External Quality Assurance Audit Report

National Commission for
**Further and
Higher Education**
Malta

EEC-ITIS

Carried out between the 11th and
12th October 2018

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Abbreviations List

ECTS	European Credit Transfer System
EEC-ITIS	Malta Tourism and Language Institute
IQA	Internal Quality Assurance
MQF	Malta Qualifications Framework
NCFHE	National Commission for Further and Higher Education
QA	Quality Assurance

1. Executive Summary

1.1 Section A: Background

This report is a result of the External Quality Assurance process undertaken by an independent peer-review Panel. The Panel evaluated the documentation submitted by the educational institution and conducted an on-site audit visit. The Panel was responsible for giving judgments on Standards 1 and 3 – 11. As outlined in the External Quality Audit Manual of Procedures, the NCFHE sought external expertise to evaluate and give judgment on Standard 2. Through this report, the Panel also highlighted areas of good practice, which in view of an NCFHE peer review Panel, make a positive contribution to academic standards and quality and are worthy of being emulated and disseminated more widely.

1.1.1 The Peer Review Panel

The Peer Review Panel was composed of:

Chair of Panel: Ing Pierre Dalmas

External Peers: Mr Gino Schiavone

Student Peer Reviewer: Mr Christian Sammut

QA Managers (NCFHE): Ms Angelique Grech and Mr Marius Mifsud

1.1.2 Specific Terms of Reference and Main Lines of Inquiry

The general terms of reference of the Review Panel were to review the fitness for purpose and effectiveness of the internal quality assurance processes as implemented by the provider against the Standards outlined in the National Quality Assurance Framework for Further and Higher Education.

Following the preliminary meeting held with the provider on 6th September 2018 and pursuant to the documentation received from EEC-ITIS, the Panel sought to follow the specific main lines of inquiry as indicated below:

- Does EEC-ITIS deliver to its Students quality teaching, learning and assessment?

- Does the quality system set-up at EEC-I IS function efficiently and effectively?

1.2 Section B: Key Findings, Judgements and Recommendations

1.2.1 Standard 1 - Policy for Quality Assurance

Good Practice Identified

N/A

Overall judgment for Standard

Requires improvement to meet Standard 1.

- **KR1.** The provider should implement a process that facilitates direct Student feedback in its strategy development.

- **KR2**. The Panel notes the need for a deputy to the Principal such that the Institute has the necessary resources to ensure a well-planned and effective delegation of tasks and hand-over of duties. This is deemed necessary by the Panel for the continuity of the Institute and the programmes on offer.

- **R3.** The titles of 'Programme Coordinator(s)' and 'Course Coordinator' are used interchangeably in the Quality Manual, and thus requires clarification.

- **KR4.** The Institute should establish and implement appropriate performance indicators that are used to indicate and monitor performance in relation to the Institute's mission.

- **R5.** The ethics policy and principles against intolerance need to also address the interaction between Student to Student and Student to staff.

- **KR6.** The Quality Manual should include a policy for reasonable adjustments (special arrangements) or alternative forms of assessment for Students with special needs.

- **KR7.** The Institute should establish the frequency of meetings of the Board of Studies, the Examination Board and the Classification Board as well as ensure that an agenda and records of ALL the Board meetings are prepared and stored. The Institute is also required to set in operation the various Boards as set-out in the Quality Manual.

1.2.2 Standard 2 - Institutional Probity

Good Practice Identified

N/A

Judgment

Meets Standard 2.

Recommendations

- **KR1.** EEC-ITIS should prepare a fully-fledged business plan, duly aligned with its academic plan, which sets identifiable and measurable financial and volume targets for its growth and puts into place adequate policies for the continued monitoring of progress and to take necessary corrective actions in a timely and effective manner.

- **R2.** EEC-ITIS should develop a written procedure for the engagement and selection of headship posts which, although might not be in the offing in the near future, is an important procedure to have in place for when such contingency arises.

1.2.3 Standard 3 - Design and Approval of Programmes

Good practice identified

- The programme, design, development and approval process is described very comprehensively in the Quality Manual and includes best practices that, when correctly implemented, will facilitate very good oversight of the design, development and approval process.

Overall judgment for Standard

Meets Standard 3.

Recommendations for improvement

- **KR1.** The provider should seek Student and external stakeholder feedback also during the initial 'Programme Proposal' stage.

- **KR2.** The provider should ensure that the core members of the Special Committee and also the Board of Studies involved in the design, development and approval of new programmes have sufficient autonomy.

- **R3.** The scope of the design, development and approval of the Tutor teaching material is to be included as part of the 'Programme Content' process in the Quality Manual.

1.2.4 Standard 4 - Student-centred Learning, Teaching and Assessment

Good practice identified

- The assessment results are recorded on a standard template that facilitates a consistent level of quality in the way assessment decision and feedback is communicated to the Students by the Assessor.

- The Students are encouraged to submit, before the deadline of the take-home assignment, a draft of the assignment for feedback by the Tutor. The Students interviewed by the Panel confirmed that the Tutors make themselves available to provide this preliminary feedback.

- The Panel commends the good practice of 100% sampling of Student work for verification of assessment decisions.

Overall judgment for Standard

Requires improvement to meet Standard 4.

Recommendations for improvement

- **KR1.** The Student Handbook should be developed further to include information regarding policies and procedures covering, ethics, complaints, appeals, extenuating circumstances, fees for rescheduling and resit of exams, regulations regarding carrying forward of failed units and Student feedback.

- **KR2.** The Institute needs to implement its requirement regarding the use of an index number as opposed to the current practice of Student entering their names on the examination script.

- **KR3.** The Provider should consider staggering the submission deadlines of the assignments and examinations more evenly over the semester.

- **KR4.** The Provider should set-up and implement clear guidelines for the visiting Tutors on what constitutes good practice in terms of ensuring the separation of 'teaching and learning' from 'assessment'.

- **KR5**. The Provider should ensure that the Students have regular access to the corrected scripts that include, not only the Marking Sheet with the marks and general comments, but also formative feedback by the Tutors as well as access to past papers from previous cohorts.

- **KR6**: Documented evidence of the decisions by the Internal Verifier (signature, date etc.) is required both for the Internal Verification of the assignment brief (tasks) and Internal Verification of the assessment decisions, in particular, were the brief is modified following the internal verification process.

- **R7.** The Provider may include a reference in the Quality Manual to the established sampling size (currently 100 % of Student cohort size) for the post-assessment internal verification.

- **KR8.** The Institute should consider using model answers or marking schemes or grading rubrics when assessing Student work to ensure fairness and consistency when grading.

- **R9.** The Provider may implement the requirement in its Quality Manual for a viva voce for the Degree programme.

- **KR10.** The Provider should implement more consistently its policy regarding the Student feedback questionnaire at the end of each unit.

- **KR11.** The Provider should retain records of formal complaints and appeals.

- **KR12.** The Provider should identify, as part of the accredited work-based learning unit, a set of competences that need to be successfully demonstrated by the Students during the placement assessment.

- **KR13.** Policy and governance structure should allow Students to have recourse to an appeal of an academic decision or the outcome of a complaint decision and change the target of six weeks for the resolution of complaints to a matter of days.

1.2.5 Standard 5 - Student Admission, Progression, Recognition and Certification

Good practice identified

N/A

Meets Standard 5.

Recommendations for improvement

- **KR1**. Admission Board Policy and guidelines for the definition and assessment of prior learning should be documented to ensure consistency and fairness in the application of recognition of prior learning and consideration of applications by mature students.

- **KR2.** The Institute should have a policy on the actual number of maximum units that can be carried forward and on the number of times a Student can be allowed to resit the same exam without the need for repeating the unit with attendance.

1.2.6 Standard 6 - Teaching Staff

Good practice identified

- The Panel could observe, during the interviews, that the EEC-ITIS staff is committed to ensuring the best possible student experience.

- The Panel commends the high level of collegiality between the Principal and guest Tutors

Overall judgment for Standard

Meets Standard 6.

Recommendations for improvement

- **R1.** Recruitment of lecturing to be conducted through a formal interviewing Board.

- **KR2.** The current practice of 'walk-in' appraisals needs to be formalised into a schedule in order to facilitate consistency in its implementation. Also, the process for Tutor appraisal needs to be documented in the Quality Manual, including the frequency of appraisal and how the output of this appraisal process is communicated to the Tutors.

1.2.7 Standard 7 - Learning Resources and Student Support

Good practice identified

- Students appreciated the support from the EEC-ITIS representatives in particular support on non-academic matters.

- Students' access to the network of industry practitioners is commendable as it provides field support to the Students during their studies and beyond.

- The Institute gives high importance to personal and individualised approach with its students. The Principal makes it a point to know each student.

Meets Standard 7.

- **R1.** The Institute is encouraged to establish working contacts with professional service providers who can be a possible point of contact by its students dealing with anxiety, being away from home.

- **KR2.** The Quality Manual and the Student Handbook should include a provision for the extension of the submission date of an assignment due to extenuating circumstances.

1.2.8 Standard 8 - Information Management

N/A

Requires improvement to meet Standard 8.

- **KR1.** Assignment feedback is an opportunity for reflection, thus facilitating continuous improvement and should therefore be forwarded to the students together with the assessment grade/mark.

- **KR2.** The Institute should ensure that the Student questionnaires include a date showing when the questionnaire was filled in.

- **KR3.** The documentation comprising the Quality Management System should be adequately referenced and revision controlled to ensure reliable information management such that both students and staff always have in hand access to current and approved printed versions of documents.

- **KR4.** The Institute should consolidate the process of periodic analysis of data about the inputs and outputs of the quality management system.

- **KR5**. The Institute should revise the way it collects and analyses the Student satisfaction and graduate (tracer) feedback in a way that ensures that the information obtained from these studies informs the decision-making process thus resulting in the enhancement of the

student experience.

1.2.9 Standard 9 - Public Information

Good practice identified

N/A

Overall judgment for Standard

Requires improvement to meet Standard 9.

Recommendations for improvement

- **KR1.** The printed Prospectus should incorporate revision control (traceability to the year of issue).

- **KR2.** The information on the Prospectus with respect to the entry requirements, working experience, and title of the degree should be corrected/updated.

- **KR3.** The Provider should provide access to the prospective students (and staff), via the public website, the key policies and regulations.

- **KR4.** The Provider should provide details explaining the pass rate as well as the applicable fees for rescheduling and resit of examinations.

1.2.10 Standard 10 - On-going Monitoring and Periodic Review of Programmes

Good practice identified

N/A

Overall judgment for Standard

Requires improvement to meet Standard 10.

Recommendations for improvement

- C**R1.** The Institute should have in place within six months of the official communication of the EQA Audit Report appropriate arrangements for monitoring and periodical reviewing of academic programmes to ensure that these are meeting the set objectives and expectations. The Institute is also required to implement a process that facilitates direct student/alumni feedback in its cyclical review of its accredited courses**.**

- **KR2.** The Institute should evaluate whether the five-year cyclical programme is considered to be realistic in terms of ensuring that the programmes are still relevant to the world of

work after 60 months.

- **CR3.** The Institute should introduce within six months of the official communication of the EQA Audit Report a formal, structured documented internal review of the Quality Management System.

- **CR4.** The Institute should ensure that changes to the programmes are communicated to NCFHE prior to the launch of the revised programme and in any case not before the formal approval and re-accreditation of the changes by the NCFHE Accreditation Unit.

1.2.11 Standard 11 - Cyclical External Quality Assurance

Good practice identified

N/A

Overall judgment for Standard

Meets Standard 11.

Recommendations for improvement

N/A

2. About the External Quality Audit

2.1 Introduction

The External Quality Assurance audit is a tool for both development and accountability. The QA audit shall ensure that the internal quality management system of the provider is:
- fit for purpose according to the provider's courses and service users;
- compliant with standards and regulations and contributing to the development of a national quality culture;
- contributing to the fulfilment of the broad goals of Malta's Education Strategy 2014-24
- implemented with effectiveness, comprehensiveness and sustainability.

2.2 Reviewers

Evaluation subject		
Peer Panel Members	**External Peers:** • Ing Pierre Dalmas, Chair of the EQA Review Panel Mr Gino Schiavone, EQA Review Panel Member **Student Peer Reviewer:** • Mr Christian Sammut **QA Managers (NCFHE):** • Ms Angelique Grech • Mr Marius Mifsud	
Timeline	**Dates**	**Milestone**
	17th May 2018	The panel received induction and preparation.
	30th July 2018	The panel met to determine the specific terms of reference, aims, objective and research question.
	6th September 2018	Preliminary provider meeting.
	11th and 12th October 2018	On-site audit visit.

2.3 Institutional Context

EEC-ITIS is a merger of two Institutes, formerly known as Malta Tourism Institute (ITIS) and EEC Language Centre. The Institute, centrally located in San Gwann, is licensed as a Higher Education Institution by the National Commission for Further and Higher Education (NCFHE) Malta and is

accredited to offer qualification programmes at MQF level 5 up to MQF level 6.

EEC-ITIS has an agreement with IMI International Management Institute based in Switzerland. IMI is a recognised institution by the Education Department of the Swiss Canton of Nidwalden. Thanks to this partnership, graduate Students from EEC-ITIS can continue their studies at Masters level at IMI.

The Panel was informed that EEC-ITIS is represented through its Principal in the Council of the Malta Association of Hospitality Executives (MAHE).

The Council is primarily focused in the field of education in hospitality and catering. The main remit of the Council is to provide continuous professional development to employees in the tourism and hospitality sector who do not have any formal qualifications. The Principal of EEC-ITIS holds the post of an Education Officer of the Association.The Principal also informed the Panel that EEC-ITIS is also part of and participates in the Atlas network that is essentially a think-tank on tourism and innovation of the sector.

