually tested through written examination in paper-pencil format by multiple choice questions (MCQ), traditional true/false tests, case presentation, and essays. In general, during the first and second year of studies the prevalent assessment methods are written examinations, but there are also OSCE stations (one per semester) to prepare students for the summative OSCE in higher semesters.

Social competencies (behavioural assessment) are assessed by examining simulated patients or performing procedures in simulation settings (OSCE) or with real patients (WPBA, Mini-Cex). Students need to demonstrate how he/she would respond to a standardised/real patient's ethical dilemma. The teachers then assess the students' knowledge, attitudes, skills, cultural competences, empathy/compassion, counselling, and professionalism. Behavioural assessments are held in the simulation hospital, OSCE examination centre, as well as on training and field work carried out in the hospitals and clinics during the clinical clerkships.

During clerkships, students are divided into small groups that rotate through the clinical departments. Although the number of students in each group differs among the various disciplines, it usually includes six students per department. During the clinical clerkships, students have to admit at least two patients a week. This includes a written structured medical report (medical history taking, physical examination, laboratory findings, problem list, and follow-up notes). These reports are presented to and discussed with the mentor.

The course assessment is conducted according to the academic calendar, which is available to all students through the digital platform "MyUG". In addition, every lecturer at the beginning of each course announces date and time of each exam. The final marks must be uploaded to "MyUG". Students can access their marks through "MyUG" and they are allowed to appeal to the teacher if they do not agree with the grading.

The semester includes 22 weeks, of which 18 are academic, the 19th and 20th weeks are exam periods, and the last two weeks are reserved for re-sits. A failed final exam can be repeated once, usually two weeks after the first try. However, students can repeat the whole course as often as they want. The exam schedule is developed by the UG study office in cooperation with the Department of Medicine.

Additional detailed information regarding organisational aspects of exams is stated in the Rector Council Resolution №50/20 (Regulation for Undergraduate Studies). In particular, this regulation covers issues related to the administration of mid-term and final exams, resits, appealing rules, and admission to the final exams.

The peers also inspect a sample of examinations and project papers and are overall satisfied with the general quality of the samples. They conclude that the examinations are suitable to verify whether the intended learning outcomes are achieved or not.

Criterion 3.2 Relation between assessment and learning

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions

• Discussions during the audit

Preliminary assessment and analysis of the peers:

The peers confirm that in the MD programme exams are conducted in accordance with the intended learning outcomes. For example, for several basic biomedical courses in which the level of competency focuses on understanding, the assessment methods are multiple choice tests and laboratory examinations. Moreover, for courses with a focus on clinical skills, the chosen assessment method is usually a practical skills examination or OSCE.

The methods of assessment are indicated in the module descriptions. In addition, the examination form is communicated to the students at the beginning of the course.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 3:

UG does not comment on this criterion in its statement.

The peers consider criterion 3 to be mostly fulfilled.

4. Students

Criterion 4.1 Admission policy and selection

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Regulation for Undergraduate Studies
- Procedure for the Enrolment of Students Without Passing the Unified National Examinations
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Admission to the MD programme is carried out in two different modes, which are defined by the legislation of Georgia. In particular, applicants with a Georgian high school diploma or an equivalent are enrolled in the programme in accordance with their results in the Unified National Examinations, which are organised by National Assessment and Examination Center. International applicants are not required to pass the Unified National Examinations. In addition, all applicants need to submit verification of English proficiency (B2 level). UG's internal admission test includes an online-exam of knowledge in physics, chemistry, and biology. The test consists of open, closed, and multiple-choice questions that are based on the topics studied in secondary schools. In addition, an interview (either online or on campus) will be conducted with the applicant in order to establish the knowledge of English at B2 level.

Internal university exams in physics, chemistry, and biology were introduced after assessing students' academic achievements in basic sciences. An analysis has shown that a significant proportion of first-year students fail to obtain satisfactory grades in natural sciences. According to the analysis, this is related to the admission of students with low academic achievement in this area. This has improved somewhat since the entrance exam was introduced in 2020.

Admission to the MD programme takes place twice during the academic year - in the fall and spring semester. The schedule of admission, the requirements, and the procedures are published and can be accessed via UG's homepage.

There is a tuition fee for studying at UG. The University has developed a student-centred financial policy, which involves developing an individual tuition payment schedule taking into account the student's socio-economic conditions. In this case, the student applies to the Social Affairs Commission of UG.

In the MD programme, international students have to pay a tuition fee of 6000\$ per year (more exactly: 100\$ per ECTS point). For international students, some scholarships, which are covering a part of the tuition fees are available. These scholarships are sponsored by UG and awarded for students with a high GPA (above 3.75).

Georgian citizens receive a state scholarship for six years of study in the MD programme. Nominally, Georgian students have to pay a tuition fee of 2250 Georgian Lari (around $620 \in$) per year, but this fee is partly covered by a scholarship from the Georgian Ministry of Education and Science. The amount covered by the government depends on the applicant's score on the national exams: the best students receive a scholarship which covers 100 % of the tuition fees, the next best students receive a scholarship of 70 % to 50 %. The rest of the tuition fees needs to be paid by the student.

Since some of the international students have problems in paying the tuition fees, the peers think that it might be a good idea to offer student loans. As in other countries, students receive a low interest loan that covers the tuition fees and are required to pay back the loan after graduation when they work as medical doctors.

The details of the application process at UG and further information on admissions criteria and deadlines can be found in the Rector Council Resolution №50/20 (Regulation for Undergraduate Studies), which is also published on the university's webpage.

In summary, the auditors find the terms of admission to be binding and transparent.

Criterion 4.2 Student intake

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The annual intake of the MD programme is determined by the School of Health Sciences in cooperation with the involved units. On the recommendation of the Director of the School, the number of available study places is approved by the School Council, and then needs to be approved by the University Council.

As described in the Self-Assessment Report, the number of applications has increased from 171 in 2017 to 430 in 2019. Since then, the number has decreased again to 325 in 2020 and 305 in 2021. But one has to take into account that the decrease related to the restrictions imposed due to the Covid-19 pandemic. Preselection of the international applications (based on the required documents) is done by the Georgian Ministry of Education and Science. All international applicants that have passed the preselection then have to take part at UG's internal entrance exam and interview. During the audit, UG provides additional information about the number of admitted students. Accordingly, there were 59 new students admitted to the MD programme in the autumn semester 2020, 47 new students in the spring semester 2020, and 65 new students in the autumn semester 2021. UG's goal (and limit) is to admit 60 new students to the MD programme in every semester.

The number of newly admitted students is shown in the following table:

Au-	Spring	Au-	Spring	Au-	Spring	Au-	Spring	Au-
tumn	2017	tumn	2018	tumn	2019	tumn	2020	tumn
2016		2017		2018		2020		2021
14	13	85	53	88	29	59	47	65

International student recruitment and services are provided by the International Student Integration and International Relations Service. According to their data, the largest proportion of medical students are citizens of India (17%), Sudan (13%), Iran (11%), and Israel (11%). Only two of the currently 580 students in the MD programme come from Georgia. It should be noted that 44% of 580 students with active status are male and 56% are female.

From their discussion with the students, the peers gain the impression that the admission system is effective and transparent.

Criterion 4.3 Student counselling and support

Evidence:

- Self-Assessment Report
- Student Affairs Regulation
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The Department of Medicine offers a comprehensive advisory system for all students. At the start of the first semester, every student is assigned to an academic advisor/supervisor. Each academic advisor is a member of the academic staff and is responsible for a group of students from her/his classes. The supervisor is a student's first port of call for advice or support on academic or personal matters. Information on individual counselling hours is provided at the beginning of each semester through MyUG and information boards on campus.

The role of the supervisor is to help the students with the process of orientation during the first semesters, the introduction to academic life and the university's community, and to respond promptly to any questions. They also offer general academic advice, make suggestions regarding relevant careers and skills development and help if there are problems with other teachers.

In addition, Peer Assisted Learning (PAL) is applied in the MD programme. During PAL, senior students provide additional training to new students in both clinical education and theory. From the spring semester 2021, four students with high academic achievements were selected by the Department of Medicine for the position of student mentors and they were assigned remuneration as an incentive. Senior students mentor new students in the preclinical stage and academic staff members mentor students in the clinical stage (usually 6 students per mentor). Student mentors are selected by the programme coordinators and receive a specific schooling. The comprehensive mentoring system is one of the strong points of the MD programme.

All students at UG have access to the digital platform MyUG. The students' profiles (student history, study plan, academic transcript and grade point average/GPA, lecturer evaluation, course list) are available via MyUG.

To promote research skills, the School of Health Sciences and the Department of Medicine support students by organizing extracurricular activities - academic writing training courses and student scientific conferences. Scientific papers of students participating in conferences are published in the school's annual peer-reviewed scientific-research journal Caucasus Journal of Health Sciences and Public Health.

UG cares for the integration of foreign students in the Georgian society and their involvement in student life. To this end, an annual "Tolerance Week" is organised, during which public discussions, lectures, film screenings, and essay competitions are held with active participation of students. Various activities (dancing, cooking, art, etc.) presenting the ethnic cultural diversity and values are organised by the students.

UG has established the Alumni and Student Affairs Center. Its goal is to maintain constant contact with students/alumni and involve them in current university life via extracurricular activities such as sports, music, dancing, and other diverse activities, which are organised by different student clubs.

The peers notice the good and trustful relationship between the students and the teaching staff; there are enough resources available to provide individual assistance, advice, and support for all students. The support system helps the students to achieve the intended learning outcomes and to complete their studies successfully and without delay. The students are well informed about the services available to them.

Criterion 4.4 Student representation

Evidence:

- Self-Assessment Report
- Student Affairs Regulation
- Discussions during the audit

Preliminary assessment and analysis of the peers:

As defined in the Student Affairs Regulation, UG has established student self-government in accordance with the Law of Georgia on Higher Education.

By secret ballot, on the basis of universal, equal, direct elections, student self-government are elected at UG, this ensures students' participation in university management and promotes the protection of students' rights. The students elects representatives to the governing bodies as defined by the University Regulations. As a consequence, there are student representatives in the MD programme Development Council and the Council of the School of Health Sciences.

Student members of the MD programme Development Council are directly involved in the curriculum modernisation process. They are not only informed on the decisions made about the programme, but they can make an impact by participating in the discussions and suggestions. Some of the changes in the curriculum are made on the basis of critical remarks of the students.

Student members of the Council of the School of Health Sciences have the opportunity to participate in the school management process, in decision-making processes such as the school mission, strategic development, activity plans, faculty nominations, and budget.

The peers observe that students at the Department of Medicine are involved in the quality assurance process and thus actively participate in evaluating and further developing the MD programme.

In summary, the peers appreciate the high availability of staff members, the good relation between students and staff members, and the involvement of the students in further developing the degree programme.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 4:

The peers thank UG for explaining that UG already offers student loans through its partner bank, but due to the variability of repayment levels and interest rates, the terms are quite ineffective for the students and the student loan offers are not used. The peers recommend to talk to the bank in order to be able to offer better terms for the students.

The peers consider criterion 4 to be fulfilled.

