



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

External Quality Assurance Audit Report

**American University
of Malta**

Carried out between the 13 - 15
October 2020

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Abbreviations List

ECTS	European Credit Transfer System
EQA/QA audit	External Quality Assurance Audit
EQAVET	European Quality Assurance Reference Framework for Vocational Education and Training
ESG	Standards and Guidelines for Quality Assurance in the European Higher Education Area
GDPR	General Data Protection Regulation
IQA	Internal Quality Assurance
KPIs	Key Performance Indicators
MQF	Malta Qualifications Framework
NCFHE	National Commission for Further and Higher Education
NQAF	National Quality Assurance Framework for Further and Higher Education
SAR	Self-Assessment Report

Executive Summary

Institutional background

The American University of Malta (AUM) is a private university founded by Sadeen Education Investment Ltd., which was inaugurated on 16th September 2016, with the issuing of its license by the National Commission for Further and Higher Education (NCFHE).

Overview of the audit process

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 online audit visit. The panel was responsible for reaching conclusions on Standards 1 and 3 – 11. As outlined in the External Quality Audit Manual of Procedures, the NCFHE sought external expertise to evaluate and reach a conclusion on Standard 2. Throughout this report, the panel also highlighted areas of good practice which, in its view, make a positive contribution to academic standards and quality of education that are worthy of being emulated and disseminated more widely.

The panel met for induction and preparation on the 12th June 2020 and again on the 4th September 2020 to determine the specific terms of reference, aims, objectives and research question of the QA process. A preliminary online meeting was held with the provider on the 16th September 2020 and the audit visit was conducted virtually from the 13th to the 15th October 2020.

Summary of the conclusions given by the Peer Review Panel

On the basis of the findings documented in the report, the panel has concluded that the AUM meets Standards 5, 9 and 11, requires improvement for Standards 1, 2, 3, 4, 6, 7 and 8, and does not meet Standard 10. The recommendations in the report are meant to improve the standards already in place and to enhance good practice.

The panel made 38 mandatory recommendations, 2 of which are to be implemented within a month of the publication of the report, 15 before the beginning of the 2021/2022 academic year and 21 before the end of the 2021/2022 academic year. It also made 15 key recommendations and 11 recommendations.

About the External Quality Audit

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 in relation to the programmes of study that they offer and the achievements and capabilities of their students. Moreover, it provides a focus for identifying good practices and for the implementation of institutional approaches which enable 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:

- i. 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.
- ii. The obligations of licence holders to comply with established regulations and any conditions or restrictions imposed by NCFHE.
- iii. The governance and financial sustainability of providers, including assurance 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 teaching and learning 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 in a better way?

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 to address 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.

The Peer Review Panel

The Peer Review Panel was composed of:

Chair of Review Panel:

Dr Anca Prisacariu

Peer Reviewer:

Dr Milan Pol and Ms Oana Sarbu

Student Peer Reviewer:

Mr Chris Sammut & Mr Aleksandar Šušnjar

QA Managers (NCFHE):

Mr. Jurgen D'Amato, Ms. Fiona McCowan, Ms. Viktoriia Maltseva & Mr. Giacomo Annese

Specific Terms of Reference

As defined in the NCFHE Quality Audit Manual of Procedures, the panel was responsible of examining how the institution manages its own responsibilities to ensure the provision of the quality and standards of the education they offer. In particular, the following issues were addressed:

1. the fitness for purpose and effectiveness of the Internal Quality Assurance (IQA) processes, including an examination of the systems and procedures that have been implemented, together with the documentation that supports them;
2. the compliance of licensed providers with the established regulations and any conditions or restrictions issued by the NCFHE;
3. the governance and financial sustainability of providers, including assurance about the legal status of the provider, the appropriateness of corporate structures and the competence of staff with senior management responsibilities.

In preparation for the audit exercise, the panel observed that the framework of policies, procedures and processes, together with the institutional clarity in hierarchy and task division, do not always support the institution in ensuring transparency and predictability of its activities for both internal and external stakeholders. This also refers to the systems in place for staff professional development, as well as for the design, approval, ongoing monitoring and periodic review of study programmes. Lastly, the inconsistent usage of data to inform improvement and decision-making was identified as not always enabling the AUM in the achievement of its strategic objectives.