The mission of the Institute, as published on its website, is to '*provide every Student with the best possible opportunity to acquire relevant, up-to-date knowledge of the subject area of International Tourism Management and to develop skills appropriate to his or her present and likely future needs*'. The Principal explained to the Panel that EEC-ITIS Malta is committed to advance education and training for the benefit of its students and the community. The Principal explained that the Institute management is committed to providing Students with structured skills that excel beyond theoretical frameworks, enabling its Students to succeed in their day-to-day professional lives in the tourism and hospitality industry.

The Institute's Tourism Centre offers a full-time B.A. (Hons) in International Tourism and Hospitality (EQF/MQF Level 6 / 180 ECTS) with two exit points, one at the level of Higher Diploma in International Tourism and Hospitality Management (EQF/MQF Level 5 / ECTS 120) and another at the level of Diploma in International Tourism and Hospitality Management (EQF/MQF Level 5 / 60 ECTS). The Degree programme is also offered on a part-time basis over a period of five years. The Institute also offers non-accredited short courses in the English language at various levels and intensity. A total of three intakes have so far been registered with EEC-ITIS with the first intake having completed its degree programme a few months before the peer review.

The Principal explained that the Institute is working towards the accreditation of a Master's programme in collaboration with other Institutions. However, a launch date for the programme has not been established yet.

EEC-ITIS attracts both Maltese nationals and also other EU and non-EU nationals. Whereas work experience for EEC-ITIS programmes is not a mandatory entry requirement, prospective applicants need to demonstrate evidence of English language proficiency.

2.4 General Terms of Reference, Aims and Objectives of the EQA

Quality assurance in Malta is underpinned by six principles that determine the remit and function of the *National Quality Assurance Framework for Further and Higher Education*, and the relationship between internal and external quality assurance to enhance learning outcomes.

   i. The Framework is based on the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and enriched by the European Quality Assurance Reference Framework for Vocational Education and Training (EQAVET) perspective.
   ii. The Framework contributes to a National Culture of Quality, through:

- increased agency, satisfaction and numbers of service users,
- an enhanced international profile and credibility of providers in Malta,
- the promotion of Malta as a regional provider of excellence in further and higher education.

iii. The Internal Quality Assurance (IQA) is fit for purpose.
iv. The External Quality Assurance (QA audit) is a tool for both development and accountability. The QA audit shall ensure that the internal quality management system of the provider is:
- fit for purpose according to the provider's courses and service users,
- compliant with Standards and regulations and contributing to the development of a national quality culture,
- contributing to the fulfilment of the broad goals of Malta's Education Strategy 2014-24,
- Implemented with effectiveness, comprehensiveness and sustainability.

v. The Quality Improvement Cycle is at the heart of the Framework.
vi. The integrity and independence of the QA audit process is guaranteed.

The QA audit provides public assurance about the Standards of further and higher education programmes and the quality of the learning experience of students. It presents an opportunity for providers to demonstrate that they adhere to the expectations of stakeholders with regard to the programmes of study that they offer and the achievements and capabilities of students. It also provides a focus for identifying good practices and for the implementation of institutional approaches to the continuous improvement in the quality of educational provision.

NCFHE has a responsibility to ensure that a comprehensive assessment is conducted for all higher education providers in Malta. The QA audit provides an opportunity to assess the Standards and quality of higher education in Malta against the expectations and practices of provision across the European Higher Education Area, and internationally.

The QA audit examines how providers manage their own responsibilities for the quality and Standards of the programmes they offer. In particular, the following issues are addressed:

- The fitness for purpose and effectiveness of internal quality assurance processes, including an examination of the systems and procedures that have been implemented and the documentation that supports them.
- The compliance with the obligations of licence holders with established regulations and any conditions or restrictions imposed by NCFHE.
- The governance and financial sustainability of providers, including assurances about the legal status of the provider, the appropriateness of corporate structures and the competence of staff with senior management responsibilities.

The QA audit benchmarks the QA system and procedures within an institution against eleven (11) Standards:

1. Policy for quality assurance: entities shall have a policy for quality assurance that is made public and forms part of their strategic management.
2. Institutional and financial probity: entities shall ensure that they have appropriate measures and procedures in place to ensure institutional and financial probity.
3. Design and approval of programmes: self-accrediting providers shall have appropriate processes for the design and approval of their programmes of study.
4. Student-centred learning, teaching and assessment: entities shall ensure that programmes are delivered in a way that encourages students to take an active role in the learning process.
5. Student admission, progression, recognition and certification: entities shall consistently apply pre-defined and published regulations covering all phases of the student 'life-cycle'.

6. Teaching staff: entities shall assure the competence and effectiveness of their teaching staff.
7. Learning resources and student support: entities shall have appropriate funding for their learning and teaching activities and sufficient learning resources to fully support the students' learning experiences.
8. Information management: entities shall ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.
9. Public information: entities shall publish information about their activities which is clear, accurate, objective, up-to-date and readily accessible.
10. On-going monitoring and periodic review of programmes: entities shall implement the 'Quality Cycle' by monitoring and periodically reviewing their programmes to ensure their continuing fitness for purpose.
11. Cyclical external quality assurance: entities should undergo external quality assurance, approved by NCFHE, at least once every five years.

Peer-review Panels essentially ask providers the following question about their arrangements for quality management:
'What systems and procedures are in place and what evidence is there that they are working effectively?'

The approach to quality assurance can be encapsulated in a number of key questions which providers should ask themselves about their management of quality.
● What are we trying to do?
● Why are we trying to do it?
● How are we trying to do it?
● Why are we doing it that way?
● Is this the best way of doing it?
● How do we know it works?
● Could it be done better?

Answers to these questions should form the basis of the provider's critical assessment of and response to the self-evaluation questionnaire.

The approach of the QA audit is not simply about checking whether providers adhere to the regulations; it examines how providers are developing their own systems in addressing the expectations of sound management of educational Standards and the quality of their learning and teaching provision. It does not involve the routine identification and confirmation of criteria -– a 'tick- box' approach – but a mature and reflective dialogue with providers about the ways in which they discharge their obligations for quality and the identification of existing good practices.

2.5 Specific Terms of Reference and Research Questions

Following the preliminary meeting held with the provider on 6th September 2018 and pursuant to the documentation received from EEC-ITIS, the Panel followed the main lines of inquiry as indicated below:

a) Are the key academic, student support and administrative processes, as implemented by EEC-ITIS, aligned with the Internal Quality Assurance Standards outlined in the National Quality Assurance Framework for Further and Higher Education (NQAF)?

b) Does the Quality Management System set-up at EEC-ITIS function efficiently and effectively?

In an effort to uphold a developmental approach to quality assurance, the peers have sought to put forward a number of recommendations which are linked to specific aspects of the operations, the systems or the processes. The report distinguishes between 'conditional recommendations', 'key recommendations' and 'recommendations': 'Conditional recommendations' (CR) are recommendations to be implemented within a very specific timeframe; 'Key recommendations' (KR) are recommendations which the institution is required to implement to address weaknesses and are intended as clear pointers on actions which the institution should implement, without necessarily imposing timeframes; 'Recommendations' are suggestions for improvements (RI) which based on and reflect the Panel's analyses and observations, the institution may wish to consider taking these on board to further enhance its quality provision of education and training in Malta.

3. Analysis and Findings of Panel

3.1 Standard 1: Policy for Quality Assurance

> Policy for quality assurance: entities shall have a policy for quality assurance that is made public and forms part of their strategic management.

Main findings

The Institute, owned by the Principal, also employs a full-time Deputy Principal, Administrator (also acting as Registrar), clerical staff, a part-time Quality Assurance Coordinator (who is also a part-time tutor), and a number of part-time tutor. The Panel acknowledges the dedicated and passionate service of the Institute's staff and part-time tutors. The Panel also observes that the Principal, as the Head of the Institute, also fulfils the role of Programme Coordinator, Financial Controller and the liaison with the NCFHE Programme Accreditation Unit. The responsibilities of the Principal include, but are not limited to, course marketing, student pre-admission interviews, student admission, tutor selection and recruitment, tutor academic mentoring and appraising, scheduling of assessments, verification of all assignment briefs, liaison with internal verifier for assessment decisions, liaison with stakeholders from the world of work for organising placements, placement assessment, design, development, approval and review of programmes as well as other tasks attributed to his role as Financial Controller. The remit of the Head of the Institute also includes the liaison with the NCFHE.

During the introductory meeting of the on-site audit visit, the Panel was introduced by the Principal with the newly recruited Deputy Principal. The Principal explained that the role of the new Deputy Principal is initially being limited to administrative and operational processes but will evolve further in the medium-long term. However, the panel was informed, a few days after the onsite visit, that the incumbent had resigned. The Panel hence notes the need for a deputy to the Principal such that the Institute has the necessary resources to ensure a well-planned and effective delegation of tasks and hand-over of duties. This is deemed necessary by the Panel for the continuity of the Institute and the programmes on offer.

The Panel notes that the titles of 'Programme Coordinator' and 'Course Coordinator' are used interchangeably in the text of the Self-Assessment Report (SAR) and the Quality Manual. The Panel also observes that the Quality Manual refers to 'Programme Coordinators' (plural). It is understood that currently, the Institute has (only) one Programme Coordinator (also referred to as Course Coordinator). The use of the plural in the Quality Manual (Programme Coordinators) could lead to confusion when understanding roles and interactions.

The words 'module' and 'unit' are also used interchangeably throughout the Quality Manual. The Principal informed the Panel that the Unit (or module) is delivered by one Tutor.

The part-time Quality Assurance Coordinator, reporting to the Principal, is the Institute's Quality Management System Representative and is mainly responsible for ensuring that the Quality Management System is fit for purpose through its monitoring, updating and reporting.

Throughout the audit proceedings, the Panel observed that the Principal and the Quality Assurance Coordinator collaborated very closely and were both very knowledgeable and in control of the operational and academic aspect of the institution.

Whereas the Panel does recognise that the front-office personnel are the next point of reference in the absence of the Principal or Deputy Principal, even when handling enquiries by first-time applicants, the Panel notes that the staff interviewed was not conversant with the current version of the Quality Manual, policies and procedures.

Strategy and Quality Objectives

The Principal confirmed to the Panel that the Institute's business plan is not formally documented. The strategic direction for the Institute is to attract (mainly) foreign Students to its qualifications. The Institute is also working towards delivering its first Masters Programme. However, a timeframe was not available.

The Panel also noted that, whereas the Quality Manual refers to the setting up of '*appropriate performance indicators that are used to indicate and monitor performance in relation to the Institute's mission'*, these have not as yet been set up. The Principal informed the Panel that the main focus is on the monitoring of student numbers and student result trends. However, the Panel was not presented with specific targets, data trends and action plans that are used to inform the management review meetings or how these results influence decisions being taken.

Quality Management System

The Panel had access to a number of key documents, namely the Self-Assessment Report, the Quality Manual (not dated), the Prospectus (printed version not dated) and the Student Handbook (not dated). (Refer also to IQA 8, KR 4). The Panel also had access to the Institute's website.

The Quality Manual describes in a comprehensive and detailed manner the main process areas covered by the Institute's Quality Management System.

The Quality Manual includes an organogram (management and staff structure), the policy statement, mission and vision of the organisation. It also provides details of the roles and responsibilities of the key personnel, explains the processes for new programme design, development validation and approval, marketing of the Institute's qualifications, staff recruitment, student admission and progression, student induction, student support, handling of appeals and complaints, periodic reviews and information management. The Manual also provides details on student assessment methodology, the requirement for academic integrity and student feedback. The Quality Manual also provides a very comprehensive ethics policy for staff covering responsibility, accountability, integrity, respect, equal opportunity, collegiality, sustainability and intellectual freedom and provides a comprehensive explanation outlining its principles against intolerance. The Panel, however, observed that the ethics policy and principles against intolerance do not cover the interaction between student to student and student to staff. The provider needs to ensure that the description of the role of the Principal and Assistant Principal are de-personalised (remove names of incumbent) in the text of the Quality Manual.

The Panel noticed that a number of the quality assurance processes that are described in the Quality Manual are still in the early stages of implementation. The processes, therefore, require further monitoring and refinement. It is also necessary that the Quality Manual is developed to include cross-referencing to other supporting documents comprising the Quality Management System, e.g. the Quality Record sheets used by the Institute. These include the Formal Complaint Form, Unit Evaluation Questionnaire Form, Admission Interview Form, Assessment/Essay Marking Sheet Form, Marking Sheet Form and the Dissertation Report Form. The Manual also needs to include a policy for reasonable adjustment (special arrangements) or alternative forms of assessment required for students with special needs. The above is being recommended by the Panel as the IQA standard requires that the processes are defined and understood by the current staff members and prospective students.

Nevertheless, the Panel commends the effort by the provider in compiling the comprehensive Quality Manual.

The Principal, who is responsible for ensuring that the quality assurance system is owned and understood by all, informed the Panel that the Quality Manual is a forward-looking document and includes processes that will serve the Institute as it develops and grows. The Principal explained that over the next five years, the management of the Institute would continue to work methodically and systematically to improve further the structures, mechanisms, systems and interventions needed to institutionalize a culture of quality. The Quality Assurance Coordinator also explained that the quality system of the Institute is going through a developmental process that slowly but consistently records and captures incremental improvements in good practices that are eventually reflected in the Quality Manual.