5. Academic Staff/Faculty

Criterion 5.1 Recruitment and selection policy

Evidence:

- Self-Assessment Report
- Staff CV's
- Study plan
- Statute of the Personnel of the University of Georgia
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

At UG, staff members have different academic positions. There are professors, associate professors, assistant professors and assistants. The academic position of each staff member is based on research activities, publications, academic education, supervision of students, and other supporting activities.

According to the information provided during the audit, 184 people are involved in implementing the MD programme (not only academic and invited staff, but also mentors/tutors involved in clinical training). As the programme coordinators elaborate during the audit, 40 academics (9 professors, 24 associate professors, 5 assistant professors, and 2 assistants) are teaching in the MD programme. In addition, there are 114 invited lecturers (with at least a Master's degree, they hold lectures under the supervision of a professor) and 14 invited professors. Moreover, 16 teachers from the School of Science and Technology give courses in the MD programme (e.g. in Physics, Biology, and Chemistry). All professors (full, associate, and assistant) need to hold a Ph.D.

Due to the still increasing number of students in the MD programme, every year several various vacancies are announced. For example, in recent months seven academic and four administrative staff members have been added to the personnel of the Department of Medicine.

At UG, the Human Capital Management Service is responsible for staff recruitment. The need is defined by the Head of the Department of Medicine, who determines the required specifics of the position (knowledge, skills, experience, achievements, etc.). The vacancy is

discussed within the School of Health Sciences and then sent to the Human Capital Management Service and the Rector's Office. After the Rector's approval, the vacancy is announced publicly.

Specific requirements for holding an academic position are defined by the National Sector Benchmark of Medicine. For example, a full professor needs at least nine years of clinical experience and at least six years of teaching experience; an associate professor needs at least five years of clinical experience and at least three years of teaching experience; an assistant professor at least five years of clinical experience, and an assistant needs to be a doctoral student in relevant specialty. The MD programme additionally requires a sufficient level of English proficiency. The Department of Medicine is looking worldwide for new academic staff members, but it is hard to attract sufficiently qualified teachers (Ph.D, research and teaching experiences) to come to work in Georgia.

In order to broaden the students' horizon especially in the field of research and current developments, guest lecturers from both Georgia and overseas are regularly invited. In addition, practitioners from hospitals and health care institutions are involved in the learning process, not only as lecturers, but also as supervisors in the clinical stage.

The Department of Medicine provides individual employment contracts with the staff of medical clinics and laboratories who are directly involved in the teaching and learning processes but do not hold academic positions. It involves supervising and instructing a fixed number of students during clinical or research work, while the staff of the relevant unit of the Department of Medicine conducts periodic unscheduled visits for monitoring purposes.

Workload of the academic staff members is regulated in accordance with the Statute of the Personnel of the University of Georgia. According to the document, the workload is 1760 hours per year (40 hours per week, 44 weeks) and includes educational and research activities, consulting, and participation in university events/services. In case of a combination of permanent administrative functions, the workload is reduced.

In summary, the peers confirm that the composition, scientific orientation and qualification of the teaching staff are suitable for successfully implementing and sustaining the degree programme. The peers observe that the teachers are professionally qualified and their qualification profiles fit well with the focus of the degree programme. In addition, the teaching and administrative staff is very motivated and there is an atmosphere of openness and cooperation between students, administration, and teachers. The peers especially appreciate the gender politics at the Department of Medicine: most of the academic and administrative staff members are female. Clinical expertise and activities are well integrated into the curriculum, which leads to a good interaction between teaching and patient care. However, they suggest using a standardised template for the CV's of all staff members and to compile them in a staff handbook.

Criterion 5.2 Staff activity and development policy

Evidence:

- Self-Assessment Report
- Study plan
- Statute of the Personnel of the University of Georgia
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The School of Health Sciences provides training for academic and administrative staff members by sharing both local and international experience. Administrative and academic staff involved in the MD programme can attend national and international seminars and conferences, webinars, and participate in exchange programmes. For example, a staff member visited Umea University (Sweden) and another spent an academic semester at the University of Tromsø (Norway) in 2018; finally a public health staff member spent four months at Queen Mary University in London in 2017.

Staff members are obliged to attend professional development courses in modern teaching methods once every two years. The specific needs were identified through a survey. 30 academic staff members have been trained last year on different aspects of syllabi and curriculum development, integrated curriculum development, and PBL application. Providing training on education-related issues is set out in the Department of Medicine Action Plan. It is planned to train all staff members gradually in 2021 and 2022.

The peers discuss with the members of the teaching staff the opportunities to develop their personal skills and learn that the teachers are satisfied with the internal qualification programme at UG.

Overall, the auditors confirm that UG offers sufficient support mechanisms and opportunities for members of the teaching staff who wish to further develop their professional and teaching skills. Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 5:

The peers are glad that UG will adopt their suggestion to introduce a standardised template for the CVs of all staff members and compile them in a staff handbook.

The peers consider criterion 5 to be fulfilled.

6. Educational Resources

Criterion 6.1 Physical facilities

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Visit of the facilities during the audit
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The Head of the Department of Medicine sends a report to the Director of the School, in which the required materials and equipment are detailed. The Director in turn, makes a request to the material resources management department to purchase the required materials and equipment.

For example, the most recent upgrade was done in 2020 and 2021, when new molds and auxiliary materials were purchased (intramuscular injection, nasogastric tube and bladder catheterization and other simulators, arterial system with sound amplifier, mannequin of an adult patient with trauma, ADAM-X patient simulator, anatomical table, orthoses, clamps, corsets, maternity ward, etc.).

Safety measures at UG are implemented and followed according to the Rules for the Use of the University Resources and the Laboratory Safety Rules. At the beginning of each practical course, students are acquainted and trained with the safety rules in the laboratories by the teacher and/or laboratory assistant and have to confirm their familiarity with the safety rules by signature. In addition, safety rules are posted in all laboratories. Students have also the opportunity to use the facilities at G. Eliava Institute of Bacteriophage, Microbiology and Virology. It is operated under the guidance of the School of Science and

Technology of UG. The institute hosts two laboratories for chemistry, four laboratories for biology (microbiology-immunology, molecular biology and biochemistry), and two seminar rooms.

The main library of UG offers more than 40,000 printed publications, which are catalogued and available for both academic staff and students. The library has access to international scientific databases such as: EBSCO, Cambridge Journals, JSTOR, Hinari Research Health, Cochrain Library, Elsevier, and HeinOnline. Students and staff members can also access these sources from outside the university. To familiarise students with using electronic databases, the library staff periodically organizes information meetings.

There are computer-equipped free WI-FI spaces on various floors of the main buildings of UG. All auditoriums of the School of Health Sciences are equipped with internet, at least one computer and a projector. High-speed Internet connection via Wi-Fi devices is possible from anywhere in the university, through up to 80 Wireless Access Points, which ensures high speed and quality connection.

In 2019, a so-called Anonymous Complaint Box was installed in the School of Health Sciences aimed to anonymously survey the students on issues that are problematic to them. Proposals and complaints received through the Anonymous Complaint Box are reviewed by the School of Health Sciences Council and the result are presented to the university's management for follow-up activities. For example, in 2020 and 2021, the lighting of the recreational space of the building I of the University was improved and the foyer furniture was renovated, the reading hall of the library was equipped with 96 new computers for free use; computer workspaces were strengthened on different floors with internet access.

During the audit, the auditors also visited the wards, the laboratories, the skills labs, the simulation settings, and the lecture rooms in order to assess the quality of infrastructure and technical equipment.

With respect to the anatomy laboratories, they notice that students do not have the opportunity to practise directly with human corpses. Students can use models of bones and various organs such as brain, heart, and kidney. The quality of the models is not very good (too coarse and not enough details) and there are no models for muscles, the torso, upperand lower limbs, hands, or feet. In addition, the Department of Medicine has newly installed a simulation table where students can learn about human anatomy. However, this cannot replace the necessary hands on experience of handling real human body parts and learning how a real human body looks on the inside. This is an important competence, which all medical students should acquire during their first semester of studies, because almost all clinical subjects rely on students to be competent in anatomy. The students confirm during the discussion with the peers that their knowledge in anatomy was limited and that they had to make up on it during the beginning of the clinical stage. The peers see that according to Georgian legislation, it was not possible to work on real human bodies in the past. But these restrictions have been changed recently and it should be possible for the Department of Medicine to acquire human corpses. From the peers' point of view, dissection of real cadavers is the best way to learn anatomy. If this is not possible, the next best way is to have plastinated cadavers in various stages of dissection. If this is not possible, there should at least be an adequate and sufficient supply of models and full body mannequins that can be used for anatomy classes.

There are similar problems with respect to the practical education in other biomedical subjects such as biochemistry, histology, physiology, and pathology. These pre-clinical labs are either missing or are not aligned with international standards. Consequently, pre-clinical training in the MD programme is very theoretical and students do not receive a sufficient amount of hands-on experience with real human bodies. For this reason, the peers expect UG to submit a concept and timetable with the goal of establishing pre-clinical laboratories in anatomy, biochemistry, histology, physiology, and pathology, and align them with international standards, in order to give students a sufficient amount of hands-on experience with real human models and human samples.

On the other hand, the peers especially laud the well-equipped rooms of the clinical training centre as well as the good OSCE facilities.

Criterion 6.2 Clinical training resources

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Visit of the facilities during the audit
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Besides facilities within UG, premises for the degree programme are provided by other institutions, such as "Consilium Medulla", general hospital "Geo Hospitals", Children's Medical Centre "Mziuri Medi", Nia Oniashvili Maternity Hospital "Baiebi", National Centre for Dermatology and Venereology - "Kanveni", Scientific-Practical Centre of Infectious Pathology, AIDS and Clinical Immunology, Medcapital Clinic "HEPA", and Medical Centre "Innova". The School of Health Sciences has the clinic "Consilium Medula" as its main partner, where students get in close contact with patients during the clinical stage. The clinic "Consilium Medula" wants to obtain the status of a University Clinic. In 2018 the clinic successfully passed an external audit conducted by the German TÜV SÜD and was awarded the quality mark - ISO 9001: 2015 certification. At the clinic, the students have the opportunity to interact with ambulatory and hospital patients in the areas of therapy, surgery, endocrinology, gynaecology, rheumatology, urology, clinical oncology, and diagnostics.

Before entering the clinical stage, students undergo training in a simulation hospital and in the Laboratory of Medical Skill for Independent Work, where modern multifunctional molds, equipment, and materials are available. In the laboratory, students perform practical manipulations individually under the supervision of a senior student mentor.

It is also worth mentioning that during the survey performed in 2020-2021 academic year, students expressed a desire to be able to see various patients in different clinics. Based on this, the school administration started a collaboration with the "Geo Hospital" clinics, which are not only located in Tbilisi, but also in other regions in Georgia. From the academic year 2021/22 medical students will have the opportunity to undergo clinical rotations in "Geo Hospital" clinics.

During their visit of the facilities, the peers observe how the clinical teaching is conducted. The students confirm that they are taught one to one in the clinical rotations of the professional stage e.g. in an operating theatre. In addition, students can watch the patients' treatment via video transmissions.

