

Volume 1

MEDICAL SCHOOLS OF IRAN

Rankings and Database

A product of Stratification of Educational Services

Ministry of Health and Medical Education
Deputy Ministry for Education and Student Affairs

Aeen Mohammadi, MD, MPH
Rita Mojtahedzadeh, MD, MPH
And the Ranking Team

Supervision:
Abdollah Karimi, MD
Deputy Minister for Education and Student Affairs

English translation:
Niloofer Salesian, MD
Alireza Asary
Ali Rastegarpour

Mohammadi, Aeen

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First edition

Page design and lay out by Pejman Jamili
Cover design by Esmacel Kia Moghaddam

Contributors

Medical education expert panel

Shahram Yazdani, MD
Kamran Soltany Arabshahi, MD
Seyed Ashrafoddin Gooshegir, MD
Masoud Naseripour, MD
Aeen Mohammadi, MD, MPH
Rita Mojtahedzadeh, MD, MPH
Ramin Motarjemi, MD

Medical basic sciences expert panel

Saleh Zahedi Asl, MD
Yusef Sadeghi, MD
Fatemeh Maleki, MD
Saeed Sarkar, MD
Hossein Keshavarz, MD
Akbar Mirsalehian, MD

Ranking team

Nariman Khabbaznia, MD; Atousa Ariana, MD; Seyed Ahmad Raeesossadat, MD; Nazila Khanahmadi, MD; Mohsen Shatti, MD; Seyed Amir Ali Raeesossadat, MD; Abolfazl Mohammadi, MD; Atefeh Sanjari; Farnia Nazari; Vida Rashmeyi

Other staff

Soheil Sa'adat, MD; Hossein Karim, MD; Roxana Bahrami, MD; Ramin Mehrdad, MD; Hamid Reza Farrokh Eslamlou, MD; Gholamreza Pouryaghub, MD; Anahita Enzevaei, MD; Sara Emami, MD; Mehdi Hosseinpour Rajabi, MD; Maryam Khaleghi, MD; Sa'adat Torabian, MD; Amir Mazyar Niayi, MD; Arash Pakseresht, MD; Behnaz Shekarabi, MD; Sasan Beheshti, MD; Hamid Reza Fonouni, MD; Ahmad Hashemian, MD

Computer programmer: Amir Abbas Jafarzadeh

References

Sanjesh Organization

National University Entrance Examination, Konkour, scores; medical schools' capacities

High Council of Medical Education Planning, Deputy Ministry for Education and Student Affairs

Medical courses, and educational regulations

Medical Education Development Center, Deputy for Education and Student Affairs

Current majors and programs of medical universities

Council for Expansion, Supervision and Evaluation of Medical Universities

Universities' and faculties' constitution

Secretariat of the Council for Education in Medical Basic Science Education, Public Health, and Post Graduate

Scores of the Comprehensive Examination on Basic Sciences, list of the board certified specialists

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Hamid Honarpisheh, MD, PhD

Secretariat of Medical Education and Postgraduate Council

Kourosh Parand, PhD

Sanjesh Organization

Amir Javadi

Secretariat of Graduate Medical Education Council

Hassan Tourani

Unit of Statistics and Computerized Services

Marjan Salimi

Sanjesh Organization

Dariush Haghnejad

Secretariat of Graduate Medical Education Council

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Medical schools' deans and Rankings representatives:

(The positions are at the time of the Project)

Arak

Alireza Sousanabadi, MD (dean); Maryam Rafiyyi (registrar, Rankings representative)

Army

Mohammad Hossein Farahvash, MD (dean); Mohammad Afshar Ardalan, MD (registrar, Rankings representative)

Ardabil

Dariush Savadi Oskouyi, MD (dean); Samad Ne'mati (registrar, Rankings representative)

Ahvaz

Hatam Bostani, MD (dean); Parviz Rafiyyi (deputy for educational affairs and postgraduate education, Rankings representative)

Babol

Seyed Farzad Jalali, MD (dean); Khodabakhsh Javanshir (faculty member, Rankings representative)

Baqiyatallah University

Behzad Eynollahi, MD (dean); Mohammad Razzazan (director of educational planning, Rankings representative); Reza Gaeeni (master's in planning, Rankings representative)

Bandar Abbas

Alireza Sobhani, MD (dean); Mehrban Shahi (director of Statistics and Medical Records Office, Rankings representative)

Birjand

Reza Ghaderi, MD (dean); Araz Ghourchayi, MD (faculty member, Rankings representative)

Boushehr

Khadijeh Ghassemi, MD (dean); Azadeh Azemian (administrations, Rankings representative)

Fasa

Abdolali Ebrahimi, MD (dean); Masoud Hosseinzadeh, MD (faculty member, Rankings representative)