When asked by the Panel whether there are plans to disseminate the Quality Manual to the students, the Principal found no objection to the dissemination of the document to the students and staff and explained that this will be done via DropBox

Governance Boards

The Quality Manual identifies four governance boards, namely the Student Admissions Board, the Board of Studies, the Examination Boards and the Classification Boards. The Principal confirmed to the Panel that the Principal, QA Coordinator and part-time Tutor/s are required to sit on each of these Boards.

The Panel observed that the Quality Manual does not provide the frequency of meetings that the Board of Studies, the Examination Board and the Classification Board are required to meet. It was also observed that the Institute did not have available, at the time of the audit, the agenda and records of Board meetings. The Principal confirmed that the Examinations Board and the Board of Studies have not yet been formally set in operation. The tasks of ratification of results are currently performed by the Principal. The Panel also observed that the composition of the Board of Studies does not provide for the presence of Student representative.

The Panel also discussed with the Principal and Quality Assurance Coordination whether the current composition of the Boards could provide sufficient oversight, rigour and autonomy of the respective governance processes considering that the core members are the same across all the Boards. The Panel also questioned whether specific terms of reference of the boards, as described in the Quality Manual, for example, the '*statistical interpretation of the marks obtained by the Students*', can be met. The QA Coordinator concurred that, given the size of the cohort, there is the limited significance of the statistical analysis as required in terms of reference of the Examinations Boards.

Access to Documents by Staff

The main records requested by the Panel were well organised and stored in clearly identified boxes in the main office.

The Panel noted that the Quality Manual is not available to staff, students and the general public. The Quality Manual is neither uploaded on the Institute's website nor in DropBox

Good Practice Identified

N/A

Requires improvement to meet Standard 1.

Recommendations for improvement

- **KR1.** The provider should implement a process that facilitates direct student feedback in its strategy development.

- **KR2**. The Panel notes the need for a deputy to the Principal such that the Institute has the necessary resources to ensure a well-planned and effective delegation of tasks and hand-over of duties. This is deemed necessary by the Panel for the continuity of the Institute and the programmes on offer.

- **R3.** The titles of 'Programme Coordinator(s)' and 'Course Coordinator' are used interchangeably in the Quality Manual, and thus require clarification.

- **KR4.** The Institute should establish and implement appropriate performance indicators that are used to indicate and monitor performance in relation to the Institute's mission.

- **R5**. The ethics policy and principles against intolerance need to also address the interaction between student to student and student to staff.

- **KR6**. The Quality Manual should include a policy for reasonable adjustments (special arrangements) or alternative forms of assessment for special needs students.

- **KR7.** The Institute should establish the frequency of meetings of the Board of Studies, the Examination Board and the Classification Board as well as ensure that an agenda and records of ALL the Board meetings are prepared and stored. The Institute is also required to set in operation the various Boards as set-out in the Quality Manual.

3.2 Standard 2: Institutional Probity

Institutional and financial probity: entities shall ensure that they have appropriate measures and procedures in place to ensure institutional and financial probity.

Main findings

As outlined in the External Quality Audit Manual of Procedures, the NCFHE sought external expertise to evaluate and give judgment on Standard 2.

EEC-ITIS Malta Tourism and Language Institute Ltd, (EEC-ITIS) is a limited liability company registered under number C-48154 which is owned and managed by Chev. Mark Ransley. EEC-ITIS is a long-established institution which is offering tourism and hospitality educational courses. The Head of Institution has a very long track record in the tourism, hospitality and educational sectors. Apart from managing the company on a day-to-day basis, the Head of Institution also acts as course moderator, programme coordinator and chairman of the board of examiners and module

moderator. His academic background includes degrees in accounting and tourism and, thus, render him very well equipped to manage the company.

The company has established a proper organisational structure which also comprises an Admissions Board, Board of Studies, Examinations Board and Classifications Boards – all of which comprise academics which bring their experience and knowledge to the respective board. The company has also a Quality Assurance Co-ordinator, thus, lending quality assurance with a pivotal role in the management of the business.

The company is adhering to fiscal, FSS/NIC, employment and other regulatory obligations in a proper and timely manner. The company is being run profitability and is liquid and solvent. It has positive net equity and adequate cash reserves to deal reasonably with unpredicted circumstances and to continue in operation and implement its plans for sustainability and growth of the business. Furthermore, the training provider is clearly ensuring that the members of its body corporate, legal representative/s and staff occupying headings positions are fit for purpose, and this is achieved by carefully selecting personnel for the respective crucial regulatory and academic roles. Clear, fair and transparent processes for the recruitment, conditions of employment and professional development are applied to ensure the competency of its academic staff. However, it was noted that it does not have in place a written procedure for the engagement and selection of headship posts.
At present, the Academy has no polices in place with regards to the resources available and budgeting for resources as the work on these policies is pending due the growth of its student population.

EEC-ITIS is a very sound and well managed operation with clear lines of responsibility within its organizational structure subject to the constraints existing in the context of a sole shareholder and director situation. It also has a sound organisational structure in place, in terms of number of personnel, competences of persons holding headship and other administrative positions. From a financial perspective the company is managed profitably and has sufficient assets and cash reserves to ensure the continued implementation of its academic programme without the need to be dependent on the support of the shareholder or on banking facilities.

Good Practice Identified

N/A

Overall judgment for Standard

Meets Standard 2.

Recommendations for improvement

- **KR1.** EEC-ITIS should prepare a fully-fledged business plan, duly aligned with its academic plan, which sets identifiable and measurable financial and volume targets for its growth and puts into place adequate policies for the continued monitoring of progress and to take necessary corrective actions in a timely and effective manner.

- **R2.** EEC-ITIS should develop a written procedure for the engagement and selection of headship posts which, although might not be in the offing in the near future, is an important procedure to have in place for when such contingency arises.

3.3 Standard 3: Design and Approval of Programmes

> Design and approval of programmes: self-accrediting providers shall have appropriate processes for the design and approval of their programmes of study.

Main findings

The Principal explained that the need for the design and development of a new programme is initiated as a result of a demand identified through market research conducted by the Institute. The Principal explained that he keeps up to date in his sector through regular contact with local and foreign industry professionals, employers and networks. However, he also consults extensively during the programme design and development process with the part-time tutors to discuss both level, content and workload of the programmes. The Principal confirmed that the consultation with external stakeholders is conducted verbally, but no records are kept. However, as stated by the Principal, structured and documented formal feedback from students was not sought at the time when the current programmes were being developed.

The Panel considers that the programme specification and unit description template compiled by the Institute (as part of the NCFHE programme accreditation process) contribute to the quality assurance for teaching, learning and assessment as it determines the objectives, learning outcomes, related content, delivery and assessment method.

Section 3 'Programme Proposals and Validation' of the Quality Manual provides a detailed explanation of three key processes of 'Programme Proposal', 'Programme Content' and 'Programme Validation'. The explanation includes a detailed list of requirements (checklist approach) for each of the three key processes. The Panel commends the rigour of this framework, as described in the Quality Manual, as the process facilitates and is conducive to the design and development of well-planned quality programmes.

The Panel noted a number of overlaps and duplication in the roles and responsibilities in the new programme design, development and approval process, as follows. The Quality Manual defines the responsibilities of the Programme Co-ordinator (a post currently filled-in by Principal) as the person '*responsible for developing the curriculum, staffing programmes and reviewing programme performance*'. The Panel also observed that the Quality Manual specifies that the '*Module Tutors are responsible for developing the curriculum and scheduling assessments for their modules*'. The Quality Manual also specifies that the Quality Assurance Coordinator is assigned the responsibility for the '*review of proposals for new modules and programmes with special emphasis given to the assessment and feedback elements of programme proposals. The aim is to assure reliability and consistency in all modules*' (also refer to IQA 10).

On the basis of the above roles and responsibilities, the Panel, asked the Principal and the Quality Assurance Coordinator whether the requirement under 'Programme Proposal' (Quality Manual, section 3) for the setting up of a 'Special Committee' made up of the Principal, the QA Coordinator and a Tutor is considered to be sufficiently objective and autonomous in its decision when the same Principal (as Programme Co-ordinator) and the QA Coordinator would have been the same personnel (already) involved in the design and development process. The same members of staff are also members of the Board of Studies which Board is also required to assess whether the '*assessment provision and credits offered are sufficiently inclusive, varied and balanced*'. The Principal explained that the composition of the various Boards is constrained by the size of the Institute's staff.

The Panel also observed that the procedure does not make a provision for consultation with the external stakeholders and students during the initial 'Programme Proposal' stage, in particular

when the 'Special Committee' needs to evaluate whether there is a sound business case for the programme.

During the discussions with the lecturers, it was confirmed that a number of tutors were involved in the development of the unit specification. They are also expected to develop the teaching material and prepare the lesson plans. However, the Approval of the teaching material that is prepared by the guest Tutors is not covered under the 'checklist' of 'Programme Content'. The tutors commented to the Panel that the Institute needs to enhance its capacity for accreditation of new programmes.

The Panel also remarked to the Principal and Quality Assurance Coordinator that the responsibility for interaction with NCFHE programme Accreditation Unit is not provided for in the section the 'Programme Proposals and Validation' (Quality Manual, Section 3).

Good practice identified

- The programme, design, development and approval process is described very comprehensively in the Quality Manual and includes best practices that, when correctly implemented, will facilitate very good oversight of the design, development and approval process.

Overall judgment for Standard

Meets Standard 3.

Recommendations for improvement

- **KR1.** The provider should seek student and external stakeholder feedback also during the initial 'Programme Proposal' stage.

- **KR2.** The provider should ensure that the core members of the Special Committee and also the Board of Studies involved in the design, development and approval of new programmes have sufficient autonomy.

- **R3.** The scope of the design, development and approval of the Tutor teaching material is to be included as part of the 'Programme Content' process in the Quality Manual.

3.4 Standard 4: Student-centred Learning, Teaching and Assessment

Student-centred learning, teaching and assessment: entities shall ensure that programmes are delivered in a way that encourages students to take an active role in the learning process.

Main findings

Course Regulations

The Student Handbook includes information on the Institute profile, list of accredited programmes, student target group, entry requirements, general assessment policy and procedures, list of units, total hours and ECTS' per unit, marks classification, attendance, classroom rules of conduct and the assessment methodology (assessment type and weighting per unit).

However, it was noted by the Panel that the Student Handbook did not contain an explanation of the key student-centred processes, for example the Institute policies and procedures covering, namely ethics, complaints, appeals, extenuating circumstances, fees for rescheduling and resit of exams, carrying forward of failed units and Student feedback.

The Panel was informed that the DropBox is the main (and only) repository used for transfer of documents to registered students (refer to IQA Standard 7 for contents list of Student Handbook).

Delivery

The Students interviewed by the Panel described various (pedagogical) tools that are used during the delivery of the course, including the use of videos, URL links to help students in their research and self-study, group discussions and student presentations. Lesson notes are uploaded on DropBox by the guest tutors after the sessions.

Lecture and Assessment Scheduling

The Principal explained to the Panel that, as the Programme Coordinator, he ensures the coherent scheduling of lectures and assessments across the semester to make sure that the Student workload is, as much as possible, balanced and without overlaps. The Principal also explained that in view of the fact that a number of students have part-time jobs while studying at the Institute, date and time of the lectures is adjusted, as much as possible, to fit theirneeds.

A full-time programme semester normally includes five (5) units of study. Each unit typically is delivered over 24 contact hours. Students are provided with a schedule that includes information for contact hours, assignment submission deadline, examination dates and also the (mark) weighting of the various assessment tools. The semester schedule, a copy of which was seen by the Panel, are displayed in the classrooms and uploaded on Dropbox.

It transpires that the take-home assignment submission deadline mainly coincide towards the end of the semester with the dates of the time-constrained assignments. The Panel observes that this end-loaded scheduling renders the assessment feedback process to be summative in nature.
The Institute, therefore, needs to consider staggering the submission deadlines of the assignments and examinations more evenly over the semester since the end-loaded assessment schedule renders the assessment feedback process to be summative in nature as opposed to ongoing or formative.

The Students confirmed to the Panel that although the take-home assignments tend to be end-semester loaded, the tutors do provide classwork and homework on an ongoing basis, which is then discussed during tutorial sessions.

Assessment Strategy

The Quality Manual provides an assessment strategy. Each taught module has an assessment that is made up of two or more components. One of the components is a take-home assignment in the form of a long essay, time-constrained assignment, project or presentation. The time-constrained

assessments (examinations) are each assigned a weighting between 45% up to 100%.

The Principal explained to the Panel that the tutors are expected to ensure that the assessments are according to the assessment criteria. The tutors confirmed to the Panel that they submit the assignment briefs to the Principal for internal verification prior to the dissemination of the brief to the Students.

The Panel was informed that past papers from previous cohorts were not made available by the Institute.

The Quality Manual requires that '*students are assessed in a way that is fair, valid, and reliable'. This is achieved through the adoption of index numbers'*. However, it transpires that the student number, name and surname are currently displayed on the examination paper. The Panel recommends that this anomaly is addressed by the Institute.

Assignment feedback

The Panel was informed by the Quality Assurance Coordinator that the students are encouraged to submit, before the deadline of the take-home assignment, a draft of the assignment for feedback by their tutor. The Students interviewed by the Panel confirmed that the tutors make themselves available to provide this preliminary feedback.

Whereas the Panel recognises this 'additional' support as an important component of the teaching and learning process, the Panel strongly recommends to the Institute to set-up and implement clear guidelines for the visiting tutors on what constitutes good practice in terms of ensuring the separation of 'teaching and learning' from their 'assessment'. The Panel understands that, while the learners are working on an assessment, the Tutor can continue to give general feedback and support; however, this must be limited to development of knowledge, understanding and skills. Feedback must be specifically limited to guidance, for example, guidance on how to approach the knowledge and skills requirements, confirmation of which criteria the assessor is targeting and clarification of what the assignment brief requires. The guidelines need to ensure that once the students begins working on the assessment, the tutor must not provide specific assessment feedback on the evidence produced by the learner or confirm achievement of specific assessment criteria until the final feedback stage, thus ensuring the separation of 'teaching and learning' from 'assessment'.