While visiting the affiliated hospitals and during the discussion with the students, the peers notice that students' direct contact with patients is rather limited in comparison to international standards and that there are not always enough patients with the full variety of diseases available. For this reason, the peers recommend that students should spend more time in the hospitals and should have the opportunity to see the full breadth of possible diseases and treatments. Therefore, the Department of Medicine should establish more co-operations with hospitals so that students have the opportunity to see more patients with different kinds of diseases and establish a checklist of procedures and treatments that students should participate in and become familiar with.

Criterion 6.3 Information technology

Evidence:

Self-Assessment Report

- Study plan
- Module descriptions
- Visit of the facilities during the audit
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The electronic information system at UG is managed by the IT Infrastructure Development Service, the Database Development Service, and the Web Technology Development Service. They are responsible for the information technology and provide services to all users (students, teachers, administrative staff, etc.). UG has established the digital platform "MyUG", which is an electronic system for managing records and administrative processes. Through this system, teachers can evaluate exams, upload documents, and can conduct computer-based exams and training courses. Students can register for courses, create an individual schedule, upload papers and exams, and contact the university's administration. Its goal is to be a reliable and efficient data management unit, which guarantees a high quality management information system. This should support the use of information and communications technology in the learning and teaching process UG.

UG has a Distance Learning Laboratory with cameras and large screens, it is used for various short-term training courses. Due to the COVID-pandemic, the University is allowed to provide educational services through its e-learning platform. The administration conducts meetings remotely, namely, through the Microsoft Teams platform.

Criterion 6.4 Medical research and scholarship

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Visit of the facilities during the audit
- Discussions during the audit

Preliminary assessment and analysis of the peers:

UG has established the Scientific-Research Institute, which coordinates and promotes the research activities of all academic staff members. Its main objective is implementing and promoting research activities, supporting their integration into the educational process, and designing a research policy.

The research priorities of the School of Health Sciences focus on the following fields: basic medical sciences, clinical medicine, and public health. Research and promoting students' independent scientific work is part of the learning process and is incorporated into the curriculum of the MD programme. The students are also familiarized with the principles of scientific work in the course of extracurricular activities such as attending scientific conferences, reading journals, and using international databases. Research by teachers and students is sometimes performed in collaboration with other institutions within or beyond UG, domestic or overseas. For example, the School of Health Sciences cooperates with the Department of Science and Technology of the School of Natural Sciences in the area of teaching and research in basic medical sciences. One of the main partners in conducting biomedical research is G. Eliava Research Institute of Bacteriophage, Microbiology and Virology. Its main research areas are clinical microbiology, environmental microbiology, infectious immunology, biotechnology, and biosafety.

One of the most important partners of the School of Health Sciences is the National Center for Disease Control and Public Health (NCDC). NCDC is concerned with population-based studies of seroprevalence and risk factors for SARS-CoV-2 and viral hepatitis B and C in Georgia. These studies are funded by the US Center for Disease Control and are conducted with the support of WHO Environment and Health Office.

Research funding is available from UG, the Georgian government, and private, national, and international institutions. Lecturers also work in international research groups and some have cooperations with private companies or research institutions in health-related projects. The research results are presented in seminars, published in books, and national and international journals. The peers point out that it would be very useful to give students more opportunities for participating in the teachers' research activities and to become familiar with current medical research topics e.g. by establishing a journal club.

Criterion 6.5 Educational expertise

Evidence:

- Self-Assessment Report
- Discussions during the audit

Preliminary assessment and analysis of the peers:

UG and the School of Health Sciences strive to improve the didactical qualifications of all teachers that are involved in the teaching and learning processes. To this end, UG has established the University Human Resources Management Service, which is responsible for

organising staff orientation and training, which involves facilitating the process of adaptation of new employees to the work environment. In addition, English language courses and courses on teaching in a multicultural environment are offered, as well as courses for developing practical skills (e.g. in using IT-tools such as MS Teams, Cisco Webex, Mooc, etc.)

The auditors confirm that students are generally satisfied with the teachers' expertise, delivery and support. This is verified through the students' satisfaction questionnaires.

UG recognises that not only academic performance is important for becoming a successful medical practitioner but also soft skills and behaviour skills (communication skills, teamwork, etc.) need to be imparted. UG tries to cover these areas by addressing them in courses like "Community Medicine and Health Promotion", "Global Health and Healthcare Management", and "Patient Safety and Quality Improvement". In addition, the School of Health Sciences encourages their students to pursue extracurricular activities and develop critical thinking. The peers are satisfied with the existing opportunities.

Criterion 6.6 Educational exchanges

Evidence:

- Self-Assessment Report
- Discussions during the audit

Preliminary assessment and analysis of the peers:

UG and the School of Health Sciences encourage their students to participate in international exchange programmes and to spend some time during their studies abroad. Classes in the MD programme are taught in English, but international students also have to learn Georgian, because they need to work with and treat patients in the hospitals.

At UG, the International Student Integration and International Relations Service takes care of organising academic mobility, distributing information, advising students, and preparing relevant documents. Student and staff mobility is carried out on a semester basis through bilateral agreement between UG and its partner universities and the Erasmus+ programme. Credits and competencies acquired at other universities are recognised by UG. The Credit Recognition Commission determines compatibility of learning outcomes achieved by the student within the educational programme and makes a decisions on the recognition of the relevant credits. The peers see that the "Regulations on the compatibility of the study results achieved within the framework of other educational programmes and the recognition of relevant credits" is aligned with the goals of the Lisbon Convention and that credits achieved outside the university are recognised by UG. In 2015, UG has signed a Memorandum of Understanding with the Arctic University of Norway. Its goal is to collaboration in joint research projects, to organise joint symposia, conferences, public lectures, and seminars, to promote the exchange of academic staff, researchers, and students. In 2021, two Lithuanian students spent one semester at UG. The School of Health Sciences has an arrangement for nursing students and teachers from Northwest University (USA) to visit UG and dental students and academic staff members can visit Taft University (USA) for conducting clinical practices.

In addition, the International Student Integration and International Relations Service explores new partner universities to increase the number and variety of mobility programmes available to students. The Department of Medicine is also involved in initiating new international cooperations. Negotiations of the Department with Turkish universities are underway to develop an institutional partnership. In the framework of these activities exchange clinical practices were planned for medicine program students at Koç University Hospital in 2019 (financial support has already been provided). However, due to the restrictions of the Covid-pandemic the hospital was not be able to accept students and the visit was postponed. Students will take the exchange-based clinical practice course in September 2021. During the discussion with the peers, the programme coordinators point out that the MD programme is newly establishing and offering more co-operation programmes is part of UG's strategic plan.

UG's goal is to have 50 % international students and 20 % international staff members (there are currently only 3 % international staff members at UG). The peers appreciate UG's efforts to foster internationalisation, however, they do not see that it is really necessary to have more international teachers. Hiring qualified staff members from Georgia is fine and the internationalisation could also be fostered by inviting more guest lecturers, establishing more international co-operations, and organising summer courses

In summary, the peers confirm that opportunities for international educational exchange for students exist (e.g. ERASMUS +) and that there are some incoming students e.g. from Lithuania. Nevertheless, the academic mobility of the MD students is rather low and the peers recommend encouraging and supporting MD students to spend some part of their medical education abroad.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 6:

The peers appreciate that UG will improve the teaching and learning of anatomy by purchasing a license for a one-month trial version of a virtual reality system. If the legal system and the ethical standards in Georgia make it very difficult for the university to provide cadavers for the anatomy lessons, using a virtual reality system is an alternative. UG should closely monitor the success of the new system and involve students in this process. However, the peers are still convinced that a substantial improvement of the collection of models is essential.

The peers support the plans to establish or modernise the laboratories, however the documentation provided by UG covers a minor fraction of the entire field and needs to be thoroughly revised and expanded. For this reason, the peers expect UG to provide verification of the results in the further course of the procedure.

The peers appreciate that UG has established more co-operations with hospitals in Georgia and they should continue on this path. It is essential that medical students spent sufficient time in hospitals and experience the whole breadth of diseases and treatments.

The peers confirm that some teachers involve their students in research activities, but this should be increased and put on a broader basis.

The peers are glad that UG agrees that it is important to deepen the co-operation with all partners and to establish new partnerships. They encourage UG to further pursue this path and to further increase the students' opportunities for taking part in international educational exchanges and to spend some part of their medical education abroad.

The peers consider criterion 6 to be partly fulfilled.

7. Programme Evaluation

Criterion 7.1 Mechanisms for programme monitoring and evaluation

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The auditors discuss the quality management system at UG with the programme coordinators. They learn that there is a continuous process to improve the quality of the degree
programmes. The quality assurance system is implemented at university level by the Quality Assurance Service. Since 2018, the School's Quality Assurance Officer is a member of the Quality Assurance Service.

The goal is to systematically evaluate the quality of educational and research activities in the field of health sciences and the professional development of the staff members through internal and external quality assurance procedures in cooperation with all relevant stakeholders.

Tasks of the Quality Assurance Service include participating in the process of evaluating the scientific-research activities of the academic staff members, submitting recommendations to the programme coordinators, the School Council, and UG's Academic Council in order to improve the teaching and learning measures, and developing questionnaires for surveys. In addition, staff members, graduates, and employers are regularly included in surveys in order to receive recommendations on how to further developing the degree programmes.

On programme level, the Medicine Programme Development Council is responsible for developing and improving the programme. This is primarily achieved by evaluating the achievement of the intended learning outcomes and students' academic performance. In addition, the Medicine Programme Development Council conducts surveys for several groups (students, graduates, employers, and staff members).

External quality assurance is provided by the LEPL National Center for Educational Quality Enhancement of Georgia (NCEQE). Based on the results of the visit of an expert group this also included the consideration of the requirements of the WFME standards for basic medical education in designing the curriculum of the MD programme.

Criterion 7.2 Teacher and student feedback

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Internal evaluation of the quality of the degree programme is mainly provided through student and teacher surveys. Students and teachers give their feedback on the courses by filling out the questionnaire online. The survey includes closed and open questions and is distributed through "MyUG". The questionnaires need to be approved by the University Council.

Giving feedback on the classes is compulsory for the students; otherwise, they cannot access their account on the digital platform UG. The course evaluations are held at the end of each semester. Questionnaires filled out by lecturers every semester include evaluating the performance of the heads of department, and administrative staff in the department. Students' feedback includes evaluating lectures, advisors, and faculty administration. Alumni and employer surveys are conducted not less than once every two years. However, the MD programme does not have any graduates yet.

Analysis of students' and teachers' surveys showed that it was necessary to introduce alternative forms of formative and summative assessment methods, to train academic staff in modern teaching methods and techniques, to improve the quality of the teaching materials, and to update the syllabi (module descriptions).

The School of Health Sciences is allowed to develop and use additional questionnaires to receive feedback on-specific issues. These questionnaires need to be approved by the School Council. For example, one of such surveys was aimed at identifying the students' opinion on electives. Results of the survey were taken into account in the process of modifying the MD programme and supplementing the list of the electives with the following courses: Age Psychology, Social Psychology, Leadership, Sociology, Social Media Marketing, Technique of Public Speaking, Introduction to Cyber Security, and SPSS: Data Analysis and Formation in Healthcare. In addition, an anonymous survey was conducted among the students of the MD programme in order to identify the persons with special needs, to learn about their requirements, and to implement appropriate measures. Other surveys were conducted for identifying the students' career plans and to assess the students' satisfaction with the e-learning tools provided by the School during the Covid-pandemic.