Gorgan

Mohammad Reza Mohammadi, MD (dean); Kazem Kazemnejad, MD (deputy of clinical training, Rankings representative)

Hamadan

Mohammad Mahdi Taghdiri, MD (dean); Mohammad Hossein Bakhshayi, MD (faculty member, Rankings representative)

Ilam

Vahid Yusefi, MD (dean); Morteza Hosseinzadeh, MD (director of EDC office, Rankings representative)

Iran

Seyed Mahdi Modarreszadeh, MD (dean); Hamidollah Bahador (faculty member, Rankings representative)

Isfahan

Habibollah Taban, MD (dean); Seyed Reza Eshaghi, MD (deputy of educational affairs and postgraduate education, Rankings representative)

Jahrom

Hamid Reza Eftekharian, MD (dean); Hossein Hakimollahi, MD (registrar, Rankings representative)

Kashan

Davoud Aghadoust, MD (dean); Ahmad Khorshidi, MD (deputy of University's medical education, Rankings representative)

Kerman

Nahid Eftekhari, MD (dean); Seyed Ali Mohammad Arabzadeh, MD (deputy of education, Rankings representative)

Kermanshah

Jalal Shakeri, MD (dean); Seyed Hamid Madani, MD (deputy of basic science education, Rankings representative); Mozaffar Khazayi, MD (deputy of clinical training, Rankings representative)

Khoramabad

Abdolreza Kheirollahi, MD (dean); Majid Akbari (faculty member, Rankings representative)

Mashad

Mahmoud Mahmoudi, MD (dean); Shadi Sepehri, MD (Rankings representative)

Orumieh

Nader Yashapour, MD (dean); Javid Fereydouni (registerar, Rankings representative)

Qazvin

Davoud Keshavarz, MD (dean); Parvin Yakhchaliha (educational services, Rankings representative)

Rafsanjan

Gholamreza Asadi Karam (dean); Alireza Rezayi zadeh (bachelor of anatomy, Rankings representative)

Rasht

Seyed Alaeddin Asgari, MD (dean); Kobra Ghamkhari Tarigheh (educational services, Rankings representative)

Sanandaj

Mahdi Tayyebi Arasteh, MD (dean); Seyfollah Mohseni, MD (educational deputy, Rankings representative)

Sari

Asadollah Mohseni Kiasari, MD (dean); Mahshid Saberi (education and student affairs, Rankings representative)

Semnan

Mohammad Faramoush, MD (dean); Mojtaba Malek, MD (faculty member, Rankings representative)

Shahed

Seyed Saeed Seyed Mortaz, MD (dean); Saeed Mer'ati (registrar, Rankings representative)

Shahid Beheshti

Masoud Mardani, MD (dean); Houshang Khazan, MD (faculty member, Rankings representative)

Shahrekord

Faramarz Mohammad Ali Beygi, MD (dean); Kourosh Manouchehri Nayini, MD (faculty member, Rankings representative)

Shiraz

Fardin Eghtedari, MD (dean); Mohammad Hossein Ghadami Sadrabadi, MD (public relations, Rankings representative)

Tabriz

Mohammad Barzegar, MD (dean); Mohammad Hassan Kargar Maher, MD (deputy of education, Rankings representative)

Tehran

Hossein Soleimani Asl, MD (dean); Fereshteh Hosseinabadi (educational services, ranking representative); Khadijeh Tajfar (director of medical programs, Rankings representative)

Yasouj

Mohammad Reza Nikhbakht, MD (dean); Kourosh Negintaji (registrar, Rankings representative)

Yazd

Mohammad Rafiyan, MD (dean); Seyed Mahmoud Ghoreishian, MD (deputy of research and basic science, Rankings representative)

Zahedan

Bahram Heshmatipour, MD (dean); Parviz Reza Amirlofti (educational supervisor, university's educational deputy, Rankings representative)

Zanjan

Alireza Khademolhelleh, MD (dean); Jamshid Mohammadi (master's in education, Rankings representative)

Ardabil Islamic Azad

Azizollah Adib, MD (dean); Masoud Babayi, MD (EDC director, Rankings representative)

Mashad Islamic Azad

Javad Rezayi, MD (dean, Rankings representative)

Najafabad Islamic Azad

Morteza Siadat, MD (dean); Dariush Rokni (director of planning and budgeting, Rankings representative)

Tabriz Islamic Azad

Fereydoun Dibazar, MD (dean, Rankings representative)

Tehran Islamic Azad

Seyed Hossein Yahyavi, MD (deputy of Islamic Azad University's medical sciences); Hamid Reza Ma'soumi Nayini, MD (faculty member, Rankings representative)

Tonkabon Islamic Azad

Lotfali Shabani, MD (dean); Manouchehr Amirfirouzkoobi, MD (deputy of research, Rankings representative)

Yazd Islamic Azad

Mohammad Salehi, MD (dean); Abbas Pourhosseini, MD (deputy of education, Rankings representative)

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FOREWORD

Practicing modern educational techniques, improving the standards of the higher education institutes, and eventually promoting the graduates' knowledge and skill have been globally pursued via different approaches. Especially, improving the standards of biomedical schools is of great concern for its impacts on the public health, so that there are several accreditation bodies which deploy a variety of systems for evaluation, accreditation, and ranking of biomedical schools.