The final version of the take-home assignment script is forwarded by the student to the tutor by email and a hard copy handed to the Principal's office.

The Quality Manual requires that '*Module Tutors are also responsible for ensuring that Students receive appropriate and effective feedback on their assessments within one week from the publishing of their results. Students are provided with helpful, clear and timely feedback on all assessed work. The Examiner provides detailed feedback on the general strengths, weaknesses, and suggested improvements of an assessment. An individual email is sent to each student.*

The Quality Manual also requires that '*Students receive generic written feedback from the Tutor on their performance in the specific assessment and that students are presented with a summary of performance highlighting the more common issues, strengths and weaknesses identified during marking. Students requesting for more detailed feedback on their particular performance could make a formal request to the Programme Coordinator who will then liaise with the Tutor'*.

The tutors informed the Panel that they enter the student's marks and general comments on the assessment Marking Sheet (one for each Student, per assessment). The Panel was presented with various formats of these Marking Sheets.

The Administrator informed the Panel that the marking sheets are signed by the first and Second Examiner. The results are disseminated either by hard copy via the Marking Sheet or by email in those cases where the Students would have already returned to their country of residence (for their holidays). The Administrator informed the Panel that usually the corrected scripts are not shown to the students.

This was confirmed to the Panel by the students who stated that, in the case of the take-home assignments, the Principal distributes to the Students the marking sheet which includes the Tutor's overall mark and generic feedback. However, the Students stated that they are not provided with the corrected script unless this is specifically requested by the Student from the Principal.

The Panel is of the opinion that the Quality Manual correctly defines the type and extent of feedback. However, the present system of having assessment submission dates end-semester loaded and only the Marking Sheet being forwarded to the student (and not the corrected script) is limiting the quality and extent of feedback being communicated to the students. Information or guidance to the learner that they could have drawn on (e.g. class notes, handouts, resources in assignment brief etc.) is, therefore, either not being included in the corrected scripts or is being prepared but not disseminated to the Students.

The Panel notes that the Institute should also takes into consideration the fact that (some) students may consider written, formative feedback as a more efficient method for post-assignment reflection. The Panel also recommends that documented assignment feedback is communicated to the students (and not only the Marking Sheet). The Institute needs to recognise that, apart from its academic value, the dissemination of documented interim and final feedback to the Students will also facilitate (enhanced) internal verification of the assignment decisions and also for Students to have recourse to the necessary records in case they decided to lodge a formal appeal or complaint. This will also facilitate and ensure that an Appeals Board will have access to objective evidence when reviewing the merits of a student appeal or grievance.

The results are inputted in the system by the administration staff.

Internal Verification

In the Quality Manual, it is specified that the '*Quality Assurance Coordinator must approve the assessment criteria and feedback processes for all assignments as well as the form and content of prepared examination papers'.* The Quality Manual also specifies that the *'Programme Co-ordinators are responsible for ensuring that assessments across the programme as a whole are robust, consistent and varied. They must ensure that students are exposed to sufficient formative assessment to enable their development'*. The Panel confirmed that it is the Principal (Programme Coordinator) who is responsible for ensuring the internal verification of the assignment briefs prepared by the Tutors as well as the overall scheduling of the assessments and not the Quality Assurance Coordinator.

The Panel also noted that records of feedback given to tutors and amendments implemented following the internal verification process are not kept by the Institute.

Whereas the Tutor is expected to set the assessment brief and correct the assignment/examination scripts, Second Examiners are appointed for all taught programmes delivered by the Institute. The Panel noted that these individuals, appointed from the pool of existing guest tutors, are central to the Institute's quality assurance and enhancement procedures. Their role is to act as an independent assessor and to ensure impartiality. The role of the Second Examiner is essentially to verify the marks assigned, hence the assessment decisions, by the subject lecturer, thus ensuring fairness and consistency in assessment decisions.

The Panel commends the good practice of 100% sampling of student work for verification of assessment decisions and considers that this requirement should also be documented in the Quality Manual.

The Panel also observed that, whereas the role of the Second Examiner is highly commendable, the role of the Second Examiner will be constrained unless the Examiner has access to the assessor assessment rubric, model answers or marking guide.

It is also stated in the Manual that *'each Examiner provides a post-assessment report which details where the student answered correctly, where they were close to correctly, and where the student answered incorrectly'.* Whereas the Panel commends the use of post-assessment reports, evidence was not forthcoming during the Panel review.

Dissertations

The Students fill-in a Dissertation Proposal Form that is part of the Research Methods unit. The Institute also holds workshops during the semester in which the Students are provided, by their tutors, interim progress reports. The tutors informed the Panel that, apart form the informal Tutorials held with the Students, they (the Students) are encouraged to set appointments to meet them and to communicate with them via email.

In the case of the degree programme dissertations, the assessment decisions of the first Examiner are verified by a Second Examiner. The Principal explained to the Panel that the dissertations are blind double marked by the External (Second) Examiner. When the discrepancy between the mark of the Tutor and that of the Second Examiner is wide, the Tutor and Examiner are expected to meet and submit a joint Marking Sheet. The Second Examiner is appointed by the Principal on the basis of their subject expertise.

The Second Examiner is not involved in the dissertation proposal.

The Examiners commented to the Panel that there are too many dissertation assessment criteria. The Tutors stated that the criteria lack granularity and it is therefore up to the Tutor to allocate the range of marks for the sub-criteria. The Tutors interviewed by the Panel commented that they are allowed to discuss the interpretation of the criteria with the Second Examiner.

As confirmed by the Principal, the requirement for a viva voce as stated in the Quality Manual is not being implemented at this stage. The Principal explained that the viva voce is not being conducted for the final project as students are typically in employment abroad after they submit their dissertation.

Academic Integrity

The Quality Assurance Coordinator informed the Panel that, at the start of their course, students are informed on how to avoid plagiarism and the consequences of presenting plagiarised work. In the event of academic misconduct (plagiarism), a meeting is set up with the tutor (examiner) in order to determine the level of plagiarism involved. The Tutor determines whether the matter should be dealt with as minor or major misconduct depending on the extent of the plagiarised work. The meeting by the tutor with the students offers the opportunity for the student to explain his/her version of events.

The students interviewed explained that they are expected to check the originality of their work through an online plagiarism checker and that their originality has to be between 80% – 85%. The Panel noted, from the explanations given by the students, that they (the students) had a high reliance on the 'plagiarised' percentage without being able to discern between work submitted that

was correctly cited and referenced and work that was not paraphrased and not cited and referenced. When asked by the Panel, the students explained that if the originality check by the Institute detects a high level of plagiarism, they will need to resubmit their work. None of the students interviewed suggested the submission of an appeal to challenge the result. The Students confirmed that notes on Harvard referencing are available on the Drop-Box

It is up to the Examiner to check the dissertations/assignments through the plagiarism software. The Panel observed that the use of correct referencing by the students (both in the case of assignments and the dissertation) is not covered by assessment criteria.

Placement

The Principal stated that the Institute has close links to the hotel industry. The Principal requests these employers to offer placements opportunities for its students. Before approving the placement offer, a risk assessment of the hosting Organisation is completed by the Programme Coordinator (Principal) to ensure that the placement is appropriate for the Student's work-based learning requirements.

The Principal explained to the Panel that the placement has a workload of 12 ECTS and includes a 3 stage on-site assessment process.

One of the employers hosting EEC-ITIS students interviewed by the Panel explained that the students are given the opportunity to perform hands-on tasks, rather than taking on an observational role. Students are monitored by the hotel management staff. A Placement Performance report is compiled for every student by a management representative from the hosting hotel. The employer confirmed that three (3) placement mentoring (assessment) visits per student are conducted by the Principal per placement. During this mentoring visit, the mentor conducts a review of the Student's performance.

The Principal maintains contact with the employers to ensure that any issues are addressed in real-time.

Student Feedback Survey

The Quality Manual requires that *'The most commonly used method of gathering student feedback is the module evaluation questionnaire. To ensure practice is consistent, the Institute gathers evaluation data from students via questionnaires in its Module Evaluation Policy'.* The Principal also informed the Panel that the students are asked to fill in the questionnaire anonymously at the end of each unit and submitted in hard copy to the reception desk. Students are encouraged to be critical in their assessment. The Principal explained to the Panel that the formal and informal student feedback makes a direct contribution to the Institute as constructive feedback is generally always taken on board by the Institute administration. The Panel was however informed that student focus groups are not set-up.

The Panel was informed by the students of a particular case wherein the student feedback resulted in action being taken by the Institute with a Tutor who was guided by the Principal to provide more time for class-room exercises. The students confirmed that the questionnaires were anonymous. The Panel noted some inconsistency between the explanations provided by the student regarding the frequency of issue of the questionnaire, namely after every unit or once per semester.

The Principal informed the Panel that the Tutors receive only verbal feedback from the Principal on student feedback questionnaires. Also, the identity of the student feedback data is not divulged to the Tutors.

One of the alumni interviewed by the Panel via Skype was working abroad and had just completed the Degree programme. The alumni got to know about the programme by word of mouth. While recognising that the Institute does not have international visibility as much as the bigger Institutes, the alumni did not regret the decision to register with EEC-ITIS. The alumni also commented that the cohort size was small, but this facilitated one to one interaction with the tutor. The alumni informed the Panel that, based on the experience after having completed the programme, it was considered that, in general, the turos were knowledgeable and had good teaching skills. The alumni stated that being examination-based, the learning was mostly theoretical. However, the programme still prepared students for the world of work. The alumni also confirmed that the teaching material was accessible through Drop-Box during the programme of studies. The alumni confirmed that the students were requested to fill-in feedback forms, mainly at the end of the semester. The alumni stated that an alumni network is not in place. The alumni are currently working abroad and did not have any problems when presenting the Institute's Degree programme results for employment.

The Panel also spoke via Skype to another alumni who stated that (the alumni) had resigned from a previous programme at another institution as the 12-month work experience was considered to be too long. The alumni was the only Maltese Student in the cohort, but this was not considered to be a deterrent. The alumni was on placement for five months at one of the leading, local Hotels. The alumni stated that information regarding the EEC-ITIS alumni network was not communicated by the Institute. The alumni confirmed that the course did include units related to business skills and negotiating skills. However, the course tutors presented real-life experiences taking place at the world of work. The alumni praised the teaching staff and stated that the only complaint was regarding the idle time (free lessons) they had in between lectures during the first academic year timetable.

Appeals and complaints

The Principal explained that once a verbal appeal is received from a student regarding an assessment decision, the complaint is discussed between the Principal, QA Coordinator and the Tutor. The Principal informed the Panel that were deemed necessary, the services of an independent assessor could be resorted to. In these cases, the decision of the independent assessor would be final. The Principal confirmed that there are no applicable fees for the submission of complaints or appeals by Students.

The Panel was not provided with any records of appeals or complaints received, processed and upheld or refused. The Panel, therefore, could not, through documented evidence provided (emails, decisions etc.,) reach any conclusion or opinion regarding the effectiveness and consistency of the processes in place for the formal resolution of appeal or complaint cases relating to lack of academic integrity, discrimination, intolerance etc.

The peer review team commends the effort made by the Principal to maintain direct communication with students. The Panel did not find evidence to contradict the benefits of such an individualised problem-solving approach. Nevertheless, the Panel feels that the requirements of the standard, and hence the interests of the students, would be better served if records of appeals and complaints are retained, in particular records on nature of the appeal or complaint, dates and decisions taken.

The Quality Manual refers to complaints as part of the quality review and improvement. It provides a list of complaint categories and also adequately describes the pre-requisites for a complaint to be registered and also the roles and responsibilities of both the complainant and the person receiving and handling the complaint. The Quality Manual prescribes that the Institute will conduct an investigation which should be completed by six weeks. In the Quality Manual,.it is also explained that the students is required to submit the complaint in writing to the '*Programme Coordinator or the Principal*'. The Institute, therefore, needs to explain in the Quality Manual the rationale for such a dual reporting system. Also, the Panel considers that the (maximum) six-week period as specified

in the Quality Manual for the resolution of complaints should be reduced to days (rather than weeks).

During the interviews with the Panel, students noted that they never had the need to make an official written appeal or complaint since they prefer to communicate any issues verbally with the Principal.

When asked by the Panel regarding whether they have recourse to an appeal in the case when they do not agree with a disciplinary decision on student misconduct (behaviour), the students interviewed seemed to be content with the fact that the Institute has a CCTV system in place and hence any misconduct will be recorded.

It transpires from the interviews that the students were not aware of the formal appeals procedure but did explain that in the absence of the Principal, the Students contact the Administrator.

When asked to mention areas for improvement, the students suggested a common study area (instead of using an available class – which they are already allowed to do) and more copies of some of the reference books.

Accredited Work-Based Learning (Student Placements)

The programme includes a component of accredited work-based learning which takes place through the placement of the student at one of the local hotels. The assessed placements are 8 to 12 weeks long. The Panel commends this mode of learning.

After each job placement, both the Student and the Hotel management representative are asked to fill in a feedback form. The Panel was provided with a sample of the 'Placement Learning Agreement' document signed by the Institute, the Student and also the hosting organisation (the employer). It is confirmed in the 'Placement Learning Agreement' that the intern is not reimbursed during the placement.