The course evaluations are held during the final exam week. A compilation of the students' feedback is sent to the Department Head. As the students point out during the discussion with the peers, there is also the possibility to give a direct and informal feedback to the teacher. Based on students' critique, changes in the curriculum or the course content are made in subsequent years and some teachers directly discuss with their students possible improvements. This includes the design of the new modified curriculum.

Criterion 7.3 Performance of students and graduates

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Since the MD programme has no graduates yet, the peers focus on assessing how the students' academic performance is evaluated.

Evaluation of students' academic achievements is carried out through directly assessing the achievement of the intended learning outcomes. In particular, at the end of each academic year, the teachers provide a report on the achievement of learning outcomes in their own course based on the analysis of students' progress and academic results. The report is submitted by each teacher to the programme coordinator supervisor, who drafts the overall programme report, and then submits it to the Programme Development Council and the Quality Assurance Service.

The Programme Development Council discusses the results before the start of the next semester and decides on further activities and allocation of resources related to the implementation of the suggested activities. The decision made by the Programme Development Council is submitted to the School Council and subsequently to the University Council for approval and is reflected in the Action Plan of the Department of Medicine.

Criterion 7.4 Involvement of stakeholders

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Monitoring and evaluation activities in the MD programme involve lecturers, students, alumni, and employers. Feedback is given by filling out questionnaires, both online and offline.

External stakeholders are involved in the programme development process through public hearings and focus group discussions. In addition, external stakeholders are members in the Programme Development Council.

The peers learn from their discussion with representatives of UG's partners from hospitals and the health sector that there are regular meetings with the partners on department level, where they discuss the needs and requirements of the employers and possible changes to the degree programme. As the peers consider the input of the employers to be very important for the further improvement of the degree programmes, they appreciate the existing culture of quality assurance with the involvement of all stakeholders in the quality assurance process.

In summary, the peer group confirms that the quality management system is suitable to identify weaknesses and to improve the degree programme. All stakeholders are involved in the process.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 7:

UG does not comment on this criterion in its statement.

The peers consider criterion 7 to be fulfilled.

8. Governance and Administration

Criterion 8.1 Governance

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

As described in the Self-Assessment Report the governance of UG refers to the standard structure as determined by the university's management. The highest decision making board at UG is the University Council, which is headed by the Rector.

At school level, the governing bodies of the School of Health Sciences are the School Director and the School Council. The School Director is appointed by the Rector and is responsible for achieving the goals and objectives as defined by the strategic and action plans of the School in accordance with the mission and strategic development plan of UG. The Director is also responsible for effectively running the school and for coordinating the different units and departments.

The School Council is headed by the School Director and includes the programme coordinators, representatives of the academic staff, and students. The student members are nominated by the Student Self-Government Board from each educational level and are elected for one semester. The School Council approves the school's budget, the marketing and public relations plan, the educational programmes, awards certificates to the graduates, determines the admission contingent and sets the tuition fees.

The School of Health Sciences includes five departments (Department of Medicine, Department of Dentistry, Department of Nursing Department, Department of Pharmacy, Department of Public Health and Health Administration). Each department has a head who is responsible for ensuring effective operation of the department, managing the budget, developing and executing department's goal and activities in accordance with the school's objectives.

The peers confirm that the School of Health Sciences has a well-defined structure of governance, which includes representatives from all stakeholders.

Criterion 8.2 Academic leadership

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The academic leaders at UG are the School Directors. They chair the respective School Council and refer academic matters to the University Council, of which they are members.

At programme level, academic guidance and leadership are provided by the Programme Development Council, the programme coordinator, and the Head of the Department of Medicine.

The Programme Development Council, includes several working groups that focus on specific issues (e.g. research, teaching, etc.) The Council operates in accordance with the principles of the PDCA cycle, ensuring that studies are conducted through direct and indirect evaluation mechanisms and that feedback is taken into account for continuously improving the MD programme.

The Head of Program is the person who, together with other members of the Program Development Council and Head of the Department, is responsible for the content, material and technical development of the curriculum, compliance of the program with the national and university quality standards, and in some cases with the quality standards set by the international accreditation body. The program may have a co-leader/co-head.

The programme coordinators are appointed by the School Council upon recommendation of the head of the relevant department. They are responsible for ensuring involvement of staff members, potential employers, students, graduates, and other stakeholders in further developing the programme. To this end, they conduct relevant surveys, attract international academic staff, and encourage and promote students' and academic personnel exchange programmes. In addition, they are responsible for the adequate equipment of the laboratories and the facilities. The programme coordinators need to hold an academic position at the UG (Professor, Associate Professor, Assistant Professor, or Assistant).

The Head of the Department of Medicine plays an important role in developing and implementing the MD programme. He/she is also responsible for managing the human resources at the department in co-operation with the Schools' Director.

Criterion 8.3 Educational budget and resource allocation

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The MD Programme is fully supported by UG and the School of Health Sciences. Most of UG's funding is covered by the government (mostly in the form of lecturers and education staff salaries, research funds and scholarship assignments), and tuition fees. Moreover, the School of Health Sciences participates in projects with other institutions to supplement its revenues.

The Department of Medicine has its own budget, which is managed in accordance with the Strategic Development Plan of the School and Action Plan of the Department. The Head of the Department of Medicine and the School Director are responsible for meeting the financial needs of the educational processes. The department provides salaries, funding of research activities, and funds for replenishing materials and technical resources.

As the peers learn during the discussion with UG's management, UG as a private university does not receive any direct funding from the Georgian government (Ministry of Education and Science) but is relying on the financial funds derived from tuition fees. All revenues are centralized at the university and then distributed to the schools according to their financial needs. Each department and each school presents an annual budget plan, so that UG's management can design a budget for the whole university.

Criterion 8.4 Administrative staff and management

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

Non-academic staff consist of administration staff, librarians, and technicians (laboratory assistants, technicians, analysts, and IT-experts). The School of Health Science usually directly recruits administrative and supporting staff members.

The representatives of various structural units of the administration directly support students of the MD programme. Administrative staff provides efficient and timely support for students, this is reflected by the results of the students' survey.

Criterion 8.5 Interaction with health sector

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The programme coordinators point out that the Faculty of Medicine has a strong working relationship with the health sector in Georgia. The cooperation exists mainly in the fields of education and research. Collaboration with "Geo Clinics" enables students to study at affiliated hospitals throughout Georgia. This offers additional opportunities to improve the learning process, especially in terms of hands-on experience with patients. To foster research and social activities, the School of Health Sciences collaborates with other medical faculties and health institutions in Georgia.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 8:

UG does not comment on this criterion in its statement.

The peers consider criterion 8 to be fulfilled.

9. Continuous Renewal

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

As described in the previous chapters, continuous renewal of the MD programme is an essential part of quality assurance system at the School of Health Sciences.

For example, there is a continuous process at UG in order to improve the quality of the degree programmes, which is carried out through internal and external evaluation. Internal evaluation of the quality of the degree programmes is mostly provided through students' feedback and focus group discussions. In addition, alumni and employers' surveys are conducted. The peers suggest that the Department of Medicine should stay in close contact with its future alumni and use their expertise and feedback for further developing the MD programme.

Α

Moreover, UG collects data about applications, enrolment and academic results. These indicators are used to analyse the programme's success and if deficits are found, they are addressed.

As an overall judgement, the peers generally find that continuous monitoring and renewal is indeed taking place and that most of the quality assurance loops are closed. Furthermore, the peer group confirms that the quality management system is suitable to identify weaknesses and to improve the MD programme. The stakeholders are involved in the process.

Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 9:

The peers appreciate that UG agrees their suggestion to stay in close contact with its future alumni and to use their expertise and feedback for further developing the MD Programme.

The peers consider criterion 9 to be fulfilled.

D Additional ASIIN Criteria

Criterion D 1.2 Name of the degree programme

Evidence:

- Self-Assessment Report
- Study plan
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The peers consider the name of the MD programme to be in line with the intended learning outcomes and the curricular content. The national and international medical community recognises the name of the programme.

The title awarded to graduates of the MD programme is Medical Doctor.

Criterion D 2.2 Work load and credits

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

The MD programme is designed for a duration of twelve semesters (six academic years) and awards 360 ECTS points. This is in full compliance with the requirements of the Georgian National Sector Benchmark and international practices.

The syllabi (module descriptions) include the required information on the students' total workload (contact hours, time for self-studies) and the awarded credits. For 30 hours of students' workload one ECTS point is awarded. The peers confirm that credits for each module of the MD programme are awarded in accordance with the requirements of Georgian legislation, which is in full compliance with the ECTS User's Guide. For details on awarding the credits and students' workload monitoring, see also chapters 2.6 and 3.2.

The students confirm during the discussion with the peers that the workload is adequate and that the curriculum is manageable within the intended time.

Criterion D 3 Exams: System, concept and organisation

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Exemplary exams
- Discussions during the audit

Preliminary assessment and analysis of the peers:

As described in the previous chapters, the MD programme does not include a thesis. However, students need to complete a research project in the 5th year of study. This course, "Research Project in Health Science" (MEDC 6140), is part of the new modified curriculum, which will be implemented in 2022. It was not offered before, so there are no students, which have already conducted the project and the peers can only base their assessment on the module description and the explanations of the programme coordinators. Accordingly, the peers are not convinced that the research project is suitable to introduce students to independent medical research activities. As the module description states, students are "participating in scientific research". From the peers' point of view, this is not enough; the final project should include some independent research activities and the scope should be more than just four ECTS points. With respect to the final project, the peers emphasise that graduates of the MD programme should be able to discuss complex medical issues as well as own research results comprehensively and in the context of current international research and present these in writing and orally. The final project should encompass an independent scientific achievement appropriate in depth to the intended level of education.

Criterion D 5.1 Module descriptions

Evidence:

- Self-Assessment Report
- Study plan
- Module descriptions
- Discussions during the audit

Preliminary assessment and analysis of the peers:

After studying the module descriptions, the peers confirm that they include all necessary information about the persons responsible for each module, the teaching methods and work load, the awarded credit points, the intended learning outcomes, the content, the applicability, the admission and examination requirements, and the forms of assessment and details explaining how the final grade is calculated.

However, the peers point out that the structure of the module description should be changed. Currently, the information about the module's content and teaching methods is too general. Instead of listing all possible teaching methods, the module description should specifically describe the exact content of each part of the course. The module descriptions need to make transparent what course is a practical class and what a theoretical one. It needs to be made clear what and how a specific topic is taught, what teaching methods are applied, and what type of exam is used in each part of the course.

However, the peers point out that the description of the modified programme is hard to find. It is only published in the rubric "news" on UG's webpage. UG should also include a link to the modified programme on the old programmes webpage link the curriculum with the respective module descriptions.

In addition, the programme coordinators should make sure that the score in the exams always adds up to 100. This is, for example, not the case in the module "Research Project in Health Science", where the sum is 110.