In Iran, the Ministry of Health and Medical Education is in charge of the accreditation of medical science universities. To establish efficient modern systems of evaluation, accreditation and ranking, and also for internal and external evaluations that have been incorporated in the working plans of the Deputy Ministry for Education and Student Affairs, short- and long-term strategies have been adopted.

Clearly, fulfilling academic standards is not a sufficient justification for maintaining tradi-

tional educational institutions; and in macromanagement, the nation's need for certain programs must be given the priority. Even in developed countries, several schools and higher education institutes have been closed or transformed despite their high credibility and reputation.

All the above explains how biomedical educational service providers must first be evaluated, and their educational mission and developmental capabilities be certified, and just thereafter go through the systems of accreditation for their major-programs.

This issue had been a priority at the Secretariat of Education and Student Affairs and was later solidified as *Stratification of the Educational Services*.

The preliminary investigations revealed that first the educational services of individual institutes needed to be evaluated for each major-program to determine their stance among their peers, and then their data could be used in *Stratification of Educational Services*. This phase that 'accounts for a major portion of *Strategy Compilation for Educational Missions of the National System of Medical Education* has been carried out in collaboration with the councils of the Secretariat of Educational and Student Affairs.

Although the full data on all the major-programs will appear in *Stratification of Educational Services* report, each part can be independently presented as byproducts of the project to schools' authorities and policy makers

The followings can be derived from analysis of the results of *Stratification*:

- 1- Determining the developmental limits and current stance of the educational programs, institutes, physical spaces, and amenities,
- 2- Assessing the productivity of the nation's educational institutes and defining their products,
- 3- Laying a solid base for the Secretariat of Supervision, Evaluation and Expansion of Medical Universities to assign educational missions to current institutes,
- 4- Optimizing the institutions' budget and facilities based on their academic profile and priorities,
- 5- Introducing the country's educational summits and assigning them new missions,
- 6- Fostering constructive competition among universities, supporting them to overcome their shortcomings and boost their points of strength,
- 7- Devising a geographical zone-based program guideline for university applicants,
- 8- Restructuring the low-yield programs to meet the nation's needs,
- 9- Introducing the capabilities and educational services of the Iranian institutions.

By introducing better schools, we hope to set a practical example for others and provide the incentive for improvement. The rankings are recommended on a continual basis to keep up with the changes of higher education system.

Abdollah Karimi, MD
Deputy Minister for Education and Student Affairs,
Ministry of Health and Medical Education

PREFACE

In developed countries, there is a tandem relationship between the higher education institutes and the society's demand for graduates of different disciplines. Therefore, those institutions are established within specific frameworks: every institute has a mission statement with clear objectives, and accordingly plans the number of admissions, and educational level(s) of its graduates. Therefore, the expansion of these schools tends to be rather qualitative. Moreover, the implementation of well-documented and dynamically evaluated educational regulations and standards insures high-quality of training and consequently leads to efficient graduates.

Unfortunately, in our country, a period of pressing needs for the medical staff led to a surge of many new universities and faculties regardless of the quality and quantity of their programs or the society's long term expectations. The existing universities also had to expand disproportionately.

A close look at the history of the higher education institutes, especially the satellite facul-

ties, reveals that most of them were founded merely on false regional demands and local authorities' ambitions, and not to meet the nation's educational goals and not even considering the local potentials. This led to establishing a faculty or institute of some kind, no matter what disciplines were to be provided, despite the fact that the students admitted to those institutes would come from all over the country, and eventually the graduates would leave the region to serve in quite different places.

Thus the aforementioned facts entailed a re-inspection of the universities of medical sciences for an evidence-based qualitative and quantitative stratification to help them devise their mission statements in accordance with the nation's expectations. Now, this is even more evident, since the relative increase in the number of biomedical graduates has helped to alleviate the past intense demands, and the authorities have consented to favor quality over quantity.