These areas have, therefore, been identified as lines of inquiry.

The review team decided that, as part of an enhancement-led approach, it would issue recommendations linked to all parts of the operations of the institute. The report therefore distinguishes between:

- Mandatory recommendations (MR), which are crucial to meet a standard and shall be implemented according to the timeframes stipulated by the panel;
- Key recommendations (KR), which are important to improve a standard and which should be implemented expediently by the institution according to the timeframes stipulated by the panel;
- Recommendations (R) for improvement, which are merely suggestions based on the panel analysis and observations; these could be implemented by the institution.

Institutional Context

The AUM is a private university founded by Sadeen Education Investment Ltd. Sadeen Education Investment is committed to establishing a university based on the American model. The American University of Malta (AUM) was inaugurated on the 16th of September 2016, with the issuing of its license and accreditation by the National Commission for Future and Higher Education of Malta (NCFHE).

Mission Statement: An American comprehensive university dedicated to nurturing those who are inquisitive of mind, ambitious of heart and robust of spirit.

Vision Statement: Securing a bright future for all by producing a next generation of leaders with an ethical, entrepreneurial and innovative spirit.

Values: Integrity, Quality, Relevance and Courage.

The **goals of AUM for 2020-2025** are:

Goal 1: Commit to excellence in everything AUM.

Goal 2: Foster a holistic learning environment, preparing students for a lifetime of success.

Goal 3: Challenge students to reach beyond their expectations.

Goal 4: Build a global brand and presence.

Goal 5: Operate on the leading edge of technology in education.

Goal 6: Contribute to the community and economy of Malta and the region.

AUM offers short- and long-term accredited courses on a variety of topics ranging from Malta Qualification Framework (MQF) level 3 (Awards, Certificates and Diplomas) to MQF level 7 (Masters degrees), including 10 undergraduate programs and 3 graduate programs.

Analysis and Findings of Panel

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 institution has developed a Quality Assurance Policy which defines the general principles and guidelines for internal and external quality assurance, quality culture, including the design and approval of courses and ongoing monitoring and review of courses and programs. However, the panel is confused to see that the document is in fact a collection of institutional policies in a larger sense - teaching, learning and assessment (mitigating circumstances, transfer of credits/recognition of prior learning), admissions, faculty, learning resources and student support, information management, public information - in addition to mission, vision and strategic goals. The panel therefore observes that the document has turned into a Manual of Policies and Procedures applicable only for the 2020/2021 academic year.

The AUM has also developed a Quality Assurance Manual, which is slightly overlapping in content with the Quality Assurance Policy and whose relationship to the policy is to create confusion for those who should be in charge of implementing both documents, as observed in the meetings conducted by the panel. The Manual includes the processes, mechanisms, instruments, reporting, data collection and timeframes that further detail the operationalisation of quality assurance at institutional level. However, the panel has identified that, with the exception of the course evaluations, none of the other instruments were being successfully implemented at the AUM at the time of the audit.

The panel has no indication as to when and by whom the Manual and the Policy have been formally adopted, as this information is not part of the documents. The responsibilities of departments, schools, faculties, institutes and/or other organisational units, as well as those of institutional leadership individual staff members, with respect to quality assurance, are generally detailed in the Policy. However, the role of the students in quality assurance, and the responsibilities of the Accreditation/Planning Committee are not clarified in the Policy. In fact, the panel has learnt that, beyond serving as a source of information in surveys, students do not have a role in quality assurance.

At the time of the audit, the Quality Assurance Policy and Manual were not made publicly available on the institutional website. The website does include other policies, such as GDPR Policy, Student Privacy Policy, Student Data Protection Policy, Bullying and Discrimination Policy, Faculty Employee Handbook, or any others.

The structures dedicated to the implementation of quality assurance policy are as follows:

1. **Provost**, serving as the chief academic officer with oversight of all aspects of the academic programme and provides leadership for all areas of student programs and services. With regards to quality assurance, the provost:
 - Ensures the standard and quality of education;
 - Promotes academic excellence throughout the university;
 - Oversees all academic policies and procedures.