The Panel had a very informative discussion with the industry stakeholders (employers) who have been offering placement to EEC-ITIS Students for the last two years. The employers explained to the Panel that the EEC-ITIS Students are exposed to a variety of work experience and responsibilities throughout their placement. This includes meeting and greeting hotel guests, using computer systems for handling of arrivals, departures and reservations, catering, kitchen and bars. In this way, the students will be able to determine whether they are prepared to work and fulfil the demands of this specific industry sector. The employers had favourable comments on the EEC-ITIS Students. The employers confirmed that the Principal conducts regular monitoring visits of the placement Students and also consults with the employers when assessing the Students.

One of the employers explained that although the Institute does not provide a specific set of skills and competences that need to be achieved by the students while on their placement, he does help the student to identify personal skill skills that can be developed further.

The Institute, therefore, needs to identify, as part of the accredited work based learning unit, a set of competences that need to be successfully demonstrated by the students during the placement assessment.

Good practice identified

- The assessment results are recorded on a standard template that facilitates a consistent level of quality in the way assessment decision and feedback is communicated to the Students by the Assessor.

- The students are encouraged to submit, before the deadline of the take-home assignment, a draft of the assignment for feedback by the tutor. The students interviewed by the Panel confirmed that the tutors make themselves available to provide this preliminary feedback.

- The Panel commends the good practice of 100% sampling of student work for verification of assessment decisions.

Overall judgment for Standard

Requires improvement to meet Standard 4.

Recommendations for improvement

- **KR1.** The Student Handbook should be developed further to include information regarding policies and procedures covering, ethics, complaints, appeals, extenuating circumstances, fees for rescheduling and resit of exams, regulations regarding carrying forward of failed units and Student feedback.

- **KR2.** The Institute needs to implement its requirement regarding the use of an index number as opposed to the current practice of Student entering their names on the examination script.

- **KR3.** The Provider should consider staggering the submission deadlines of the assignments and examinations more evenly over the semester.

- **KR4.** The Provider should set-up and implements clear guidelines for the visiting Tutors on what constitutes good practice in terms of ensuring the separation of 'teaching and learning' from 'assessment'.

- **KR5**. The Provider should ensure that students have regular access to the corrected scripts that includes, not only the Marking Sheet with the marks and general comments, but also formative feedback by the tutors as well as access to past papers from previous cohorts.

- **KR6**: Documented evidence of the decisions by the Internal Verifier (signature, date etc.) is required both for the Internal Verification of the assignment brief (tasks) and Internal Verification of the assessment decisions, in particular, were the brief is modified following the internal verification process.

- **R7.** The Provider may include a reference in the Quality Manual to the established sampling size (currently 100 % of student cohort size) for the post-assessment internal verification.

- **KR8.** The Institute should consider using model answers or marking schemes or grading rubrics when assessing student work to ensure fairness and consistency when grading.

- **R9.** The Provider may implement the requirement in its Quality Manual for a viva voce for the Degree programme.

- **KR10.** The Provider should implement more consistently its policy regarding the student feedback questionnaire at the end of each unit.

- **KR11.** The Provider should retain records of formal complaints and appeals.

- **KR12.** The Provider should identify, as part of the accredited work-based learning unit, a set of competences that need to be successfully demonstrated by the students during the placement assessment.

- **KR13.** Policy and governance structure should allow students to have recourse to an appeal of an academic decision or the outcome of a complaint decision and change the target of six weeks for the resolution of complaints to a matter of days.

3.5 Standard 5: Student Admission, Progression, Recognition and Certification

Student admission, progression, recognition and certification: entities shall consistently apply pre- defined and published regulations covering all phases of the student 'life-cycle'.

Main findings

Admissions

The Panel was informed that applications for prospective Students are reviewed by the Principal who consults, when necessary, with the Quality Assurance Coordinator.

The Quality Assurance Manual requires that an Admissions Board, comprising of the Principal, Quality Assurance Coordinator and Tutors form the main areas taught, is set-up. One of the remits of this Board is to recommend first-time applicants for admission. Board records were not available but there was evidence of email communication with the applicants.

A formal policy for prior learning and mature students is not explained in the Quality Manual. The Principal confirmed to the Panel that he gives due consideration to requests by first-time applicants for consideration of previous learning; albeit none have been requested so far. The Principal stated that applicants are encouraged to join the course at Diploma level. The Panel noted that there is no mention in the admission procedure or online regarding applications by mature students.

The Panel noted that the online application includes a section 'Transfer Students' which explains that students from other accredited hotel and tourism programmes will be assessed individually for eligibility for exemptions.

During the discussion with the students, it was established that none of the them had a formal interview before being accepted but had an exchange of e-mail correspondence with the Institute.

The Principal informed the Panel that an explanation is provided to applicants who have their application refused.

The majority of the registered students are foreign some of which are recruited through their respective country agents. Students are recruited from diverse cultures and educational backgrounds. English proficiency is, therefore, a pre-requisite for course entry.

One of the students interviewed by the Panel stated that promotional material was sent to him via

an agency. The students explained to the Panel that the tourism sector in Malta was considered to be very developed and that the student, therefore, had good placement opportunities, supported by the fact that English is an official language and Malta is part of the European Union.

Student Induction Session

The students confirmed to the Panel that they undergo an induction session at the start of the academic year. The session covers the general information about the Institute, programmes, assessments, lecturing schedule, programme regulations and the resources available. Students are taken around the institute and introduced to the administration staff. The students are given access to Drop-Box which contains the Student Handbook, reading material, assessments, e-journals etc. The induction session is delivered by the Principal.

Resits

The Panel notes that the resit policy as explained in the Quality Manual requires that *'if a student fails a small number of units, the student can progress to the next year. However, the students are expected to undertake a resit within the first month of the following semester or year'.* The Principal explained that this is necessary since, normally, students cannot extend their stay during the summer holidays due to travel visa restrictions.

The Panel noted that whereas a student is allowed to carry forward failed unit (or units) from a previous semester, the Institute does not have a policy on the actual number of maximum units that can be carried forward or on the number of times a student can be allowed to resit the same exam without the need for repeating the unit with attendance. Students are required to pay a fee for every resit.

The Result Classification Board is not as yet set-up. Although the graduates from the first (and only) cohort received their final result, the grade classification was not yet approved at the time of the institutional review by the review panel. Students will be issued with the Institute certificate and the Diploma Supplement.

Attendance

Attendance is recorded by the tutor at the start of every lesson. Signed attendance sheets were reviewed by the panel. The students informed the Panel that they are required to sign the attendance sheet in the presence of tutors. This was also confirmed to the Panel by the Administrator who added that the tutor subsequently returns the signed attendance sheet to the Administration. The data is consolidated by the administration office. Absence due to sickness is registered as 'Student Absence'. The Principal explained to the Panel that Students who do not meet the minimum attendance would not be allowed to progress.

External Progression

Students that have successfully completed the Degree programme can progress directly on to the IMI Luzern (Switzerland) MBA. This is possible through an agreement between EEC-ITIS and IMI. The MBA is a two semester programme specialising in Swiss hotel management operations.

Certification

The Quality Manual classifies results above 81% as an overall 'Distinction'. Lower results are classified as 'Pass'. The panel notes that the Quality Manual describes that one of the remits of the Classification Board is to determine marginal cases. However, the Panel notes that the Quality Manual needs to specify the records of proceedings (e.g. minutes of decisions taken, members

present etc.) that need to be retained by the Board (see also IQA 1). The Classification Board is yet to meet.

Successful students are issued with a Certificate that includes the EQF/MQF level of the course, workload (ECVET), final grade achieved, date of issue, the signature of the Principal. The Principal informed the Panel that a transcript is provided to the Students at all exit points within the course programme. All exit points are clearly defined in the programme application of the NCFHE.

Good practice identified

N/A

Overall judgment for Standard

Meets Standard 5

Recommendations for improvement

- **KR1**. Admission Board Policy and guidelines for the definition and assessment of prior learning should be documented to ensure consistency and fairness in the application of recognition of prior learning and consideration of applications by mature students.

- **KR2.** The Institute should have a policy on the actual number of maximum units that can be carried forward and on the number of times a student can be allowed to resit the same exam without the need for repeating the unit with attendance.

3.6 Standard 6: Teaching Staff

Teaching staff: entities shall assure the competence and effectiveness of their teaching staff.

Main findings

Recruitment

The Quality Manual requires that '*as a minimum qualification, a tutor will have completed an appropriate Master's degree in the area of specialization. Tutors with a PhD are preferred. These individuals have a track record with regard to experience and instruction in effective teaching within the discipline'*. Another requirement is that they should also show an '*enthusiasm for teaching undergraduates, and demonstrate a commitment to developing as an educational professional'.* The Quality Manual additionally sates that *'the Chairman of the interviewing board has to ensure that confidentiality is maintained during the short-listing and interview process. The individual has to ensure that Panel members are familiar with the code of practice of the Institute and that the Panel is correctly constituted'.*

However, the Panel noted that the recruitment of lecturing staff is generally conducted through personal contacts and recommendations to the Principal and not as describes above, namely through an 'Interviewing Board'. The Principal stated that a pre-requisite for employment is

teaching experience and industry experience. All module tutors are outsourced and engaged specifically on the basis of their expertise in the subject taught. The Principal explained that tutors are expected to demonstrate a high degree of enthusiasm and a commitment to develop as an education professional.

The Tutors interviewed by the Panel confirmed that the interviewing process was informal. Tutors are employed with the Institute on a casual part-time basis as and when required.

The list of tutors submitted to the Panel all had an EQF/MQF Level 7 qualification; some also had an EQF/MQF level 8 qualification in their areas of specialisation.

The tutors are provided with a description of the study unit that they will be teaching, so as to help them in their preparation of the lecturing material.

The Principal stated that all members of staff (academic and non-academic) are guided by an Ethics policy in accordance with the principles of responsibility and accountability, integrity, respect, collegiality and intellectual freedom.

The Principal confirmed that updated CVs of the lecturers are available as these are used for applications for tender submissions.

Communication

It is evident to the Panel from the separate discussions with the Principal and the guest tutors that there is regular and effective, ongoing two-way communication. The Panel observed during the on-site audit visit that the Principal's Office, located at the main entrance of the Institute, truly serves as a meeting point between the Tutors, the Principal and the administrative staff. The Panel also observed and commends the high level of collegiality between the Principal and guest tutors.

The tutors also commented to the Panel that they have a very good, open and direct working relationship with the Principal and that he (Principal) is very open to feedback both regarding the unit content and also regarding individual student cases.

Appraisal

The Quality Manual requires that *'A (Programme) Coordinator conducts one-to-one evaluations with each module tutor, reviews the feedback every student presents at the end of each module, follows programmes offered by similar organisations, and meets regularly persons working in the hospitality and tourism industry'.* However, the Quality Manual does not specify the recommended frequency of the number of appraisals required per tutor or how the output of the appraisal is recorded.

The Panel was informed by the Principal (also the Programme Coordinator) that he conducts 'walk-in' appraisal of newly appointed tutors during their lectures and thereafter on an ad hoc basis. The appraisals are followed up by verbal feedback from the appraiser to the tutor being appraised. The Principal explained that it is not customary for records to be kept of the outcome of the appraisal process. The Panel acknowledges the benefit of the 'walk-in' appraisals. Nevertheless, the Panel recommends that a formal, documented appraisal process needs to be set-up by the Provider. The appraisal process needs to establish basic appraisal criteria and include documented feedback by the tutor to the student. This will also facilitate the follow-up of the tutor on points for improvement by the student, thus resulting in a continuous improvement cycle.

The Institute does not provide CPD opportunities to its tutors, as being practising professionals in their field, Tutors are engaged in their CPD initiatives. However, the Principal confirmed that he supports his tutors whenever possible with opportunities, for example in representing the Institute

on trade promotion delegations.

- The Panel could observe, during the interviews, that the EEC-ITIS staff is committed to ensuring the best possible student experience.

- The Panel commends the high level of collegiality between the Principal and guest tutors.

Overall judgment for Standard

Meets Standard 6.

Recommendations for improvement

- **R1.** Recruitment of lecturing to be conducted through a formal interviewing board.

- **KR2.** The current practise of 'walk-in' appraisals needs to be formalised into a schedule in order to facilitate consistency in its implementation. Also, the process for tutor appraisal needs to be documented in the Quality Manual, including the frequency of appraisal and how the output of this appraisal process is communicated to the tutors.

3.7 Standard 7: Learning Resources and Student Support

Learning resources and student support: entities shall have appropriate funding for their learning and teaching activities and sufficient learning resources to fully support the students' learning experiences.

Main findings

Student support

The Quality Manual includes a policy that *'recognizes that each student is an individual and ensures appropriate personal support when needed. This responsibility falls on the Programme Coordinator who reviews the student request, and channels support towards the appropriate counsellor'.*

It was evident to the Panel that the Principal (Programme Coordinator) has the main responsibility for providing student support. The Principal explained to the Panel that the size and physical set-up of the Institute, in particular with his office located at the main entrance of the Institute, as well as his availability during the day facilitates an ongoing informal communication with the tutors, students and administration staff. The Principal confided with the Panel that he knows each student individually and that this helps foster an open discussion. The Principal emphasized that this contributes to and facilitates a student-centred approach. He is also responsible for ensuring that

any reasonable adjustments (special arrangements) or alternative forms of assessment required for students with special needs are implemented. However, the Principal did confirm to the Panel that the institute does not have the internal capacity to provide support on psycho-social issues.

This was corroborated by the students interviewed who commented very favourably on the prevailing friendly and supportive atmosphere at the Institute. Students also cited an example of a student who was given leave of absence due to extenuating circumstances. The students confirmed that when they need any counselling, they refer to the Principal, or, in his absence to the administration staff.

