

**University Accreditation Results**  
**(Results for Certified Evaluation and Accreditation for university)**

Hyogo College of Medicine



<b>Basic Information of the Institution</b>	
Ownership: Private	Location: Hyogo, Japan
<b>Accreditation Status</b>	
Year of the Review: 2017	
Accreditation Status: accredited (Accreditation Period: April.01.2018 – March.31.2025)	

## **Certified Evaluation and Accreditation Results for Hyogo College of Medicine**

### **Overview**

Hyogo College of Medicine (hereafter, the College) was founded as a medical college in 1972, and it established the Graduate School of Medical Research in 1978. It has campuses in Nishinomiya City and Sasayama City, Hyogo Prefecture, conducting education and research activities with the spirit of the school's founding philosophy of "Service for the Welfare of Society," "Deep Love toward Humankind," and "Profound Scientific Understanding of Human Beings,"

Following the accreditation review conducted in 2010, the College has worked to improve the matters indicated by Japan University Accreditation Association (JUAA) in the review, including the disclosure to students of course evaluation results at the School of Medicine, more active international exchanges, research supervisors no longer serving as heads of thesis or dissertation examination at the Department of Medical Research, not granting doctoral degrees to students within one year after those students leave graduate school after earning required credits, and promoting barrier-free facilities. It has been confirmed in this accreditation review that the College has made improvements with regards to those matters.

The initiatives implemented by the College based on its founding philosophy include: Team Medical Practice among healthcare professionals in the third year, Home Care (Home-Visit Nursing) Practice at home nursing stations and other community practice programs, and a peer-support system as systematic learning support, all of which are commended as the College's unique initiatives. The faculty's reappointment assessment system is also commendable.

On the other hand, the average of ratios of freshman enrollment to the freshman enrollment cap and the ratios of student enrollment to the student enrollment cap over the last five years remain high at the School of Medicine. This must be rectified.

## **Notable Strengths**

### *Educational Content, Methods, and Outcome*

- The practices related to community medicine that are carried out mainly at the Sasayama Campus include Early Clinical Exposure Practice in the first year at facilities such as rehabilitation facilities, Introduction to Community Medicine Practice in the second year at the Sasayama Medical Center, Home Care (Home-Visit Nursing) Practice in the third year at home nursing stations, and Clinical Practice in the fourth and fifth years at healthcare facilities for the elderly and other facilities. It is commendable that those programs not only provide opportunities to learn the significance of and issues in community medicine in a practical manner while leveraging the University's characteristics of unity with the local community, but they also receive a high level of satisfaction from students, as evidenced in the analysis of graduation surveys and clinical practice assessments.
- The team medicine education in collaboration with Hyogo University of Health Sciences consists of tutorials and Team Medical Practice jointly conducted by the School of Medicine, the School of Pharmacy, the School of Nursing, and the School of Rehabilitation. In particular the basic mentality regarding team medicine and the ability to find issues are cultivated in tutorials in the first year in small groups consisting of students from all of those schools, and Team Medical Practice in the third year provides TBL (team based learning) practice for five days in groups consisting of students from all of those schools. It is commendable that the College provides education to deepen mutual understanding among medical professionals and understanding of the significance of communication and the role of medical practitioners in team medicine.

### *Student Support*

- In the peer support system, which is implemented in collaboration with the students, the Medical Education Center and academic advisors, senior peer supporters give learning assistance to students who are repeating their first year (from 2017, all first year students who request peer support) by checking their

notebooks and advising on matters such as study planning, preparations for examinations and balancing study and club activities, to improve academic achievement. The Medical Education Center supports that system by providing peer supporter training, etc. and academic advisors also give advice and other support from time to time. This systematic learning support initiative is commendable.

### **Area of Serious Concern**

#### *Enrollment*

- The average of ratios of freshman enrollment to the freshman enrollment cap over the last five years and the ratio of student enrollment to the student enrollment cap in the School of Medicine are as high as 1.01 and 1.05, respectively. This issue must be addressed.