Criterion D 5.2 Diploma and Diploma Supplement

Evidence:

- Self-Assessment Report
- Exemplary Diploma Supplement

Preliminary assessment and analysis of the peers:

Before the onsite-visit at UG in Tbilisi, the Department of Medicine submits a sample Diploma Supplement for the MD programme. The peers confirm that the Diploma Supplement includes all necessary information about the MD programme and will be handed out to all students upon graduation.

Final assessment of the peers after the comment of the Higher Education Institution regarding the additional ASIIN criteria:

The peers appreciate that UG recognises the need to enlarge the scope of the "Research Project in Health Science". The number of credits has been increased from four to six ECTS points. At the same time two ECTS points have been taken from the Block "Operative/Perioperative Care". However, the peers point out that also the intended learning outcomes of the research project need to be adjusted, because it is essential that it includes some independent research activities. They expect that UG will provide more information on the adjusted research project and make clear, how students learn how to discuss complex medical issues as well as own research results and present them in writing and orally.

With respect to the module descriptions the peers see that UG will update them and has already provides two samples. The modified module descriptions look fine and the peers expect UG to submit the updated module descriptions for all courses in the further course of the procedure.

The peers confirm that UG has updated its website and that the details of the modified MD programme are now available in the programme section.

The peers consider the additional ASIIN criteria to be mostly fulfilled.

E Additional Documents

Before preparing their final assessment, the panel asks that the following missing or unclear information be provided together with the comment of the Higher Education Institution on the previous chapters of this report:

• none

F Comment of the Higher Education Institution (10.11.2021)

The University of Georgia provides the following statement:

Statement of the University of Georgia

First of all, we would like to express our gratitude to the peers for the highly qualified, positive and fruitful working environment that was created during the site visit and for their valuable comments, suggestions and recommendations, a part of which we already took into consideration for the further improvement of Medicine Program of the University of Georgia.

First, we would like to mention some technical issues to be clarified in the Draft Report:

a) The Draft Report refers to the Program accredited by the LEPL National Center for Educational Quality Enhancement in 2016 (Draft Report, 1. Statements of purpose and outcome, p. 7; Appendix: Program Learning Outcomes and Curricula, p. 54), which should be replaced by the learning outcomes and mission of the modified Program submitted to the ASIIN for accreditation (see Annex 63, MD Program). Unfortunately, confusion has been caused by the wrong link to the MD Program indicated in the SAR. During the site visit of the ASIIN peers, the Program description was uploaded in the News Section of the website of the School. However nowadays, according to the recommendation of the peers, it is already uploaded in the Programs Section:

https://ug.edu.ge/storage/news/Modified%20Medicine%20Program%2011.10.2021.pdf

b) The Draft Report states that enrolment in the Medicine Program is carried out by the internal exams of the University of Georgia in mathematics, biology, chemistry and physics (Draft Report, Criterion 4.1 Admission policy and selection, p. 19). We would like to clarify that the internal exams are conducted in biology, chemistry and physics only. Accordingly, we would like to ask the peers to specify this detail in the Final Report.

After the clarification of some technical issues, we will try to consistently present information regarding the activities already undertaken as well as the measures planned in the future to address the issues, suggestions and recommendations presented in the Draft Report and initially shared by the peers at the end of the site visit.

Standard 2.1, Curriculum Model and Instructional Methods

1. According to the peers, it must be ensured that all medical fields are systematically covered and that the name of the block is aligned with the actual content (Draft Report, Standard 2.1, Curriculum Model and Instructional Methods, p. 11). The same issue was mentioned during the site visit as well. As an example, the Report refers to "Cell", "Tissue I", "Tissue II". The program leadership discussed this issue within the Program Development Council, which decided to modify the Program and Module descriptions. The modifications have already been approved by the School Board, the University Program Accreditation Board, and the Academic Council of the University, in accordance with the procedures set out in the University Regulations. The names of the Teaching Blocks of the Medicine Program have been modified as follows: Basic Medical Sciences I (instead of "Cell"), Basic Medical Sciences II (instead of "Tissue I") and Basic Medical Sciences III (instead of "Tissue II"), Basic Medical Sciences IV (instead of "Energy & Metabolism"). For the evidence of the above-mentioned modifications, please, see Annex 63: Protocol of the Program Development Council, Program Approval Protocol, Modified Program Description, and samples of Module Descriptions.

2. In the Draft Report the peers for benchmarking share the best practice of integrated curricula that are implemented in the following higher education institutions: the University of Maastricht, the University of Groningen, RWTH Aachen and Heidelberg University. The Medicine Program Development Team is familiar with the curricula of the University of Maastricht and the University of Groningen and fully agrees that they could be regarded as the best practice. Unfortunately, the strict and rigid requirements of the National Medicine Sector Benchmark regarding the structure, content and methodology of medicine programs don't allow us to take into consideration the best international practice. Nevertheless, the Program Development Team will study the curricula of the proposed HEIs to identify the content and methodological aspects that could be implemented in the University of Georgia to the extent that the National Benchmarks allows.

3. In the Draft Report the peers mention that in some cases, when there are several different teachers involved in teaching the same course, communication between them could be improved (Draft Report, Standard 2.1, Curriculum model and instructional methods, p. 11). It should be noted that there are so-called Subject Curators at the University of Georgia. According to the internal regulations, curators are responsible for the selection of the lecturers, the coordination of their academic activities, leading development of the topics of midterm and final exams, etc. (for the functions of the Curator, see the Management Regulation of the University of Georgia, Article 22: https://ug.edu.ge/storage/documentations/April2021/9knfv30LDIoVk2oegn6y.pdf). In order to strengthen communication between the lecturers and improve the integrated teaching and learning process, seven staff members – as Medicine Program Curators – were added to the Department of Medicine last semester, but they need more time to produce more visible and tangible results, which will be measured by the School Quality Assurance Team in the future. The improvement of communication between the lecturers and the development of staff communication skills will be achieved through the Staff Professional Development Scheme as well. Team Teaching and Assessment Methods are among the Training Courses which will be offered to the Medicine Program Academic and Invited Staff (for the planned activities, see Annex 64, https://www.ug.edu.ge/en/jan-treningebi, Action plan Annex 65, 1; https://www.ug.edu.ge/en/trainings/ufaso-treningebi-jandacvis-skolis-akademiuri-da-administraciuli-personalis-vis). The intensification of working meetings and discussions between lecturers on teaching and assessment methodology issues is also planned.

Standard 4.1, Admission Policy and Selection

4. The peers think that it might be a good idea to offer student loans (Draft Report, Standard 4.1, Admission Policy and Selection, p. 20). Since the day of its establishment the University of Georgia has offered its student loans through its partner commercial bank Basis Bank, but due to the variability of repayment levels and interest rates, the Bank terms are quite ineffective for the students and the student loan offers are not used.

It should be noted that unfavorable conditions of student loans are considered as a big problem of the Georgian Higher Education System, which cannot be solved by the efforts of one university and requires involvement and mediation of governmental agencies. We would like to share the World Bank 2018 Report "Technical Assistance to Support Reforms to the Higher Education Financing System in Georgia" (P164779) with the peers. According to the report, "The student loans available through private banks bear unfavorable (repayment) conditions", which is regarded by the World Bank experts as one the biggest challenges for increasing access to higher education (See: https://documents.worldbank.org/en/publication/documents-reports/docu-

mentdetail/895021551184190719/technical-assistance-to-support-reforms-to-thehigher-education-financing-system-in-georgia).

Standard 5.1, Recruitment and Selection Policy

5. The peers suggest using a standardized template for the CVs of all staff members and compiling them in a staff handbook (Draft Report, Standard 5.1, Recruitment and selection policy, p. 24). This suggestion has already been considered by the School Administration and the process of transferring the staff CVs into one, standardized form has started, which will be completed before the start of the 2022-2023 academic year (See a sample of staff CV, several CVs already transformed into the new, standardized form in Annex 66).

Standard 6.1, Physical Facilities

6. The peers note the importance of corpses as one of the best ways in the process of teaching anatomy, which is indispensable for the development of relevant knowledge and skills (Draft Report, Standard 6.1, Physical facilities, p. 29). In addition, they focus on providing plastinated cadavers and an adequate and sufficient number of mannequins and models. Numerous studies have been conducted in recent years. These studies contain contradictory results regarding the need for cadaver material and its substitute, so-called plastinated cadavers, in the preclinical training in higher medical education. In the curricula

of many advanced higher education institutions the teaching of anatomy has completely shifted from full-body corpse dissection to virtual reality applications. Reasons for such shift are as follows: rising costs of cadaver laboratories; addition of new subjects to meet the requirements of international standards and the effective acquisition and mastery of clinical knowledge and skills over time; stressful environment while working with cadaver material; country-specific regulations (national legal regulation of the purchase and use of corpses for the study of anatomy is very specific).

In international practice ethical and legal guidelines dictate how to use bodies in medical education and research, and how to avoid inappropriate behavior or insults, such as the commercialization of body parts or the negligence of ethical aspects. In Georgia, these regulations and, consequently, legal and ethical considerations regarding body donation for long-term preservation, the use of corpses in teaching and the preparation of plastinates as an additional teaching tool are limited.

In current reality, the study of anatomy using the 3D format of virtual reality is firmly embedded in higher medical education, especially for first-year students, due to the following factors:

- It improves the ability, speed and mobility of acquiring the practical knowledge.
- Modern medical training practice is evolving using the simulation of virtual reality before transferring skills in a life-like environment.
- VR systems allow students to learn concepts while meeting a given patient in a real environment.
- VR systems make access to medical training wider and more flexible.
- The teaching-learning process is free of "classroom" space, allowing students to apply their knowledge in practice and learn from mistakes.
- VR systems focus on improving competencies and autonomous, mixed teaching.
- The availability of the multi-user sensory interface allows the student to imagine and interact with thousands of real human structures in 3D and transverse views of the body.
- Stress and anxiety among students are minimal.
- It provides continuous training.
- It is cost-effective.

The School of Health Sciences has already communicated with the representative of the company that created the virtual reality application (CEO Medicalholodeck). Many European universities, including the leading higher education institutions, use the service of this company at Bachelor and Master Levels of higher medical education.

In order to improve the teaching and learning of anatomy, at the first stage, a license for a one-month trial version of the VR system application and relevant support devices are being purchased. The School of Health Sciences is offered a discounted price (Correspondence is attached as evidence. See Annex 71).

It should be noted that after changes in the legislation of Georgia, nowadays it is possible to use unattended and/or unidentified dead body for educational and scientific purposes, but the educational and research institutions are responsible for ensuring that the corpse is kept for 6 months and only after 6 months used for educational and/or research purposes, which complicates the use of the corpse for educational purposes makes it non-cost-effective (<u>https://matsne.gov.ge/ka/document/view/4166580?publication=0</u>).

7. The peers point out that improvement is needed in preclinical training laboratories in anatomy, biochemistry, histology, physiology and pathology to align them with international standards. The Program Development Council has already discussed this issue and started working on the concept and timetable of establishing/modernizing the above-mentioned laboratories in close collaboration with relevant professionals. Many different activities have been planned and some of them have already been implemented in the frame of the Concept of Developing a Physiology Laboratory (the concepts and timetables of other laboratories will be developed in the nearest future).