The Principal explained that there is ongoing interaction between the Principal and the staff that ensures that actions being taken are student-centred. Examples of this are the flexibility in the timetabling to accommodate student commitments.

The Panel acknowledges that, whereas the Institute is not expected to employ full or part-time counsellors or have the internal trained resources to deal with situations that could arise due to psycho-social conditions, it would be advisable that the Institute establishes working contacts with professional service providers who can be a possible point of contact by its students. The Panel also recommends that the Quality Manual is updated accordingly.

Internal communication

The Students informed the Panel that they are at liberty to schedule an appointment with the Principal, coordinator, or module tutor in order to discuss any problems or anxieties they might have. EEC-ITIS has an open-door policy and considers itself to be very student friendly.

The students interviewed by the Panel were very satisfied with the communication with the Principal. They stated that they felt comfortable speaking to their tutors and that they (tutors) are responsive. They (students) cited a particular situation wherein the tutor addressed an issue regarding the pace of lecture delivery was deemed too fast. Actions were taken to mitigate the situation.

It was also confirmed to the Panel by the students that they are well informed by the Principal on the overall course expectations as well as the Unit expectations (Learning Outcomes). The Panel also confirmed that the students were aware of the 80% minimum attendance policy and that they have access to the rules and regulations via the Drop-Box.

The Tutors also informed the Panel that they do encourage students to email them directly. This was corroborated by the students who informed the Panel that they are encouraged to communicate with their tutors via their email account and that the response time was satisfactory.

Extenuating circumstances

Extension to the submission deadline is dealt with by the Principal with the student on an ad-hoc basis and granted on the merits of the claim by the student for extenuating circumstances.
The Panel noted that a provision for the extension of the submission date of an assignment due to extenuating circumstances is not included in the Quality Manual.

Student rep

It was observed during the student interviews conducted by the Panel that, in general, all students had the disposition to direct their complaints to the tutors and Principal (refer also to IQA Standard 4). The Panel also observed that it is not the practice at EEC-ITIS to have a class representative. This appears to be due to the lack of interest in this type of representation by the students and also

since the students interviewed by the Panel consider the Principal and tutors to be very approachable and receptive.

Additional support

Throughout their learning journey, the Institute provides students with additional (at a charge) English-speaking lessons that will help them in developing their literacy skills.

The Students' access to the network of lecturers who are industry practitioners is commendable as it provides the students with industry-embedded contacts during their studies and beyond.

Diversity

The Principal explained that the Institute attracts a student population that is culturally diverse. The particular needs, and therefore the pedagogical skills required, varies greatly from one group of students to the other, mainly because of the diverse cultural backgrounds of the cohort.

He also explained that the Institute is capable of handling this challenge as it follows its students both academically and pastorally. The Principal explained to the Panel that any minor situations brought to his attention are addressed immediately in order not to allow the situation to escalate. The Principal explained that the dissemination of rules, regulations and clear code of conduct to the students is aimed to facilitate and reinforce a safer and harmonious environment for the students (and staff). Notwithstanding, the Principal stated that there had been cases where he had to intervene and take appropriate action following cases of bad student conduct.

The Principal explained that Tutors are encouraged to use diverse teaching methods that prepare the Students to fulfil all the assessment criteria. The Principal also explained that the relatively small cohort size facilitates the student-teacher interaction and where necessary the required individual attention.

Facilities

The Institute is centrally located close to many shops, cafeterias, take away shops, banks, a post office and public transport routes.

All facilities at EEC-ITIS are contained in one building. The facilities include a physical library that includes text books relevant to the programmes offered at the Institute. Students are allowed to borrow books to take home. The front-office staff interviewed by the Panel confirmed that although a record of withdrawn books is kept at the front desk, there is no limit on how long the books can be kept by the students.

The Institute also provides a free wireless hotspot for all staff and students, various sizes of adequately, air-conditioned, well-lit lecture rooms furnished with an interactive wide board and a laptop, a reception desk manned throughout the time that the Institute is open and a student area supplied with food and drink vending machines.

Good practice identified

- The students appreciated the support from the EEC-ITIS representatives in particular support on non-academic matters.

- The students' access to the network of industry practitioners is commendable as it provides field support to the students during their studies and beyond.

- The Institute gives high importance to personal and individualised approach with its students. The Principal makes it a point to know each Student.

Meets Standard 7.

- **R1.** The Institute is encouraged to establish working contacts with professional service providers who can be a possible point of contact by its sudents for dealing with anxiety, being away from home.

- **KR2.** The Quality Manual and the Student Handbook should include a provision for the extension of the submission date of an assignment due to extenuating circumstances.

3.8 Standard 8: Information Management

Information management: entities shall ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

Main findings

Student Information

Records are stored by the School in a variety of location and formats. Student paper records including assignment scripts are stored in the Principal's office. Records produced day-to-day by the administrative staff at their computers are stored on network drives. Email accounts for staff are provided by the Institute. IT Systems are used to hold information and data related to accounts, student profiles, the library catalogue, feedback data, student registration, progression and success rate. Software packages such as excel sheets, word, accounting, and database are used throughout the IT system.

The Principal explained that administrative staff are expected to ensure that all student records, paper or electronic, are stored safely and securely.

Student Feedback Questionnaires

All student feedback questionnaires are reviewed by the Principal, in particular, the low scoring areas. The Quality Manual also requires that '*the quantitative data generated from all student feedback mechanisms are used to inform the module and programme review and other educational and student support processes'.* It is the policy of the Institute that *'qualitative feedback provided by students is not disseminated for the purpose of periodic review unless with the consent of the individual*

module tutor. Student questionnaires are considered to be confidential'.
The Panel finds this policy restrictive since it is expected that feedback is looked at objectively and as an opportunity for reflection, thus facilitating continuous improvement.

It also transpires that the results are not consolidated and analysed statistically since, as explained by the Principal, the cohort size is too small, and hence the statistical significance is very limited. However, the Principal explained to the Panel that any anomalous or low scores by the student are investigated in real-time by himself. The Panel was shown a number of filled-in questionnaires.

The Panel also noted that the student feedback questionnaire does not include a date showing when the form was filled-in. The Panel recommends that the questionnaires are dated. It is also necessary for the Institute that the data gathered is used for its intended purpose of enhancing the student experience.

Tracer

The Institute does not have a formal set-up for tracer studies, albeit only one cohort has recently completed the programme. Contact with the students on this cohort is informal, mainly through social media, especially since most of the students are working outside Malta.

Document Management

The Panel observes that the necessary information required by the students (regulations, policies etc.) was made available to the Panel. However, the Panel also remarks that it was not always possible for the Panel to ascertain that the printed documents used by the Panel were, in fact, the latest, approved revision. The Panel, therefore, recommends that the Institute's documentation system needs to be revision-controlled to ensure the correct management of documented information. In this way, both students and staff always have access to the latest, approved versions of documents.

Processing of Information

EEC-ITIS is required to ensure that '*it collects, analyses and uses relevant information for the effective management of their programmes that also includes Students satisfaction with their programmes'.* It is thus, also important to ensure that the data gathered by the Institute is used for its intended purpose of enhancing the student experience. Closure of feedback loops is also essential.

Good Practice identified

N/A

Overall judgment for Standard

Requires improvement to meet Standard 8.

Recommendations for improvement

- **KR1.** Assignment feedback is an opportunity for reflection, thus facilitating continuous improvement and should therefore be forwarded to the students together with the assessment grade/mark.

- **KR2.** The Institute should ensure that the student questionnaires include a date showing

when the questionnaire was filled in.

- **KR3.** The documentation comprising the Quality Management System should be adequately referenced and revision controlled to ensure reliable information management such that both students and staff always have in hand access to current and approved printed versions of documents.

- **KR4.** The Institute should consolidate the process of periodic analysis of data about the inputs and outputs of the quality management system.

- **KR5**. The Institute should revise the way it collects and analyses the student satisfaction and graduate (tracer) feedback in a way that ensures that the information obtained from these studies informs the decision-making process thus resulting in the enhancement of the student experience.

3.9 Standard 9: Public Information

Public information: entities shall publish information about their activities which is clear, accurate, objective, up-to-date and readily accessible.

Main findings

Prospectus

The printed Prospectus is designed by the QA Coordinator. The Panel noted that the hard copy of the Prospectus does not have a date of issue or reference to the applicable academic year/s.

The entry requirements on the printed Prospectus are not explained with specific reference to the entry level of the programme (refer to printed Prospectus). The entry requirements are generic. The Prospectus also needs to be clarified with respect to the reference to working experience (…. '*genuinely enquired the knowledge form the working experience', page 5*). The title of the Degree is also incomplete.

The above could be misleading to the prospective student.

Institute Website

The EEC-ITIS website is the primary source of information available to the public. It includes general information about EEC-ITIS, details of the accredited courses on offer by the Institute, including the selection criteria for the courses/ programmes, their overall learning outcomes, the qualifications they award, including information on the EQF/MQF level and ECTS/ECVET learning credits, the teaching, learning and assessment procedures used, further learning opportunities available to their students, and information on possible career pathways available as a result of taking a course. The website also includes a downloadable course application form (including terms and conditions) as well as the Provider's contact details.

However, the Panel also notes that the pass rates as well as the applicable fees for rescheduling and resit of examinations is not included on the Institute's website.

The Institute also needs to provide details explaining rule for student progression and for

achievement of qualifications.

The Institute website is updated by the Principal. The Institute also maintains a Facebook page that is updated by the Principal.

GDPR

The Principal explained to the Panel that he would be disseminating formal guidelines to his staff regarding GDPR to all Tutors in the coming future.

Good practice identified

N/A

Overall judgment for Standard

Requires improvement to meet Standard 9.

Recommendations for improvement

- **KR1.** The printed Prospectus should incorporate revision control (traceability to the year of issue).

- **KR2.** The information on the Prospectus with respect to the entry requirements, working experience, and title of the Degree should be corrected/updated.

- **KR3.** The Provider should provide access to the prospective students (and staff), via the public website, the key policies and regulations.

- **KR4.** The Provider should provide details explaining the pass rate as well as the applicable fees for rescheduling and resit of examinations.

3.10 Standard 10: On-going Monitoring and Periodic Review of Programmes

Ongoing monitoring and periodic review of programmes: entities shall implement the 'Quality Cycle' by monitoring and periodically reviewing their programmes to ensure their continuing fitness for purpose.

Main findings

Internal Periodic Programme Review

Internal Periodic programme monitoring is described in the EEC-ITIS Quality Manual as the '*process whereby EEC-ITIS check that modules and programmes meet the expectations of Tutors and Students'*. The Manual also goes on to describe the main elements that are monitored and reported including information obtained from internal and external agencies.

The Manual also requires that review is conducted on both modules and programmes every five years. The Quality Manual also specifies that the Quality Assurance Coordinator '*oversees the Institute's regulation framework and the overall quality of programmes, primarily via the Annual Programme Review (section 10), and Programme validation process*' and also for the Programme Coordinator to perform periodic programme reviews for all taught programmes of study under their remit.

The Panel was informed that the course content is discussed regularly between the Principal and the QA Coordinator and with the industry stakeholders and the academic team. The Principal confirmed to the Panel that the involvement of the stakeholders is conducted informally. The Principal stated that this process is leading to improvements.

However, the Panel notes that records of such meetings and decisions taken were not available.

The Panel also asked whether the 5-yearly review cycle is considered to be appropriate.   The Principal remarked that although the formal review period is planned every five years, decisions to review and updated programmes are taken on a regular basis.

(Note: The Panel was informed by NCFHE representatives that there were ongoing communications between the Provider and NCFHE regarding a previous case whereby the Provider had implemented major changes to a programme prior to submitting of same to the NCFHE Programme Accreditation Unit for approval and re-accreditation).

External Programme Review (External Examiners).

The Quality Manual defines External Examination as the '*crucial element of objectivity and externality in helping EEC-ITIS to maintain academic standards at the appropriate level and to ensure that student performance is properly and fairly judged*' and that '*the role of External Examiner plays a vital part in quality assurance and contributes greatly to quality enhancement*'.

Internal Institutional Review

The Quality Manual specifies that '*the Programme Co-ordinators needs to ensure through audits that there are adequate human, physical, and financial resources to sustain the Institute's commitment towards students*' and that '*EEC-ITIS needs to conduct both periodic and external monitoring*'.

Whereas it was very evident to the Panel members that the Principal and Quality Assurance Coordinator have a very good overall understanding of the operational and academic processes, evidence in the form of formal documented internal review that assesses the effectiveness of the Quality Management System was not available. The Panel is cognisant of the fact that the Institute's Quality Management System is still developing. However, the IQA standard requires that the provider implements a process of internal review and self-evaluation both at the programme and institutional level. The review and self-evaluation process needs to involve systematic feedback from key management, students, alumni, employers and other stakeholders. The inputs of this process need to be based on factual data and evidence. The outputs of this internal monitoring and review process will identify strengths as well as areas for improvement. The resulting corrective, verification and prevention actions need to be monitored to ensure that the effectiveness of their implementation will result in an enhancement of the Student Experience.

Good practice identified

N/A

Requires improvement to meet Standard 10.

Recommendations for improvement

- C**R1.** The Institute should have in place within six months of the official communication of the EQA Audit Report appropriate arrangements for monitoring and periodical reviewing of academic programmes to ensure that these are meeting the set objectives and expectations. The Institute is also required to implement a process that facilitates direct student/alumni feedback in its cyclical review of its accredited courses**.**

- **KR2.** The Institute should evaluate whether the five-year cyclical programme is considered to be realistic in terms of ensuring that the programmes are still relevant to the world of work after 60 months.