2. **Accreditation/Planning Committee**, advisory to the Provost. This committee is charged with the following, in the area of accreditation:
 - Addressing NCFHE requirements for programme accreditation;
 - Preparing for the NCFHE programme audit scheduled for 2021;
 - Preparing reports that demonstrate the AUM's position with respect to NCFHE accreditation standards;
 - Addressing requirements for US accreditation;
 - Providing continuity and leadership in ongoing accreditation activities.

3. **Quality Assurance Manager:**
 - Manages and supervises all aspects of quality assurance and institutional research;
 - Ensures ongoing compliance with NCFHE standards and any other accrediting bodies relevant to the AUM;
 - Conducts institutional research, as needed;
 - Manages the strategic planning process upon direction of the Provost and CEO;
 - Supervises all programme and unit level outcomes assessment;
 - Administers Course-Teacher Evaluations for every course taught at the AUM;
 - Provides reports required by NCFHE and other accrediting bodies;
 - Manages the preparation of the AUM Annual Report;
 - Manages the process of preparation for and execution of all periodic reviews by NCFHE and other relevant accrediting bodies;
 - Maintains a comprehensive dashboard for board KPIs;
 - Serves as liaison with the AUM's Quality Assurance Advisory Partner.

However, the hierarchy with regards to quality assurance is highly contradictory: according to the quality assurance policy, the Quality Assurance Manager reports to the Provost or the CEO. However, according to the Manual, the Quality Assurance Manager reports directly to the President or his/her designee. This matter stayed equally confusing during the meetings conducted by the panel, with different interviewees confirming contradictory reporting structures.

Furthermore, the Self-Assessment Report (SAR) further clarifies that, in terms of external stakeholders' engagement in quality assurance, the following two entities have a substantial role, as follows:

1. **The Board of Trustees** is responsible for: upholding the mission and strategic direction of the university, supervising the president, approving the annual operating and capital budgets, and providing general supervision of the university. The Board receives regular reports from the university's CEO or Provost;
2. **Clemson University** acts as the Quality Assurance Advisory Partner (QAAP) through a contractual agreement. Clemson University undertakes a rigorous review of the AUM's policies and procedures annually, and it prepares an annual report for the NCFHE and the AUM's senior administration and Board of Trustees.

Generally, the responsibilities of different teams and departments have been assigned in line with the 11 NCFHE standards and the main QA committee has been specifically assigned to prepare the present audit. The panel is therefore concerned to observe that the quality assurance system is being driven by the external processes the institution is undergoing, and not by an internal ownership and commitment for the constant quality improvement of its operations. Another piece of evidence in this regard is that the SAR submitted to the panel was not a self-reflective and analytical exercise, but a collection of AUM answers to the Clemson report of 2019 (Clemson University is an American institution acting as the Quality Assurance Advisory Partner of the AUM). These two arguments, together with the information collected during the online audit, supported the conclusion that the level of development of quality culture across the AUM does not support the development of institutional operations. The very idea of quality culture is not well-defined, spread or promoted across the institution. Thus, the institution should increase its efforts in promoting the development of quality culture as a common understanding of quality values, for which every individual in the organisation is responsible. These should be a set of shared ideas, beliefs and values about quality which result when everyone inside the academic community is sincerely engaged and motivated. The quality assurance policy makes reference to the relationship between research and teaching and learning. This is, first and foremost, reflected in one of the QA key principles: the AUM emphasises the importance of teaching and learning, and as a university it recognises that research, scholarship, and creative work, as appropriate to specific disciplines, is essential for its faculty and, when possible and appropriate, its students - this also includes the integration of research of several components in institutional management, such as faculty contractual agreements, performance review and arrangements for safeguarding integrity, among others. Furthermore, following a recommendation of Clemson University in 2019, the AUM has developed and adopted the Faculty Policies and Procedures in order to enforce the integration of research with teaching and learning through the provisions for Faculty Contract Renewal and Promotion, Faculty Rank and Faculty Hiring (Appointment). This is further reflected in the Faculty Employee Handbook, publicly available on the AUM website.