The Concept of the Development of a Physiology Laboratory is based on the following principles:

a) The achievement of the following learning outcome – "Demonstrating the knowledge of established and evolving biomedical sciences, as well as the application of this knowledge to patient care" in order to give the students a clear picture of the role of physiological processes that take place in the human body during various diseases in the process of disease diagnosis and differential diagnosis;

b) Strengthening the student-oriented teaching and learning;

g) Strengthening interactions among the students and between the students and the lecturers.

Here are the activities already implemented by the School of Health Sciences for establishing the Physiology Laboratory:

- The Physiology Teaching Laboratory was located on the second floor of the School building;
- The laboratory equipment is being gradually equipped. A physiological kit, an oximeter, a spirometer, and an actigraph have been purchased. It is planned to purchase a myograph and other technical facilities as well (See Annex 71);

- Teaching methods (e.g. observation, heuristic) are being selected. Laboratory tasks linked to the content and checklists of appropriate assessment methods are under development;
- Conducting small scale research is planned: e.g., a) the registration of activities in the sleep-wake cycle using an activograph; b) the recording of muscle activity in different physiological conditions using a digital myograph; c) the registration of digital-heart work using a portable cardiograph; d) the registration of oxygen consumption using a (digital) oximeter during various physical activities; e) the study of lung capacity using a (digital) spirometer, etc.

In order to strengthen both the teaching and research components in Physiology, the School of Health Sciences started negotiations with Ivane Beritashvili Experimental Biomedicine Center and after the completion of procedural issues a Memorandum of Understanding will be signed in December 2021. Within the framework of this cooperation the students of the Medicine Program will be provided with the following opportunities:

• to deepen theoretical knowledge and develop relevant skills; to carry out in-depth research (e. g. observing animal behavior, studying the neuromuscular apparatus, observing animal behavior and motor activity to determine the emotional level of animals, etc.).

• to conduct research in the framework of the course "Research Project in Health Sciences".

• to participate in extracurricular scientific activities by presenting evidence-based results.

As already mentioned, similar principles will be followed while developing concepts and timetables for other laboratories. The process will finish before the start of the 2022-2023 academic year. These activities are already reflected in the School Strategic Development and Action Plans (See Annex 64, Action plan 6, Objective 6.1). The visits of the UG administration and the Medicine Department representatives to the leading Turkish HEIs (Acibadem Hospital, Medipol University, Yeditepe University) – aimed at sharing their experience in establishing and modernizing the teaching laboratories and starting collaboration – will take place on November 15-21, 2021 (See Annex 72).

Standard 6.2, Clinical Training Resources

8. The peers recommend that the students should spend more time in the hospitals and should have the opportunity to see the full breadth of possible diseases and treatment (Draft Report, Standard 6.2, Clinical training resources). The Medicine Program has experience of active cooperation with up to 30 medical institutions (See Annex 67, list of the institutions); however the program still continues developing and further enhancing the partnerships. The Medicine Department and the School of Health Sciences have taken into account the recommendation of the peers and already in October 2021 signed an agreement with the Geo Hospitals network (number of beds – 608, within 14 regions throughout

Georgia) as a base for clinical practice and research (see Annex 72). The Geo Hospitals network has more than 30 different types of medical clinics covering all levels of medical services in the regions of Georgia. The services include Emergency and Critical Care Services, Obstetrics and Gynecology, Traumatology, Pediatrics, General Surgery, Internal Medicine. In the Geo Hospitals Network Clinics the students will undergo curriculum-based medical rotations and will be provided with extracurricular activities as well.

It should also be noted that on October 22 and 25, 2021, bilateral visits between the multiprofile, fourth level hospital Open Heart (number of beds - 240) and the School of Health Sciences took place. The Project of Establishing the University Clinic was discussed during the bilateral visits. The project preparatory activities will be completed in March, 2022. The Department of Medicine offers the students 14 different extracurricular/non-mandatory clinical practice courses, which can be attended voluntarily, upon online registration on the School website: <u>https://www.ug.edu.ge/en/arasavaldebulo-klinikuri-praqtika</u>.

It is important to highlight the peculiarities of the health system management in Georgia during the Covid-19 pandemic as well. The fact is that 90% of the hospitals have switched to services for those infected with Covid-19.This was caused by a high rate of infection among the population, which in turn, is the result of a strong anti-vaccine movement. In turn, conversion of most clinics into Covid centers has significantly reduced planned patient services for a variety of diseases and limited student accessibility to the hospitals due to the Covid 19 safety reasons. In our view, this is one of the factors which caused student dissatisfaction.

Standard 6.4, Medical Research and Scholarship

9. The peers point out that it would be very useful to give students more opportunities for participation in the teachers' research activities and to familiarize them with current medical research topics e.g. by establishing a journal club (Draft Report, Standard 6.4, Medical research and scholarship, p. 32). The representatives of the UG academic staff take measures to involve the students in the research projects. For example, Associate Professor Mariam Gogichadze, who works on the phenomenon of sleep, has five students involved in her research project. These students are engaged in the development of the questionnaire, conducting the survey and interpreting the results. The results of the research of one of the students were published in the School's scientific journal (S. Bakhtiarian, "Effects of Stress Obesity Medical Students", http://caucaon among sushealth.ug.edu.ge/pdf/v3s4/Effects%20of%20Stress%20on%20Obesity%20among%20Medical%20Students.pdf). In addition, the School and the Medicine De-

partment periodically announce open competitions to attract and involve students in different research projects. For example, currently there is a competition open for the project "A Study of the Clinical and Behavioral Characteristics of the Residual Period of Covid 19 in Tbilisi Primary Health Care and Specialized Centers in 2021-2024". Information can be found on the School website and any Medicine Program student can register and apply (<u>https://www.ug.edu.ge/en/kvlevebze-registracia</u>).

Standard 6.6, Educational Exchanges

10. The peers note that the internationalisation could be fostered not only by hiring more international teachers, but also by inviting more guest lecturers, establishing more international co-operation, and organising summer courses (Draft Report, Standard 6.6, Educational exchanges, p. 33). The Strategic Development Goal 3 and the Action Plan of the School of Health Sciences envisage strengthening the involvement of foreign specialists in the program, as well as intensifying their short-term visits (e.g. ERASMUS+ and other programs) and exchange programs for UG academic/invited specialists (See Annex 64). We agree with the peers that it is important to deepen cooperation with all the existing partner universities and organizations and develop new partnerships. The School performs these tasks consistently. For example, a visit by a professor from Biruni University is scheduled for the spring 2022 semester (See Annex 68). This visit aims at sharing experience in teaching anatomy (including the use of corpses in teaching, identifying related problems and ways of addressing them), and enhancing future collaboration. Starting from July 1, 2021 the University of Georgia has an officially appointed representative of the School of Health Sciences in Turkey. The representative works in the field of medical education and services and seeks to facilitate bilateral cooperation with Turkey, one of the leading countries in the region in terms of medical education and services.

Standard 6.6, Educational Exchanges

11. The peers also point out that the academic mobility of the MD students is rather low and it is recommended to encourage and support MD students to spend a part of their medical education abroad (Draft Report, Standard 6.6, Educational exchanges, p. 33). We agree with the peers' observation and recommendation, but we would like to add that international mobility is a challenge for relatively recently established Medicine Program (2016) especially in the period of the pandemic. It should be mentioned as well that the limited mobility of MD students was identified by the Self-Assessment Team as an area for improvement (See SAR, p. 84) and many activities are already underway to address this issue. For example, two MD students will spend the next semester in Acıbadem University (Turkey) in the framework of bilateral agreement (See Annex 69).

In addition, the Attaché of Turkish Embassy in Education Yuksel Karahas strongly supported the request of the School of Health Sciences on active and multilateral cooperation with

the leading Turkish universities and clinics in the fields of medicine, public health, nursing, dentistry, pharmacy and physical medicine. For this purpose (the development of exchange programs and joint research), on November 12-21, 2021, the visit of the Head of the Medicine Program (N. Landia) and the Director of the School of Health Sciences (T. Lobjanidze) to Istanbul is scheduled (See Annex 72).

Standard 9, Continuous Renewal

12. The peers suggest that the Department of Medicine should stay in close contact with its future alumni and use their expertise and feedback to further develope the MD Program (Draft Report, Standard 9, Continuous Renewal, p. 43). We agree with the peers' suggestion and it has already been taken into consideration and reflected in the Strategic and Action Plans (See Annex 64, Action plan 2).

Standard Criterion D 3, Exams: System, Concept and Organisation

13. The peers note that the final project should include some independent research activities and the scope should be more than just four ECTS points. With respect to the final project, the peers emphasise that graduates of the MD Program should be able to discuss complex medical issues as well as their own research results comprehensively and in the context of current international research and present them in writing and orally (Draft Report, Standard Criterion D 3, Exams: System, concept and organisation, p. 46). It should be mentioned that the National Sector Benchmark is quite strict and rigid in many regards, including the student workload, independent and non-independent work and teaching methods. According to this regulatory document, the Program should ensure student participation in scientific research and participation in research is considered as a specific method to achieve the 11th Field-Specific Competence (<u>https://eqe.ge/res/New-</u> Folder%202/Medicine-SectorBenchmarks.pdf). However, the Program Development Council took into consideration the peers' recommendation and made relevant changes in the Program structure and the course "Research Project in Health Science". The number of credits increased from 4 to 6 ECTS and hours for students' independent work have also been increased (Two credits have been taken from the Block "Operative/Perioperative Care"). This change has already been approved by the Academic Council (See Annex 63).

Standard Criterion D 5.1, Module Descriptions

14. The peers point out that the structure of the module description should be changed. Currently, the information about the module's content and teaching methods is too general (Draft Report, Standard Criterion D 5.1, Module descriptions, p. 47). We would like to clarify that we submitted to the ASIIN the module descriptions/syllabi as required by the template of the ASIIN Self-Assessment Report (Criterion D 5.1, Module descriptions), but in order to address the peers' suggestion, all module descriptions/syllabi will be modified and will be detailed before the start of 2022-2023 academic year, which is already reflected in the Action Plan. A few Module Descriptions/syllabi have already been modified/detailed and we present them to the peers as an example in the annexes. The Academic Council has also approved the modified structure of the Module Description/Syllabus proposed by the Program Development Council (See Annex 63 - Protocol of the Program Development Council, Module Descriptions/Syllabi).

15. The peers identified a technical error. In the module "Research Project in Health Science" the total score was 110 instead of 100. This issue has already been solved and the modified Module Description is presented as an annex (See Annex 63).

16. The peers point out that the description of the modified program is hard to find and it is only published in the rubric "news" on the UG website. The School Administration has already solved the problem and the Program Description has been uploaded on the website of the University, in the section of the programs:

https://ug.edu.ge/storage/news/Modified%20Medicine%20Program%2011.10.2021.pdf.