- **CR3.** The Institute should introduce within six months of the official communication of the EQA Audit Report a formal, structured documented internal review of the Quality Management System.

- **CR4.** The Institute should ensure that changes to the programmes are communicated to NCFHE prior to the launch of the revised programme and in any case not before the formal approval and re-accreditation of the changes by the NCFHE Accreditation Unit.

3.11 Standard 11: Cyclical External Quality Assurance

Entities should undergo external quality assurance by, or with the approval of, the NCFHE on a cyclical basis, according to NCFHE guidelines, once every five years.

Main findings

EEC-IT IS fulfils this standard by hosting the external quality audit documented in this report.

Good practice identified

N/A

Overall judgment for Standard

Meets Standard 11.

Recommendations for improvement

N/A

4. Response by the Provider

Feedback provided by EEC-ITIS Malta Tourism and Languages Institute on 24/04/2020

1. Preamble

EEC-ITIS Malta Tourism and Languages Institute (EEC-ITIS) positively takes note of the key findings and the recommendations made by the Peer Review Panel. In this regard, EEC-ITIS welcomes the constructive feedback received by the peer review panel and as facilitated by the NCFHE and believes that this exercise serves a good practice in itself to provide an external perspective on the running of the institute, and to establish the state of play, what is working well and what could be improved. The suggestions emanating from this quality assurance audit are considered crucial for EEC-ITIS in order to continue improving its quality assurance mechanisms and improve its institutional quality.

While EEC-ITIS had taken note of some of the initial remarks made during the on-site audit visit by EQA peer review panel at EEC-ITIS on 11th and 12TH October 2018, and had started addressing some of the immediate recommendations to further improve its institutional mechanism, it has also examined the final recommendations in this audit report as received by NCFHE and shall be taking on board all of the recommendations made in section 3 of this quality assurance report as part of its future plan to continue strengthening its institutional approach.

EEC-ITIS further notes that a good number of suggested recommendations are already measures in place or have been put in practice since the site visit.

2. Response to comments and proposals made by the Peer Review Panel in connection with Standards where the judgment was "Standard met or surpassed".

Standard 2: Institutional Probity
Feedback on recommendations for standard 2:

KR1: EEC-ITIS notes that its business plan is currently being updated in order to reflect the renewal of the organisation's function and is in the process of being finalised by end of 2020 (this was meant to be finalised prior, however due to the unprecedented effects of the COVID-19 pandemic and its impact on the institution, the business plan now has to be revised to take into account what adjustments need to be made in this regard).

A working group in this regard has been setup by the Principal in order to update EEC-ITIS's business plan reflecting on a three-pronged strategic approach: international recruitment, sustainability of the organisation and commitment towards Malta's business community. This will be duly aligned with its academic offering and place adequate policies for the continued monitoring of progress and to take necessary corrective actions in a timely and effective manner.

The business strategy which is thus being updated will further reflect on establishing a continuous approach to ensure that the programmes offered by the institute will continue reflecting the needs of industry and enterprise to ensure that EEC-ITIS will continue acting as a bridge between the academia and the world of work as part of its core strategic function.

R2: EEC-ITIS welcomes this recommendation. The Board of Directors in liaison with the Principal are currently working on a written procedure for the selection of headship positions when an

outside call is issued and for when an internal call is issued.

<u>Standard 3: Design and Approval of Programmes</u>
Feedback on recommendations for standard 3:

KR1: EEC-ITIS welcomes this recommendation and notes this is already implemented. EEC-ITIS notes that it had already engaged with industry stakeholders via one-to-one meetings and other means in the design of the currently accredited programmes thus this recommendation is already partially in place in the established procedure as explained during the site-visit and also acknowledged in the QA report itself.

Given that now there is now an established student body and an alumni network is slowly generating as the first intakes are finishing their cycle and getting into the world of work, EEC-ITIS considers this recommendation viable.

In the design of future programmes, EEC-ITIS shall thus continue with its market research exercises including by taking into account the views of industry stakeholder and also by taking into account feedback from alumni.

KR2: EEC-ITIS welcomes this recommendation and notes that this is already in place in practice. The Quality Manual shall htus be updated to specifically clarify that both the approval of the core members of the Special Committee and approval of the Board of Studies is required whenever there is the development and updates of academic programmes, thus ensuring the autonomy of such boards.

R3: EEC-ITIS welcomes this recommendation. The programme content section in the Quality Manual shall thus be updated to include the scope of the design, development and approval of the Tutor teaching material.

<u>Standard 5: Student Admission, Progression, Recognition and Certification</u>
Feedback on recommendations for standard 5:

KR1: EEC-ITIS takes note of this recommendation. The Admission Board Policy and guidelines for the definition and assessment of prior learning shall be documented and updated in the Quality Manual.

KR2: EEC-ITIS notes that this is already in place. The new examinations and assessment policy establishes the number of maximum units that can be carried forward and the number of times a student can be allowed to resit the same exam without the need for repeating the unit with attendance.

<u>Standard 6: Teaching Staff</u>
Feedback on recommendations for standard 6:

R1: EEC-ITIS notes that this recommendation has already started being implemented since from the time that the site visit took place until the audit report was received. All recruitment is done through interviews in order to assess eligibility for the respective posts. The interviewing board is composed of chaired by the Principal, and composed of a nominee representing the Board of Directors and the Faculty Coordinator who must collectively decide whether the candidate is eligible against a set of established assessment criteria. EEC-ITIS considers this to be a good practice.

KR2: EEC-ITIS notes that this recommendation has already started being implemented since from the time that the site visit took place until the audit report was received. A performance appraisal of each lecturer is done at the end of the calendar year by the Faculty Coordinator, which is then

approved by the Principal and verified by the Board of Directors. The first year of implementation is 2020.

Standard 7: Learning Resources and Student Support
Feedback on recommendation for standard 7:

R1: EEC-ITIS notes that this practice is already in place through the following measures:

I.   A list of medical professional endorsed by the school including psychologist, therapist, medical doctor and dentist is made available to student with the welcome pack upon enrolment;

II.   In order to monitor student progress, a one-to-one meeting is held between the Faculty Coordinator and each student every semester in order to discuss academic progress and performance. This also provides another avenue for direct student feedback;

III.   The Faculty Coordinator also has scheduled student visiting hours, of a minimum of six hours weekly dedicated for students visits whereby students can book an appointment to discuss any academic/administrative matters;

IV.   Registrar and the Principal both operate an open-door policy in order to facilitate direct student assistance on any ancillary/administrative queries.

KR2: EEC-ITIS notes that this recommendation has already started being implemented since from the time that the site visit took place until the audit report was received. The Quality Manual and the Student Handbook now include a direct reference for the extension of the submission date of an assignment due to extenuating circumstances.

Standard 11: Cyclical External Quality Assurance
No additional comments from EEC-ITIS. It is noted no recommendations are suggested on this standard.

3. Response to comments and proposals made by the Peer Review Panel in connection with Standards for which the Peer Review Panel decided "Improvement is required".

Standard 1: Policy for Quality Assurance

EEC-ITIS positively takes note of the recommendations made by the panel in this regard. EEC-ITIS would like to note that from the time when the on-site audit visit by the EQA peer review panel at EEC-ITIS on 11th and 12TH October 2018 was conducted until this report was received for feedback, there have been some changes in its organisational structure. These have also been reflected in an updated Quality Manual.

-   The institute's highest hierarchy is now a Board of Directors representing the shareholders to which the Principal is answerable. It is believed that this would enhance the system of check and balances within the headship positions of the institute;

-   The role of the Principal, who is now answerable to the Board of Directors, includes, but is not limited to, course marketing; student pre-admission interviews (acting upon recommendations from the respective faculy coordinators – newly created roles), student admission (acting upon recommendation from the registrtar); tutor selection and recruitment; tutor academic mentoring and appraising; overseeing the work of the faculty coordinators on scheduling of assessments, verification of all assignment briefs, liaison with internal verifier for assessment decisions; liaison with stakeholders from the world of work for organising placements; overseeing and approving the work of the respective faculty coordinators on the design, development and review of programmes; financial control and liaising with the NCFHE. In this regard, the remit of the Principal is now

reorganised to be more focused, to oversee the work of the faculty coordinators and registrar and to provide an overall supervisory role while focusing on the future business and academic direction of the Institute. This serves to provide more checks and balances whereby decisions are vetted and involve numerous distinct areas of expertise to increase the organisational capacity as the student body is gradually growing and evolving;

- EEC-ITIS takes note of the Panel's observations on the necessity to have a deputy to the Principal. From the time of the on-site visit by the EQA peer review panel at EEC-ITIS on 11th and 12TH October 2018 until the time of writing this reply, the role of assistant principal has been fulfilled and become vacant once again. EEC-ITIS had also seen been working on updating its business model and function to also include an English as Foreign Language (EFL) school operating under an EFL license issued and monitored by the EFL monitoring board. Given this new development, it was decided that the role previously designated as deputy principal would now be also split into two roles to reflect the new business model and academic function of EEC-ITIS. In this regard, EEC-ITIS has since updated its organisational structure to split its academic activities into two designated faculties: Faculty of Languages which is responsible for offering EFL courses at various levels along with other language courses, and a Faculty of Social Sciences and Hospitality which is currently responsible for offering the Certificate in International Tourism, Diploma in International Tourism and Hospitality Management, Higher Diploma in International Tourism and Hospitality Management and a Bachelor of Arts (Honours) in International Tourism and Hospitality Management. The activities of each faculty are coordinated by a 'Faculty Coordinator'.

  EEC-ITIS would therefore like to clarify that the role of Faculty Coordinator for the Faculty of Social Sciences and Hospitality, replaces what was previously referred to as 'programme coordinator' and 'course coordinator' in the Quality Manual which were previously used interchangeably. The Quality Manual has since been updated to reflect this.

  The Institute thus currently has two Faculty Coordinators, one for each faculty, supporting the principal in the academic affairs of each faculty[1]. The role of the Faculty Coordinator for the Faculty of Social Sciences and Hospitality, which this quality assurance exercise is thus concerned with, includes the following: design, reviewing and development of programmes, assisting the principal in student pre-admission interviews, scheduling of assessments, verification of all assignment briefs, monitoring student development, supporting students in their progress within the Institute, coordinating the lecturing faculty, liaison with internal verifier for assessment decisions, liaison with stakeholders from the world of work for organising placements, placement assessment, and advising the principal in main decisions from an academic point of view. This thus serves to provide further in-house capacity and expertise while at the same time ensuring coordination between the lecturers and tutors. Furthermore, this serves to adress the panel's remark of having a point of reference in the absence of the Principal;

- The role of Administrator and Registrar have been separated from each other into two full-time positions in order to separate the two roles. This was done in order to invest further in the capacity building of the institute by enhancing the administrative arm to deal with administrative procedures while ensuring that the registrar is able to focus more on

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[1] As EEC-ITIS now has two licenses, as an EFL school monitored by the EFL monitoring board and as a Higher Education Institution monitored by the NCFHE, the setting up of two faculties is intended to distinguish the EFL programmes into one faculty (Faculty of Languages) and higher education programmes licensed by NCFHE into a separate faculty (Faculty for Social Sciences and Hospitality). The Faculty Coordinator for the Faculty of Languages is the Director of Studies (Dos) required for the operation of a licensed EFL school. The Faculty Coordinator for the Faculty of Social Sciences and Hospitality, which this quality assurance exercise is thus concerned with, assists the Principal in the academic running of the higher education programmes.

recruitment, handle enquiries by applicants and current students while also supporting the Principal;

- The role of Quality Assurance Coordinator has been kept and is now incorporated within the Faculty of Social Sciences and Hospitality, liaising directly and collaborating closely with the Faculty Coordinator and the Principal on the operational and academic aspect of the institution. The Quality Assurance Coordinator remains the Institute's Quality Management System Representative and is mainly responsible for ensuring that the Quality Management System is fit for purpose through its monitoring, updating and reporting;

EEC-ITIS further notes that the Quality Manual has been updated in order to address the previously interchangeable use of the words 'module' and 'unit'. As had been informed by the Principal during the site visit, the updated terminology to be used is 'Unit'. All study units are delivered by one tutor. The Quality Manual, Policies and Procedures have also been communicated and made accessible to all staff. As part of the operational procedure and the reorganisation of the institution, staff are now regularly encouraged by the principal and faculty coordinators to make reference to the established procedures while ensuring that these are reinforced in the day-to-day administration of the institute. The Quality Manual has also been made accessible to students and staff via the student drop-box facility.

EEC-ITIS also notes that its business plan is currently being updated in order to reflect the renewal of the organisation's function and is in the process of being finalised by end of 2020. A working group in this regard has been setup by the Principal in order to update EEC-IT IS's business plan reflecting on a three-pronged strategic approach: international recruitment, sustainability of the organisation and commitment towards Malta's business community. The business strategy which is thus being updates will further reflect on establishing a continuous approach to ensure that the programmes offered by the institute will continue reflecting the needs of industry and enterprise to ensure that EEC-ITIS will continue acting as a bridge between the academia and the world of work as part of its core strategic function. The working group is also working on setting up the performance indicators to indicate and monitor performance in relation to the Institute's mission.

Feedback on recommendations for Standard 1:

KR1: EEC-ITIS notes this is already in place through the following measures:

I.   Direct student feedback can be provided through the anonymous student feedback questionnaires sent at the end of each study unit;
II.   In order to monitor student progress, a one-to-one meeting is held between the Faculty Coordinator and each student every semester in order to discuss academic progress and performance. This also provides another avenue for direct student feedback;
III.   The Faculty Coordinator also has scheduled student visiting hours, of a minimum of six hours weekly dedicated for students visits whereby students can book an appointment to discuss any academic/administrative matters
IV.   Registrar and the Principal both operate an open-door policy in order to facilitate direct student assistance on any ancillary/administrative queries
V.   All visiting lecturers are reachable by email for additional student support outside of lecturing hours as part of their work duties.