As part of its Faculty Employee Handbook, the institution has also developed and adopted a Code of Ethics that provides guidelines for ethical behaviour and decision-making in all aspects which concern every employee's work with the end goal being to achieve high professional standards in relation to both the AUM and local communities. The Code underlines that every employee should help foster the civic virtues of the students, such as their integrity, diligence, responsibility, co-operation, loyalty, and respect. Likewise, the principle of integrity has also been echoed in the AUM Student Handbook, which defines the AUM Honor Code as follows: *"To promote a stronger sense of mutual responsibility, respect, trust, and fairness among all members of AUM community and with the desire for greater academic and personal achievement, we, the student members of the university community, have set forth this honor code: Student members of the American University of Malta community pledge not to cheat, plagiarize, steal, or lie in matters related to academic work."* As a result of the meetings conducted during the audit, the panel could observe that there is a high degree of academic freedom across the academic community. The only procedure that seemed restrictive to the panel was the apparent inability of academic staff to amend the syllabus of the courses they deliver, despite recent challenges and developments; this matter is further detailed in Standard 10.

The institution has also defined policies and procedures for ensuring against academic fraud across its academic community, for both its students and staff through its Code of Ethics and Honor Code included in both the student and staff handbooks. Generally, the panel observed awareness of different stakeholders with regards to academic integrity expectations. However, this has not been the case for sanctions applicable in case of breach of the respective expectations. The panel believes that the institution might have better chances of promoting compliance with academic integrity if the applicable sanctions are disseminated as well. The institution also purchased a license subscription with Turnitin, which is meant to be of use for both faculty and students. According to the SAR, students may submit their papers through Turnitin for an unlimited number of times before submitting their work to the faculty for grading. However, according to the meetings conducted by the panel, not all internal stakeholders, staff or students, have visibility of this platform and make use of it. Those that are aware of its existence perceive it as an optional step in the assessment process. The panel is therefore concerned that Turnitin is not being used to its full potential, especially if it is not being stipulated as mandatory.

In addition to defining standards for honesty, integrity and ethics and enforcing them through procedures for contract termination and student dismissal, the institution understands its role in promoting a culture of ethics and honesty. According to the Faculty Policies and Procedures, each syllabus at the AUM has to include the Academic Honesty Policy, including specific reference to plagiarism. Activities were also organised to deliver presentations aimed at increasing students' understanding of cheating, plagiarism and referencing. Lastly, students are asked to confirm the acknowledgement of an Academic Integrity and the AUM Honor Code. As mentioned before, however, the institution should

increase its efforts of promoting a standardised policy about the repercussions of plagiarism, which the panel has also observed on the agenda of the Student Academic Conduct Committee.

The institution has set up a Student Academic Conduct Committee charged with:

1. Reviewing the Academic Integrity Policy and making recommendations for change;
2. Administering the Academic Integrity Policy by making decisions on cases which have been referred to the committee including those involving cheating, plagiarism or falsification of data or source;
3. Reviewing cases of academic misconduct, including forgery of academic documents in an attempt to defraud; this also includes destruction, theft, or unauthorised use of laboratory data, or research materials;
4. Educating faculty, staff and administration about the implementation of the Academic Integrity Policy;
5. Reviewing grade appeals and petitions for reinstatement and making recommendations to the Provost regarding specific cases.

The AUM has made available online a set of information technology policies which are in place to ensure confidentiality, integrity and reliability within the university. The university has allocated a budget for technological upgrades, which enables it to purchase hardware and software to sustain staff and student demands proactively. Such investment ensures that resources are continuously available to support their day-to-day activities. The university has also invested in an in-house backup solution to facilitate the backup of its information on a regular basis. This ensures that such information can still be made available in any circumstance. The panel has also received evidence of audit trails of who amended what within a system.

The AUM has developed procedures for verifying the identity of all enrolled students, both before and after admissions:

- As part of their application process, prospective students are required to upload a scanned copy of their valid passport to the application portal, which is then reviewed by a member of the Admissions Team, checked for validity, and is then matched with the student's name on the application and on all supporting documents.
- Upon arrival on campus, students provide original copies of their passport and visa; the admissions office verifies the students' identities against the official identification document.