Annex	Document Type	Language
Nº		
63	 a) Medicine Program Description (modified); b) Module Description/Syllabus of Basic Medical Sciences II (modified); c) Module Description/Syllabus of Family Medicine(modified); d) Module Description/Syllabus of Research Project in health sciences (modified); e) Program Development Council Protocol №11 f) Academic Council Protocol 10/21 	English/Georgian
64	Strategic Development Plan and Action Plans of the School of Health Sciences	English
65	List of trainings planned by the Training Center of the School for the 2021-2022 academic year	Georgian/English
66	a) Template of staff CV standardized formb) Two examples of CVs in standardized form	English/Georgian
67	List of partner Clinics	Georgian
68	Mobility agreement of academic staff of Biruni University, Turkey	English
69	Memorandum of Understanding between Acrbadem Mehmet Ali Aydrntar University and University of Georgia	English
70	List of Equipment for Physiology Teaching Laboratory	Georgian
71	Evidences of establishing Physiology Laboratory (Pho- tos, Confirmation letters, Orders & Payment infor- mation)	English/Georgian
72	Evidences of activities to strengthen international collaboration (Airplane Tickets, letters of the representative of the Embassy of Turkey in Georgia)	English/Georgian/Turkish
73	Memorandum of Understanding between Geo Hospi- tals & University of Georgia	Georgian

List of the additional documents submitted:

G Summary: Peer recommendations (16.11.2021)

Taking into account the additional information and the comments given by the University of Georgia, the peers summarize their analysis and **final assessment** for the award of the seals as follows:

Degree Programme	ASIIN seal	Subject-specific la- bels	Maximum duration of accreditation
MD Medicine	With requirements for one year	AMSE	30.09.2027

Requirements

- A 1. (WFME 2.1) Ensure that in the integrated curriculum all medical fields are systematically covered and that the name of the block is aligned with the actual content.
- A 2. (WFME 6.1) Submit a concept and timetable with the goal of establishing pre-clinical laboratories in anatomy, biochemistry, histology, physiology, and pathology, and align them with international standards, in order to give students a sufficient amount of hands-on experience with real human models and human samples.
- A 3. (ASIIN 3) Enlarge the scope and increase the scientific standard of the Research Project in Health Science. Make sure that the project includes independent medical research activities.
- A 4. (ASIIN 5.1) The course descriptions need to make transparent what course is a practical class and what a theoretical one. It needs to be made clear what and how a specific topic is taught, what teaching methods are applied, and what type of exam is used in each part of the course.

Recommendations

- E 1. (WFME 2.3) It is strongly recommend to provide students with the opportunity to practise directly with human corpses in the anatomy laboratories.
- E 2. (WFME 6.6) It is recommend to further increase the students' opportunities for taking part in international educational exchanges and to encourage students to spend some part of their medical education abroad.

- E 3. (WFME 6.2) It is recommended to give students more time in the hospitals and to have the opportunity to see the full breadth of possible diseases and treatments.
- E 4. (WFME 6.4) It is recommended to give student more opportunities for participating in the teachers' research activities and to become familiar with current medical research topics e.g. by establishing a journal club.

H Comment of the Technical Committee 14 - Medicine (22.11.2021)

Assessment and analysis for the award of the ASIIN seal and the AMSE quality label:

The Technical Committee discusses the procedure that was carried out in October as an onsite-procedure. It acknowledges the satisfaction of the students, the high proportion of female lecturers, the small cohort sizes, the good OSCE equipment, and the involvement of all stakeholders in the further development of the programme.

The University of Georgia is a private university, the six-year long MD programme is offered since 2016/17, so there are no graduates yet. The main criticisms of the peers relate to the technical equipment of the laboratories, the module descriptions, the final thesis, the modularisation, the involvement of students in research projects, and the patients' contact.

In summary, the Technical Committee agrees with the assessment of the peer group.

Degree Programme	ASIIN-seal	Subject-specific label	Maximum duration of accreditation
MD Medicine	With requirements for one year	AMSE	30.09.2027

The Technical Committee 14 – Medicine recommends the award of the seals as follows:

I Decision of the Accreditation Commission (07.12.2021)

Assessment and analysis for the award of the ASIIN seal and the AMSE quality label:

The Accreditation Commission discusses the procedure, especially the necessary improvement of the pre-clinical laboratories. The AC confirms the peers' point of view that it is essential to establish pre-clinical laboratories, which are aligned with international standards. In summary, the AC follows the peers' assessment.

The Accreditation Commission for Degree Programmes decides to award the following seals:

Degree Programme	ASIIN seal	Subject-specific la- bels	Maximum duration of accreditation
MD Medicine	With requirements for one year	AMSE	30.09.2027

Requirements

- A 1. (WFME 2.1) Ensure that in the integrated curriculum all medical fields are systematically covered and that the name of the block is aligned with the actual content.
- A 2. (WFME 6.1) Submit a concept and timetable with the goal of establishing pre-clinical laboratories in anatomy, biochemistry, histology, physiology, and pathology, and align them with international standards, in order to give students a sufficient amount of hands-on experience with real human models and human samples.
- A 3. (ASIIN 3) Enlarge the scope and increase the scientific standard of the Research Project in Health Science. Make sure that the project includes independent medical research activities.
- A 4. (ASIIN 5.1) The course descriptions need to make transparent what course is a practical class and what a theoretical one. It needs to be made clear what and how a specific topic is taught, what teaching methods are applied, and what type of exam is used in each part of the course.

Recommendations

- E 1. (WFME 2.3) It is strongly recommended to provide students with the opportunity to practise directly with human corpses in the anatomy laboratories.
- E 2. (WFME 6.6) It is recommended to further increase the students' opportunities for taking part in international educational exchanges and to encourage students to spend some part of their medical education abroad.
- E 3. (WFME 6.2) It is recommended to give students more time in the hospitals and to have the opportunity to see the full breadth of possible diseases and treatments.
- E 4. (WFME 6.4) It is recommended to give student more opportunities for participating in the teachers' research activities and to become familiar with current medical research topics e.g. by establishing a journal club.

J Fulfilment of Requirements (09.12.2022)

Analysis of the peers and the Technical Committee (02.12.2022)

Requirements

A 1. (WFME 2.1) Ensure that in the integrated curriculum all medical fields are systematically covered and that the name of the block is aligned with the actual content.

Initial Treatment	
Peers	Not fulfilled
	Vote: unanimous
	Justification: UG has renamed the blocs in a way that corre-
	sponds with the peers' ideas, but the content of the courses has
	not been changed. The peers point out that the core medical and
	biomedical areas such as Pathology, Pathophysiology , Pharmacol-
	ogy, Medical Genetics, Immunology, Microbiology, Anatomy, His-
	tology, Biophysics, Biochemistry, and Physiology need to be suffi-
	ciently covered. It is not clear from the provided documents that
	this is the case.
TC 14	Not fulfilled
	Vote: unanimous/per majority
	Justification: The TC agrees with the peers' opinion.

A 2. (WFME 6.1) Submit a concept and timetable with the goal of establishing pre-clinical laboratories in anatomy, biochemistry, histology, physiology, and pathology, and align them with international standards, in order to give students a sufficient amount of hands-on experience with real human models and human samples.

Initial Treatment	
Peers	not fulfilled
	Vote: unanimous
	Justification: UG has submitted information on the equipment of
	the already existing anatomy and physiology labs, but no con-
	crete information with respect to the establishment of other pre-
	clinical laboratories in biochemistry, histology, and pathology
	was provided. UG must make transparent when these laborato-
	ries will be established and what equipment will be purchased.
TC 14	Not fulfilled
	Vote: unanimous/per majority
	Justification: The TC agrees with the peers' opinion.

A 3. (ASIIN 3) Enlarge the scope and increase the scientific standard of the Research Project in Health Science. Make sure that the project includes independent medical research activities.

Initial Treatment	
Peers	Fulfilled
	Vote: unanimous
	Justification: UG has enlarge the scope of the research project,
	which now includes medical research activities.
TC 14	Fulfilled
	Vote: unanimous/per majority
	Justification: The TC agrees with the peers' opinion.

A 4. (ASIIN 5.1) The course descriptions need to make transparent what course is a practical class and what a theoretical one. It needs to be made clear what and how a specific topic is taught, what teaching methods are applied, and what type of exam is used in each part of the course.

Initial Treatment	Initial Treatment	
Peers	Fulfilled	
	Vote: unanimous	
	Justification: UG has updated the course descriptions.	
TC 14	Fulfilled	
	Vote: unanimous/per majority	
	Justification: The TC agrees with the peers' opinion.	

Decision of the Accreditation Commission (09.12.2022)

The ASIIN Accreditation Commission decides to accredit the degree programme with four requirements and four recommendations as proposed by the peers and the Technical Committee.

UG has renamed the blocs in a way that corresponds with the peers' ideas, but the content of the courses has not been changed. The peers point out that the core medical and biomedical areas such as Pathology, Pathophysiology ,Pharmacology ,Medical Genetics, Immunology, Microbiology, Anatomy, Histology, Biophysics, Biochemistry, and Physiology need to be sufficiently covered. It is not clear from the provided documents that this is the case. The AC follows this assessment

UG has submitted information on the equipment of the already existing anatomy and physiology labs, but no concrete information with respect to the establishment of other pre-clinical laboratories in biochemistry, histology, and pathology was provided. UG must make transparent when these laboratories will be established and what equipment will be purchased.

Degree Programme	ASIIN seal	Subject-specific la- bels	Maximum duration of accreditation
MD Medicine	Requirements A1 and A2 not fulfilled	AMSE	prolongation for six months

The Accreditation Commission decides to award the following seals:

K Fulfilment of Requirements (23.06.2023)

Analysis of the peers and the Technical Committees (12.06.2023)

Requirements

A 5. (WFME 2.1) Ensure that in the integrated curriculum all medical fields are systematically covered and that the name of the block is aligned with the actual content.

Initial Treatment	
Peers	Not fulfilled
	Vote: unanimous
	Justification: UG has renamed the blocs in a way that corre-
	sponds with the peers' ideas, but the content of the courses has
	not been changed. The peers point out that the core medical and
	biomedical areas such as Pathology, Pathophysiology, Pharmacol-
	ogy , Medical Genetics, Immunology, Microbiology, Anatomy, His-
	tology, Biophysics, Biochemistry, and Physiology need to be suffi-
	this is the case
TC 14	Not fulfilled
10 14	Vote: unanimous/per majority
	Justification: The TC agrees with the peers' opinion.
AC	Not fulfilled
	Vote: unanimous
	Justification: UG has renamed the blocs in a way that corre-
	sponds with the peers' ideas, but the content of the courses has
	not been changed. The peers point out that the core medical and
	biomedical areas such as Pathology, Pathophysiology, Pharmacol-
	ogy, Medical Genetics, Immunology, Microbiology, Anatomy, His-
	tology, Biophysics, Biochemistry, and Physiology need to be suffi-
	ciently covered. It is not clear from the provided documents that
	this is the case.
Second Treatme	nt
Peers	Fulfilled
	Vote: unanimous/per majority

	Justification: UG has thoroughly revised seventeen modules com- prising all of the core medical topics including theoretical and clinical subjects.
TC 14	Fulfilled
	Vote: unanimous
	Justification: TC follows the peers' assessment.