KR2: EEC-ITIS has already taken direct action on this recommendation. EEC-ITIS has since updated its organisational structure to split its academic activities into two designated faculties: Faculty of Languages which is responsible for offering EFL courses at various levels along with other language courses, and a Faculty of Social Sciences and Hospitality which is currently responsible for offering the Certificate in International Tourism, Diploma in International Tourism and Hospitality Management, Higher Diploma in International Tourism and Hospitality

Management and a Bachelor of Arts (Honours) in International Tourism and Hospitality Management. The activities of each faculty are coordinated by a 'Faculty Coordinator'. The Institute thus currently has two Faculty Coordinators, one for each faculty, supporting the principal in the academic affairs of each faculty. This ensures that the Institute has the necessary resources to ensure a well-planned and effective delegation of tasks and hand-over of duties while ensuring the continuity of the Institute and the programmes on offer.

R3: EEC-ITIS has already taken direct action on this recommendation. The role of Faculty Coordinator for the Faculty of Social Sciences and Hospitality, replaces what was previously referred to as 'programme coordinator' and 'course coordinator' in the Quality Manual which were previously used interchangeably. The Quality Manual has since been updated to reflect this.

KR4: A specifically setup working group under the direct auspices of the Principal, is currently working on setting up the performance indicators to indicate and monitor performance in relation to the Institute's mission.

R5: EEC-ITIS welcomes this recommendation and thus shall be updated in the ethics policy and principles against intolerance to also reflect this matter.

KR6: EEC-ITIS welcomes this recommendation. The Quality Manual shall thus be updated include a policy for reasonable adjustments (special arrangements) or alternative forms of assessment for Students with special needs.

KR7: EEC-ITIS welcomes this recommendation. The Institute has set in operation its various boards and is keeping record of agenda and meetings conducted.

Standard 4: Student-Centred Learning, Teaching and Assessment

Feedback on recommendations for Standard 4:

KR1: EEC-ITIS welcomes this recommendation. The Student Handbook shall be updated in order to include policies and procedures covering, ethics, complaints, appeals, extenuating circumstances, fees for rescheduling and resit of exams, regulations regarding carrying forward of failed units and student feedback. EEC-ITIS further notes that the student handbook has already been updated from the time of the site-visit to include an examinations and assessment policy. This lists procedures on fees for rescheduling and resit of examinations and thus this recommendation is already partially implemented.

KR2: EEC-ITIS welcomes this recommendation. In this regard, the examinations and assessment policy shall be updated to include the following examination procedure:

I.   At the beginning of every exam each student is allocated a unique index number (UIN) by the invigilator. The invigilator will list the allocated UIN near each student name and student ID on the attendance sheet. This attendance sheet shall be passed on directly to the Faculty Coordinator and not stored with the rest of the exam scripts which will be passed on to the tutor for the initial correction;

II. The examination template shall be updated to ensure the students list their UIN instead of their names. This would allow further transparency in the examination correction procedure. The same UIN shall be kept for the correction procedure by the second examiner.

KR3: EEC-ITIS notes that since the site-visit has taken place until the receipt of this report, this recommendation has already been implemented. The submission deadline for assignments is now taking place three weeks after examinations for each semester thus allowing for a more staggered

procedure which doesn't overburden students.

Furthermore, for those study unit where a presentation or a written assignment component is part of the procedure, there has been an established practice whereby the assignment/presentation title is provided to students within the first week of the commencement of the study unit in order to allow enough time for self-study and individual research. This is considered as a good practice by EEC-ITIS.

KR4: It is to be noted that this is already very clearly defined in a lot of detail in the study unit descriptions filled out according to the NCFHE templates. Each study unit has clearly defined learning outcomes, learning objectives and assessment guidelines and objectives which are all unique to every study unit. These were also subsequently verified by the NCFHE as part of the accreditation process. Therefore EEC-ITIS doesn't understand the purpose of this recommendation. EEC-ITIS notes that since the site-visit has taken place until the receipt of this report, further action has been taken in this regard through the following procedures:

I. Assignment titles and presentation titles are provided within the first week of lectures for every semester;

II. All assignment titles, presentation themes, examination paper questions and any form of assessment is first drawn up by the respective study unit lecturer in charge, vetted by the Faculty Coordinator and approved by the Examinations board whose autonomy is guaranteed under the Quality Manual.

KR5: This measure is already in place. Upon request to the Faculty Coordinator, students can have access to corrected scripts, including the marking sheet and comments sheet. Furthermore, students are able to book an appointment with their lecturer or obtain feedback in writing from the respective lecturer on their assessment. All visiting lecturers are reachable by email for additional student support outside of lecturing hours as part of their work duties.

KR6: EEC-ITIS takes note of this decision. Documented evidence of the decisions by the Internal Verifier (signature, date etc.) shall start being recorded.

R7: EEC-ITIS takes note of this recommendation and shall update the Quality Manual to make it clear that the established sampling size for the post-assessment internal verification is 100 % of Student cohort size.

KR8: This measure is already in place. There are established marking schemes/grading rubrics for assignments and examinations. These mechanisms are in place to ensure fairness and consistency when grading. Model answers are drawn up by the respective tutors are these are different for each study unit based on the learning outcomes.

R9: EEC-ITIS takes note of this recommendation and considers it a good practice to include a viva voce for the degree programme in the Quality Manual.

KR10: This measure is already in place. A student feedback questionnaire is disseminated at the ned of each study unit.

KR11: This measure is already in place and records are kept in case there is an appeal. The QA audit report confirms that:

"During the interviews with the Panel, <u>the students noted that they never had the need to make an official written appeal or complaint since they prefer to communicate any issues verbally with the Principal</u>."

This confirms that up to the site visit there had never been an appeal, especially given that the

relatively small size of the student body. In this case, it is to be noted that in the eventuality that an appeal is made, follow-up action will be recorded in writing through email. Notwithstanding, EEC-ITIS has since never received an appeal from any of its students. In this regard and based on the above observation, EEC-ITIS finds the following remark by the panel contradictory to the above finding especially since there had never been an appeal prior to this date and thus doesn't see the availability of this observation:

"The Panel was not provided with any records of appeals or complaints received, processed and upheld or refused. The Panel, therefore, could not, through documented evidence provided (emails, decisions etc.,) reach any conclusion or opinion regarding the effectiveness and consistency of the processes in place for the formal resolution of appeal or complaint cases relating to lack of academic integrity, discrimination, intolerance etc."

It is to be noted that one recorded appeal has been made in March 2020 and a record of such appeal has been kept in writing upon which action is currently being undertaken.

KR12: This recommendation is already in place. The questionnaires filled by employers and students during the accredited work-based learning unit, are based on identifying a set of competences that need to be successfully demonstrated by the students, including managerial competences, soft skills, teamwork, on-site and practical learning and theoretical knowledge acquired during the placement assessment. Furthermore, the assessment criteria for the final essay and for the reflective journal are further based on such competences.

KR13: This measure is already in place. The Policy and governance structure already allows students to have recourse to an appeal of an academic decision as is attested in the audit itself and the findings of the panel. The outcome of a complaint decision for the resolution of complaints has now been changed to 13 working days.

Standard 8: Information Management

Feedback on recommendations for Standard 8:

KR1: EEC-ITIS welcomes this recommendation and considers that this might constitute a good practice to further enhance its student support mechanisms. Until now feedback was provided upon request, however EEC-ITIS shall thus implement this within immediate effect especially since the assessors' comments are already collated within the current correction system.

KR2: EEC-ITIS also welcomes this recommendation and considers that this might constitute a good practice to further enhance its student support mechanisms and shall be implementing this immediately.

KR3: EEC-ITIS notes that since the site-visit has taken place until the receipt of this report, this recommendation has already been implemented. All policies have been updated with the last date of revision and indicating the version number to ensure reliable information management such that both Students and staff always have in hand access to current and approved printed versions of documents.

KR4: EEC-ITIS welcomes this proposal. The Institute shall be processing periodic analysis of data about the inputs and outputs of the quality management system on a yearly basis at the end of the year.

KR5: EEC-ITIS welcomes this proposal and shall be conducting a student satisfaction and graduate (tracer) feedback study one every three years on the previous three intakes which would have graduated. This had not yet been conducted so far as there hadn't been a high volume of graduates and alumni in the first place to obtain an objective sampling. The first year of the study shall be

2020.

Standard 9: Public Information

Feedback on recommendations for Standard 9:

KR1: EEC-ITIS welcomes this proposal. The year of issue shall be included in the upcoming revised prospectus scheduled to be published in 2020.

KR2: The information on the Prospectus with respect to the entry requirements, working experience, and title of the Degree shall be updated in the upcoming issue of the prospectus.

KR3: EEC-IT IS takes note of this proposal. The key policies and regulations shall be made available to students and the staff. It is however to be noted that this is already being implemented through the internal Drop-Box.

KR4: EEC-ITIS notes that since the site-visit has taken place until the receipt of this report, this recommendation has already been implemented. An examinations and assessment policy has been issued which explains the pass mark and the applicable fees for the resit of examinations and assignments.

Standard 10: On-going Monitoring and Periodic Review of Programmes

Feedback on recommendations for Standard 10:

CR1. EEC-ITIS notes that a set procedure for monitoring and periodical reviewing of academic programmes to ensure that these are meeting the set objectives and expectations as stated and acknowledged in the report itself:

"The Panel was informed that the course content is discussed regularly between the Principal and the QA Coordinator and with the industry stakeholders and the academic team. The Principal confirmed to the Panel that the involvement of the stakeholders is conducted informally. The Principal stated that this process is leading to improvements....The Principal remarked that although the formal review period is planned every five years, decisions to review and updated programmes are taken on a regular basis"

As evidenced in communication with NCFHE, revisions to individual study units are done on a constant basis. As stated previously, the Institute has also already started implementing a set process that facilitates direct student/alumni feedback in its cyclical review of its accredited courses**.**

KR2. EEC-ITIS welcomes this recommendation and believes that this is a good practice. The Institute will thus re-valuate the time frame for the cyclical programme to enact a more frequent overall programme review.

CR3. EEC-ITIS welcomes this recommendation and shall be introducing a structured documented internal review of the Quality Management System.

CR4. EEC-ITIS takes note of this recommendation. The Institute shall ensure that changes to the programmes are communicated to NCFHE prior to the launch of the revised programme.

In the setting up of the review Panel for **EEC-ITIS,** the NCFHE sought to maintain a high degree of diligence in the process of selection of the members of Peer Review Panel. The Panel sought to be composed of specialists in quality assurance to act as External Peers, professionals and practitioners of quality assurance frameworks, as well as students who, prior to the audits, attended professional Training Seminars organised by the NCFHE.

The following bio notes present the profiles of the members of Peer Review Panel. The bio notes are correct as at the time of when the QA audit was carried out 11-12th October 2018.

Head of Review Panel/External Peer:

Ing. Pierre Dalmas

Since July 2014, Ing. Pierre Dalmas holds the position of Director, Quality Assurance at the Malta College of Arts Science and Technology. His primary responsibility is to facilitate the enhancement of the academic and administrative processes of the College as well as to ensure the compliance of the Quality Management System with National and European standards, guidelines and legislative requirements.

He holds a Masters Degree in Business Administration (Grenoble Graduate School of Business, France) and an Honours Degree in Mechanical Engineering (University of Malta). His previous management positions within the diverse manufacturing and services industry sectors have helped Pierre in relating the needs of the industry with the expected outcomes of vocational and professional education and training. Pierre is also a certified trainer and has delivered training locally and abroad in industry, academic and vocational institutions.

Pierre is one of the MCAST representatives on the ReferNet team, an EQAVET National Reference Point (since 2015) and a European Vocational Training Association (EVTA) expert panel member. He regularly attends, both at a national and European level, meetings and conferences related to VET and quality assurance.

Peer Reviewer:

Mr Gino Schiavone

Currently the Head of Quality Assurance at the Institute of Tourism studies (ITS Malta) and an ECVET National expert. He is qualified in Tertiary Education Management with a specialization in Quality assurance at EQF Level 7 from the University of Melbourne. He held the position as General Secretary of European Observatoire of Sport Employment and lecturer on Sports Tourism (ITS). He was appointed as Secretary to the Malta Sports Reform Commission. Graduated from the University of Malta as a Physical Education teacher he has occupied several positions including Chief Executive Officer of the Malta Sport Council, member of the expert group for the Sport Development Policy and member on the board for Sports vision 2020. He also formed part of the MEUSAC board representing Tourism and is the Founder President of the Malta Exercise Health and Fitness Association (which contributed to introducing the outdoor gyms for better public participation in Fitness).

Student Peer Reviewer:

Mr. Christian Sammut

Mr Christian Sammut is Senior Systems Administrator working within the Ministry of Education and Employment in the Government of Malta. He has a broad experience in technical support and project management. His recent activities include analysing, evaluating and managing IT projects within the Ministry. Christian reads a Diploma in Industrial Electronics and Computer Engineering, BTEC Diploma in Computer and Information Systems and a Higher National Diploma in Computing and Systems Development. He is currently reading a BSc Hons in Information Technology. Moreover, Christian has successfully achieved several IT related certifications such as MCSA (Microsoft Certified System Administrator), CompTIA Network +, APMG ITIL Foundation, ISTQB-ISEB Certified Tester Foundation and many more.