The institution has taken a number of active steps to act against intolerance of any kind or discrimination against the students or staff. Firstly, the AUM has drafted and adopted a Harassment, Bullying and Anti-discrimination Policy which determines that that AUM is an equal opportunity organisation and will not tolerate any form of harassment, bullying or discrimination. The AUM is also committed to ensuring that all of its community

members are aware of the importance of maintaining a workplace that is safe, free from discrimination and personal assault. The document also provides the procedures that shall be adopted in cases of allegations of harassment, bullying and discrimination. Furthermore, the non-discrimination message is enforced through both the Student and the Staff Handbooks. Lastly, the AUM has acknowledged that there is an imbalance in male/female representation in both its governance, administration, as well as its student population and is addressing this concern in its Action Plan. As observed during the online audit, the panel was impressed with the diversity of the academic community at the AUM and the values of acceptance and tolerance demonstrated. The panel is thus satisfied that there is no evidence of discrimination of any kind, and all stakeholders feel protected and comfortable within the institution.

The panel has received the *Strategic plan 2017-2020* approved by the Board of Trustees in September 2017, which defines the following areas of focus - Quality Education, Quality Student Services, Resources, Community Engagement and Service, which are then cascaded into six large goals:

1. Provide the highest standards of education, through teaching and research, based on an American liberal arts model and curriculum;
2. Create an environment that fosters academic quality and student success through innovative and effective teaching strategies, along with high quality academic and student support programs;
3. Provide students with a richly rewarding educational experience through strong academic support, student services and campus life initiatives;
4. Provide a safe and healthy campus to support and advance teaching, learning and research;
5. Maintain and enhance financial stability, integrity and transparency in all areas;
6. Build and promote AUM community engagement and service.

Each of the goals is further assigned objectives, coordinators and measurable KPIs (including timelines).

The panel also received the *Strategic plan 2021-2025*, approved by the Board of Trustees in September 2020, which defines the following six strategic initiatives:

1. Commit to Excellence in Everything AUM;
2. Foster a holistic learning environment, preparing students for a lifetime of success;
3. Challenge students to reach beyond their expectations;
4. Build a global brand and presence;
5. Operate on the leading edge of technology in education;
6. Contribute to the community and economy of Malta and the region.

Each strategic initiative is then further subdivided into separate goals. However, these are not further detailed into objectives, coordinators and measurable KPIs with attached timelines.

The panel is concerned with the inconsistency of the strategic planning methodology:

- none of the two strategic plans resulted from a participatory process; internal stakeholders have little or no visibility of the institutional priorities and they had no engagement in drafting the plans;
- it is unclear to the panel who was reporting on the 2017-2020 Strategic Plan progress to the Board of Trustees and how often this was being done. According to the meetings which took place during the audit, such presentations were conducted by the Quality Assurance Manager, the President or Provost. The panel is therefore unsure whether this lack of structure is hampering the institution in pursuing its priorities;
- there is no continuity between the two strategic plans. According to the senior administration of the institution, the plans for 2017-2020 and 2021-2025 are not connected, as the institution has simply changed gear;
- given the lack of measurability in the new Strategic Plan, the panel is unsure of how the institution evaluates the progress of its actions, if they are heading in the right direction, with the right speed and, most importantly, how it aims to identify when it has achieved the set objectives;
- in the meetings conducted by the panel, no evidence was gathered to prove that the internal quality assurance system has an effective role in supporting the strategic and operations management of the institution, providing for an evidence-based decision making process of governance or ensuring the closing of the feedback loop effectively by making the best use of data.

Good Practice Identified

The diversity of the academic community, strongly built on principles of tolerance and acceptance of all.

Recommendations for improvement

MR1. The institution shall ensure, before the beginning of the 2021/2022 academic year, that the Quality Assurance Policy limits itself to a quality assurance remit: the organisation of the quality assurance system i.e processes, mechanisms, instruments, reporting, data collection, timeframes, quality cycle, together with the responsibilities of different organisational units -those of institutional leadership, individual staff members and students with respect to quality assurance – while the rest of the academic policies are organised separately in the Policies and Procedures Manual, as reflected in the Bylaws of the Board of Trustees;

KR1. The institution should clarify, before the beginning of the 2021/2022 academic year, the role of the students in quality assurance beyond being solely a source of information in surveys, and the responsibilities of the Accreditation/Planning Committee in the Quality Assurance Policy;