A 6. (WFME 6.1) Submit a concept and timetable with the goal of establishing pre-clinical laboratories in anatomy, biochemistry, histology, physiology, and pathology, and align them with international standards, in order to give students a sufficient amount of hands-on experience with real human models and human samples.

Initial Treatment	
Peers	not fulfilled
	Vote: unanimous
	Justification: UG has submitted information on the equipment of
	the already existing anatomy and physiology labs, but no con-
	crete information with respect to the establishment of other pre-
	clinical laboratories in biochemistry, histology, and pathology
	was provided. UG must make transparent when these laborato-
	ries will be established and what equipment will be purchased.
TC 14	Not fulfilled
	Vote: unanimous/per majority
	Justification: The TC agrees with the peers' opinion.
AC	Not fulfilled
	Vote: unanimous
	Justification: UG has submitted information on the equipment of
	the already existing anatomy and physiology labs, but no con-
	crete information with respect to the establishment of other pre-
	clinical laboratories in biochemistry, histology, and pathology
	was provided. UG must make transparent when these laborato-
	ries will be established and what equipment will be purchased.
Second Treatmen	nt
Peers	Not fulfilled
	Vote: unanimous
	Justification: UG fully relies on virtual labs and has even in-
	creased their implementation. This is contrary to the recommen-
	dations of the peers, especially regarding practical work in anat-
	omy, histology and physiology. The minimum requirement was to
	ensure "hands-on" experience using plastic or plastinated models
	and manikins. Digital anatomy is valuable as an add-on technique
	(and is used as such in several German Medical Faculties). How-
	ever, it can never serve as a substitute for the direct, hands-on
	experience. Even if UG feels unable to use cadavers, there are
	many high quality models that can be purchased on the interna- tional market. In addition, there is no physiology practicum.
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TC 14	Fulfilled
	Vote: unanimous
	Justification: The Technical Committee emphasizes that there are
	no scientific studies that prove that virtual anatomy is inferior to
	classical anatomy. However, it is important to report back to the
	university that practical training in the field of anatomy still needs
	to be improved, because both the physicians in the teaching hos-
	pital and the students confirmed during the audit that there are
	deficits in the field of anatomy. To address these concerns, the
	Technical Committee decides to consider requirement A2 as ful-
	filled but at the same time to limit the accreditation period to
	three years. This is to give the university the opportunity to im-
	prove practical training in the field of anatomy. A note to this ef-
	fect should be included in the decision letter to the university.

Decision of the Accreditation Commission (23.06.2023)

The AC decides that all requirements are fulfilled.

Degree Programme	ASIIN seal	Subject-specific la- bels	Maximum duration of accreditation
MD Medicine	All requirements ful- filled*	AMSE	30.09.2025

The Accreditation Commission decides to award the following seals:

*Note in the decision letter to the university:

"The students need to receive more practical hands-on experience in anatomy. It should be verified with the doctors in the teaching hospitals where in anatomy the students have deficits in order to implement a better education in these areas."

Appendix: Programme Learning Outcomes and Curricula

According to the programme's webpage, the following **objectives** and **learning outcomes** (intended qualifications profile) shall be achieved by the MD Programme:

"Knowledge and understanding

- 1. Demonstrates knowledge of established and evolving biomedical sciences, as well as the application of this knowledge to patient care.
- Demonstrate knowledge of human development throughout the lifespan and its impact on health and disease.
- Demonstrates knowledge of established and evolving principles of social-behavioral sciences to provision of patient care, including assessment of the impact of psychosocial-cultural influences on health, disease, careseeking, care compliance, and barriers to and attitudes toward care.
- Demonstrates knowledge of pharmacology and how to evaluate options for safe, rational and optimal application of drug therapy.
- Demonstrates knowledge of established and evolving principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations.
- 6. Demonstrates knowledge of established and emerging principles of clinical sciences to diagnostic and therapeutic decision-making, clinical problem solving, and other aspects of evidence-based health care.
- Demonstrates understanding of medical ethics, human values, legal principles, quality improvement and patient safety and their implications for provision of safe, equitable and patient-centered care.
- Demonstrates understanding of the health service and healthcare systems and patient journey through the full range of healthcare and social care settings.
- 9. Demonstrates understanding of biomedical scientific principles, method and knowledge to medical practice.
- Demonstrates knowledge of established and evolving scientific method and approaches to research and scholarship.

Skills

- 1. Demonstrates patient-centered interview skills.
- Demonstrates collaborative decision-making skills with patients, families and interprofessional team members.
- 3. Demonstrates communication effectively, openly and honestly with confidentiality appropriately.
- Demonstrates the essential and accurate information gathering about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging, and other tests.
- Demonstrates clinical reasoning (information gathering, hypotheses generation, problem representation, differential diagnosis, leading of working diagnosis, diagnostic justification, management and treatment) in gathering focused information relevant to a patient's care.
- Demonstrates clinical judgements when considering or providing compassionate interventions or support for patients who are nearing or at the end of life.
- 7. Demonstrates prescribing drugs safely, effectively and economically.
- 8. Demonstrates providing first aid in emergency medical situations (First aid and resuscitation measures).
- 9. Demonstrates providing practical procedures safely and effectively.
- Demonstrates awareness and skill in using information technology to access accurate and reliable medical information.
- 11. Demonstrates skill in appraising sources, content, and applicability of evidence.
- 12. Demonstrates communication effectively, openly, and honestly with confidentiality appropriately.

Attitudes & Responsibility

- 1. Demonstrates appropriate generic personal values and behaviors, adherence to sensitivity to a diverse patient population and vulnerable patient population.
- Demonstrates professional and legal responsibilities, the adherence to high ethical and moral standards, principle of social justice and responding to societal needs.
- Demonstrates the clinical responsibilities and dedicating themselves to developing, refining and modifying the seven characteristics of the modern doctor throughout their career.
- 4. Demonstrates social responsibility to the needs of patients and society that supersede self-interest.
- Demonstrates accountability to patients, society, and the profession, individual physicians and the profession taking responsibility for physician behaviors.
- Demonstrates humanism compassion, empathy, honor, integrity and respect in dealing with self, patients, team members and other colleagues.
- 7. Demonstrates honesty, efficiency in communication, clinical knowledge and skills.
- 8. Demonstrates altruism the interests of patients guide physician behavior.
- 9. Demonstrates confident, personal viewing the patient as a person rather than a disease.
- Demonstrates the safely practice, participate in and promote activity to improve the quality and safety of
 patient care and clinical outcomes.
- Demonstrates developing others, supporting patients, colleagues and organizations to achieve their goals through teamwork, education, leadership, advocacy and innovation.
- Demonstrates excellence commitments to competence, life-long learning, continuous improvement and the advancement of knowledge.
- 13. Demonstrates Curiosity, skepticism, objectivity to the practice of medicine and research.

The following **curriculum** is presented:

Code	Subject	ECTS	•	Seme	ster
	Program Core			-	
MEDC 1110	Introduction to Basic Medical Sciences	7		T	
MEDC 1120	Basic Medical Sciences I	7		1	
MEDC 1130	Introduction to Clinical Practice I	7		T	
KART 1110	Georgian Language for Medical Education I	3		I	
MEDC 1230	Basic Medical Sciences II	6		Ш	
MEDC 1240	Basic Medical Sciences III	8		Ш	
MEDC 1250	Basic Medical Sciences IV	6		Ш	
MEDC 1260	Scientific Research and Project Course I		7		П
KART 1210	Georgian Language for Medical Education II		3		Ш
MEDC 2160	Cardiovascular System		6		Ш
MEDC 2170	Respiratory System		6		Ш
MEDC 2180	Gastrointestinal System and Metabolism		8		Ш
MEDC 2130	Introduction to Clinical Practice II		7		Ш
KART 2110	Georgian Language for Medical Education III		3		Ш

0 Appendix: Programme Learning Outcomes and Curricula

MEDC 2210	Nervous system	8	IV
MEDC 2220	Urogenital and Endocrine Systems	8	IV
PHMC 2210	Biostatistics and Epidemiology	6	IV
MEDC 2260	Scientific Research and Project Course II	5	IV
KART 2210	Georgian Language for Medical Education IV	3	IV
MEDC 3110	Infectious Diseases & Hematopoietic System	7	v
MEDC 3120	Cardiovascular & Respiratory Systems	7	V
MEDC 3130	Gastrointestinal System	7	v
MEDC 3140	Medical Ethics and Medical Law	6	V
PHMC 3110	Public Health and Social Medicine	6	v
MEDC 3210	Endocrine, Reproductive & Urinary Systems	8	VI
MEDC 3220	Nervous System and Psychiatry	7	VI
MEDC 3230	Musculoskeletal System	5	VI
MEDC 3240	Patient Safety and Quality Improvement	7	VI

0 Appendix: Programme Learning Outcomes and Curricula

MEDC 4110	Family Medicine	9	VII
MEDC 4120	Emergency Care	6	VII
MEDC 4130	Hospitalized Adult Care I (Internal Medicine I)	9	VII
PHMC 1130	Community Medicine and Health Promotion	6	VII
MEDC 4210	Hospitalized Adult Care II (Internal Medicine II)	30	VIII
MEDC 5110	Infant, Child & Adolescent Care	11	IX
MEDC 5120	Neurologic Care	10	IX
MEDC 5130	Psychiatric Care	9	IX
MEDC 5210	Operative & Perioperative care I	10	x
MEDC 5220	Obstetrics & Gynecology	11	x
PHMC 1140	Global Health and Healthcare Management	6	x
MEDC 6110	Operative & Perioperative care II	20	X1
MEDC 6120	Medical Law and Forensic Medicine	4	XI
MEDC 6140	Research Project in Health Sciences	6	XI
MEDC 6210	Advances Experiences in Clinical Medicine	15	XII
	Credits sum:	333	

Code	Subject	ECTS	Semester
	Clinical Electives		
MEDC 6220	Preparatory course for Entering Residency (EPAs)	3	XII
MEDC 6230	Family Medicine Internship Program	12	XII
MEDC 6240	General Surgery & Emergency Internship Program	12	XII
MEDC 6250	Internal Medicine Internship Program	12	XII
MEDC 6260	Obstetrics & Gynecology Internship Program	12	XII
MEDC 6270	Pediatrics Internship Program	12	XII
MEDC 6280	Psychiatry Internship Program	12	XII
	Non-Clinical Electives	1	
PSYC4111E	Age Psychology	3	VI or X
PSYC1275E	Social Psychology	3	VI or X
MGMT2121E	Leadership	3	VI or X
MGMT5797E	Sociology	3	VI or X
MKTG4550E	Social Media Marketing	3	VI or X
COMM4135E	Technique of Public Speaking	3	VI or X
INFO3253E	Introduction to Cyber Security	3	VI or X
HELM 4150E	SPSS: Data Analysis and Formation in healthcare	3	VI or X
MEDC 1111	Medical Tourism and Telemedicine	6	1

To complete the program, the student is required to accumulate 27 ECTS credits from the offered 111 ECTS credit elective courses listed below:

0 Appendix: Programme Learning Outcomes and Curricula

ENGM 1110	English for Modical Education	6	1
	Eligibili for Medical Education	0	1