Since the year 2002, the stratification of the educational services and the improvement of institutions of medical sciences have become a priority. Several accessible and practical ranking methods were explored till finally solidified as a comprehensive and independent project for meticulous quantitative and qualitative evaluation of both the programs and the institutions. The project was placed on the top of the agenda of the Secretariat of Education and Student Affairs. The ranking team were assigned to carry out the Project on the basis of their theoretical and executive abilities, as well as their experience of *Comprehensive National Rankings of the Medical Schools*.

* * *

Upon the approval of the Project, the planning phase officially started. Considering the theoretical and practical complexities of compiling the first edition of *Comprehensive National Rankings of the Medical Schools*, its second edition posed quite a challenge. The second edition that included all branches of medical sciences would increase the amount of work by tens. This mandated a careful planning and scheduling of every stage of the Project's implementation.

Initially, several sessions were held to define the elements, objectives, methods and implications of *Stratification of Educational Services*. The core members of those sessions later formed the Project's Medical Education expert panel.

Soon we felt that the basic information at the level of faculties and the quality and quantity of educational service provision by them were the prerequisites of any further comparison. So, we introduced the demanding and time consuming phase of the Project as *Strategy Compilation for Educational Missions of the National System of Medical Education*.

The first step was to identify the major-programs provided by the medical schools. Data collection for this phase took nearly 1 month, as there were no organized and up-to-date information sources available.

As the next step, an expert panel was assigned for each group of related major-programs to pursue the succeeding phases of the Project independently. The members were directly assigned by Dr Naseripour, the chairperson of Graduate Medical Education Council; Dr Hosseini Toudashki, the chairperson of Dental Education and Postgraduate Council; Dr Roushan zamir, the chairperson of Pharmacy Education and Postgraduate Council; Dr Keshavarz, the chairperson of Medical Basic Sciences, and Health Sciences Education and Postgraduate Council. We would like to express our heartfelt gratitude to all the above chairpersons who sincerely collaborated to and supported the Project.

All the 8 expert panels namely Medical Education and Basic Sciences, Medical, Pharmacy, Nursing, Midwifery, Health, Nutrition, Allied Health Sciences and Rehabilitation participated in a 1-day orientation workshop on the Project phases, objectives, and methodology. Then the set of criteria and indicators for evaluation of educational services, which was devised

by Medical Education expert panel, was presented to other panels as the basic template. The panels then revised the template accordingly; and eventually devised the scoring system for the criteria and indicators, and the guidelines for faculty site visits.

Next, the weight of each criterion and indicator was determined using specific methods and considering the Project's objectives. Questionnaire design (for data collection) and scoring guidelines for the criteria and indicators, and creating the Schools' Database were the next tasks for each school/program. The questionnaires were revised through several consultations and pilot studies.

To fill in the questionnaires, all the schools that provided a program were asked to introduce a representative. These representatives took part in a day workshop to get familiar with their tasks and the questionnaire, and thereafter started data gathering in their faculties. Upon the completion of the forms, a Project's representative would join the school's representative to verify the information. The final version of the collected data that was approved by the Project's representative and sealed by the school would be transferred to the Project's office.

Since a huge body of information was produced by this Project and data regarding each section could be used independently; it was decided to disseminate the information of each major-program in a separate volume. In addition to its eventual contribution to *Stratification of Educational Services and Improvement of Institutions of Medical Sciences*, each individual volume can serve the related schools as Schools' Database, and spotlight their strong and weak points, lighting up their path of improvement.

Eventually, nearly one and a half years of continuous research and endeavor by the large team yielded the results on the medical section, which is now presented. These results will be duly included in the final report of *Stratification of Educational Services*.

Accomplishing such a giant project, which is amongst the biggest educational projects in Iran, would have been absolutely impossible without the sincere collaboration of the members of the steering committee; the expert panels; over 100 Project's representatives; tens of advisors; the schools' representatives; all the departments and divisions of the Secretariat of Education and Student Affairs, to who we are deeply indebted.

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Aeen Mohammadi, MD, MPH
Principal investigator, *Stratification of Educational Services*
Deputy Ministry for Education and Student Affairs
Ministry of Health and Medical Education
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HOW TO USE THIS BOOK

The current volume comprises two main parts:

In the beginning of the first part, *Stratification of Educational Services* is introduced along with the educational rankings as a strategy to attain the stratification. Then, the Project's methodology is explained and next, the set of criteria and indicators are presented in a tree diagram format. The medical schools' rankings regarding separate criteria and indicators are presented in tables.

The second part of the book is the abridged medical schools' database. The national universities are sorted alphabetically, and the 7 Azad universities come in the end. It is highly recommended to study the instructions before getting to the database.

It must be noted that the scores are extracted from medical schools' self-reports according to the Project's questionnaire as explained in the methodology section. The original pool of information is much more detailed than what is presented here. The database published here is abridged and is solely for informational purposes.