MR2. The institution shall ensure, before the beginning of the 2021/2022 academic year, the publication of a Policies and Procedures Manual, updated on an annual basis, as per the Bylaws of the Board of Trustees;

R1. The institution could revisit the Quality Assurance Manual and ensure greater harmonisation and consistency with the Quality Assurance Policy, in both scope and content;

KR2. The institution should ensure, before the beginning of the 2021/2022 academic year, that the Quality Assurance Manual is fit for purpose with regards to the tools it proposes; the institution should be now able to clarify what should be kept in the Manual and implemented, and what can be removed;

MR3. The institution shall, before the beginning of the 2021/2022 academic year, publish the Quality Assurance Policy and Policies and Procedures Manual so that they are accessible on the institutional website for all interested parties;

KR3. The institution should clarify, before the beginning of the 2021/2022 academic year, the roles and responsibilities with regards to quality assurance, including ensuring institutional alignment with the reporting lines;

KR4. The institution should revisit, by not later than 12 months of the publication of the present report, the institutional approach to quality assurance, so that it is driven by an internal commitment for quality management and enhancement, rather than external processes;

R2. The institution could support the development of quality culture across the institution;

R3. The institution could increase the institutional awareness of the sanctions applicable in case of breach in the academic integrity expectations (including cheating and plagiarism);

KR5. The institution should increase, before the end of the 2021/2022 academic year, the institutional visibility of the anti-plagiarism software Turnitin, and regulate its use as a mandatory step of the assessment process;

KR6. The institution should ensure, by not later than 12 months of the publication of the present report, that the strategic planning is a participatory process by actively involving staff, students and external stakeholders;

R4. The institution could ensure the continuity of the strategic planning processes at the AUM by creating a link between the different strategic plans drafted and adopted by the institution;

MR4. The institution shall, before the beginning of the 2021/2022 academic year, revisit the 2021-2025 strategic plan so as to further detail specific objectives and actions, coordinators and measurable KPIs (intermediary and final), timelines and resource allocation;

MR5. The institution shall, before the beginning of the 2021/2022 academic year, clarify, formalise and implement a reporting methodology to enable the institution keep track of its strategic planning progress;

KR7. The institution should, within 12 months of the publication of the present report, ensure a coherent and integrated interaction/link between the strategic and operations

management and the quality assurance system, where the latter supports the decisions of the former.

Conclusion

Requires improvement to meet Standard.

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

The Sadeen Education Investment Limited or SEIL, registration number C-65576, was established in 2014, and is owned by its parent company Sadeen Malta Holding Limited, registration number C-71313. SEIL was established to build and develop the American University of Malta, based in Cospicua, which offers various undergraduate and graduate programs to its students.

Given the corporate structure of the licensed company, the indicators of the licensed operator, and thus the operating company SEIL, were noted. However, for the financial analysis part, the consolidated financial statements of the holding company, Sadeen Malta Holding Limited, were the ones which were consulted, as they would be more reflective of the financial standing and performance of the whole operation.

The company is generally adhering to fiscal, FSS/NIC, employment and other regulatory obligations, including submission of timely FSS reports and personal income tax returns, in a proper and timely manner. However, it has accumulated a liability of €7k to the Commissioner of Revenue with respect of Value Added Tax. Given the overall financial position of the company, this liability is not considered material.

When it comes to financial performance and soundness, reference is mainly made to the audited financial statements of Sadeen Malta Holding Limited – referred to also as the holding or the parent company. The group's financial statements are a truer reflection of the whole set up and was therefore subjected to analysis. The group has so far registered miniscule revenue, which is no way proportionate to the substantial investment made so far. This has led to a situation where during the year 2019, the group suffered a loss of €5.7m and its liabilities exceeded assets by €19.5m. This meant that the group has a massive negative equity base, which, however, can be mitigated if the liabilities due to the parent company, which stood at €26.8m at year-end 2019, are considered by the company as a capital contribution of a long-term nature. Unless its revenue increases exponentially, the going concern issue highlighted by the auditors of the company in the 2019 audit

report would persist and the company can only survive via the support of its ultimate holding company. In fact, the ultimate parent company, International Educational Services B.V. registered in Netherlands has pledged to support the local group for the foreseeable future to enable it to meet its obligations when they fall due and to carry on its business as a going concern within one year from the date of the letter of support.

Budgets covering a five-year period ending in 2024 show that the company plans to break-even in terms of profitability in the period 2023-2024. This implies that at present, the company is not in a position to meet unexpected challenges by putting in the necessary financial and human resources required at times of uncertainties, unless it retains the full and continued support of its ultimate beneficial owners.

With regards to compliance with the filing requirements of the Malta Business Registry, Sadeen Education Investment Limited is fully compliant and has already filed the financial statements for 2019, however its parent company has as yet not submitted the audited financial statements for the year 2018 to the authorities and hence is not fully compliant in this respect. However, the audited financial statements for both 2018 and 2019 were presented for review and hence, it is safe to opine that the parent company is presumably in a position to ensure compliance within a short period of time.

The panel has observed that the AUM has a very high-profile Board of Trustees that is both experienced and committed. However, there still is some uncertainty around its role and remit, which has raised some confusion within its membership and across the academic community: the Board sees its role as not including the day-to-day management, but setting where they believe the university should go, making sure that the mission, vision and strategy are met, while also ensuring an element of checking and control. The Senior Administration sees the role of the Board as the top governing body of the university, approving the policies, strategic plan and fees, whereas the SAR presents the Board as an external stakeholder to the institution. There is a constant confusion between the by-laws and practice with regards to the approval of policies and manuals (it is unclear what goes to the Board and what can be approved by other authorities), Board meetings (by-laws state a number of 4 meetings per year, whereas the panel learnt during the audit that monthly meetings are currently in place), or engagement in the strategic planning (according to the by-laws the Board approves the strategic goals, but in practice the panel learnt that the Board had created a sub-committee from within its membership in charge of creating the plan by themselves).

The institution used to have a President and now has a Chief Executive Officer; it is unclear to the panel how the institution defines the difference between the two and what determined this change. Some institutional documentation still makes reference to the President instead of the CEO. The panel is unsure if the CEO is replacing the role of the President or if a President is still to be recruited in the future. According to the CEO job description, the panel finds the listed responsibilities overarching and covering the

general management of the institution. However, according to the Senior Administration interviewed by the panel, the role of the CEO is mostly to create and maintain the communication channels with externals, such as employers and the Board.

According to the Senior Administration the panel has met, the next decision-making entity after the Board are the CEO and the Committees. However, the SAR presents the committees as advisory, not decision making, which continues to confuse the panel with regard to the clarity and consistency of the institution about its own operations. The panel found no clear evidence of structure in determining the organisation chart e.g. when asked how the institution determined the number and area of activity for its committees, the senior administration declared that this process was needs based, but was unable to add further details. The panel also observed that all meeting minutes of AUM committees start in September 2020 (the immediate vicinity of the NCFHE audit exercise) even though they were theoretically set up more than a year ago. In addition, the members that supposedly attended the meetings of the respective committees could not give specific answers as to how often the committees met, who was in attendance and what the topics on the agenda were. The panel has learnt that there were several initiatives of academic staff to set up an Academic Senate in order to establish a more structured, intuitive and consequential decision-making process when it came to academics, but the proposal was rejected by the senior administration.

The panel cannot state with certainty that the AUM leaders are fit for purpose. Upon comprehensive analysis of the CVs of AUM staff against their corresponding job descriptions, the panel found that roles such as the Provost and Human Resource Director are held by individuals that are not equipped with the suitable qualifications which would enable them to meet the responsibilities of their positions successfully. According to the meetings conducted by the panel, there are some concerns about the governance and administration learnings in their 5 years of existence. There seems to be a question about the evolution of profiles of institutional leaders that is not necessarily reflected in their qualifications and experience as the institution grows. In addition, there is a lack of continuity that has been underlined as having impacted AUM's institutional evolution and memory during its short history.

The panel found no convincing evidence of students' engagement in the decision-making and governance of the institution. Where such evidence was provided, it related mainly to extracurricular activities of students, but it does not demonstrate students' impact on institutional measures, such as, teaching and learning policies and structures. Furthermore, the student representatives do not seem informed about key processes, and there is no evidence of them influencing institutional change. Of equal concern is the fact that the student representation system is not grounded on the European pillars of the student movement:

- the panel learnt during the audit meetings that the Student Affairs Department of the AUM is selecting the student representatives for different committees, rather than having an open election by the student population;

- in order to be appointed a student representation position, one person needs to meet a certain GPA, which the panel finds both restrictive and discriminatory; furthermore, there is no evidence that there is any connection between student performance and their ability to represent their peers;
- there are no clear communication channels between the student representatives and their electorate that would continue to add accountability to the student voice at the AUM;
- students are not represented in all committees of the institution; the AUM senior administration considers, as confirmed during the audit, that such participation would not be beneficial for the students as it is not something they can learn and benefit from.

For the reasons stated above, the panel is concerned that the AUM structures, individual positions, as well as appointees, in the short history of the AUM, might not have enabled the institution to successfully achieve its goals. This may be due to lack of continuity in key roles which, in turn, has an impact on the institutional memory, structural instability, uncertainty of internal structure decision making bodies, and qualifications of leadership and management. Lastly, the panel reminds the institution that Malta has been a full member of the Bologna Process/European Higher Education Area (EHEA) since 1999 and is therefore signatory of the Prague Communiqué (2001) where the ministers of education from the signatory countries recognise *students as competent, active and constructive partners in the establishment and shaping of EHEA*. When making this statement, Malta committed to its implementation, and did not add a footnote that, in order to become partners, students would need to meet a certain GPA and be allowed to sit only on committees the institution finds useful.

Good Practice Identified

The company has developed very sound and comprehensive policies relating to recruitment for academic and managerial cadres.

Recommendations for improvement

MR6. The institution shall, before the beginning of the 2021/2022 academic year, carefully revise the structures and positions on the AUM organisation chart and ensure that the needs of the institution are met, in order to enable it to meet its strategic objectives successfully;

MR7. The institution shall, before the beginning of the 2021/2022 academic year, clarify the roles and responsibilities across the organisation chart, their reflection on the relevant formal documentation and their transparent communication across the institution;

MR8. The institution shall, before the beginning of the 2021/2022 academic year, ensure that all individuals at the AUM hold positions they have the right qualifications and experience for;

KR8. The institution should, by not later than 12 months of the publication of the present report, implement more consistent mechanisms to safeguard institutional continuity, in particular within its management positions;

KR9. The institution should, before the end of the 2021/2022 academic year, formalise its academic governance by defining clear Terms of Reference for all structures and ensure meeting minutes are held on every occasion;

MR9. The institution shall, before the end of the 2021/2022 academic year, increase student engagement and representation in all decisional, consultative, and executive bodies at the AUM, guided by the European principles of representativeness, openness, democracy, accountability, and independence. Specific mechanisms should be implemented to ensure that students receive both material (e.g. facilities, finances) and non-material (e.g. training, stimulative environment) support in order to allow their voice to impact all matters in the institution.

R5. It is recommended that Sadeen Education Investment Limited undertakes all the necessary managerial and financial steps to ensure its financial viability in the short term, so as to ensure its survival and continued operation in Malta, for the benefit of its current and future student populations.

Conclusion

Requires improvement to meet Standard

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 AUM currently delivers bachelor, master or short programmes in different fields, but is particularly focused on technology. According to the institutional strategic plan, the AUM considers that it is important to focus on one specific field and to create a core research team in the study field already developed by the university. In this way, the institution is trying to be part of Maltese ecosystem and workforce, as well as being aligned with government policies. The alignment with the MQF is included in all applications for programme approval by NCFHE.

Most of the AUM curricula are translated from two American Universities (Arkansas State University and Arizona State University), but there is little evidence of contextualisation and adaptation of the programmes to the Maltese needs and priorities. The curricula for some short programmes were proposed by individual members of the academic community, but did not involve a consultation stage with the various stakeholders, as confirmed by the SAR.

The Provost is formally responsible for reviewing any initial programme proposal to ensure that it is aligned with the mission and goals of the institution, and it is subsequently sent for approval by the Board of Trustees before the accreditation of NCFHE is requested. According to the AUM Policy for Quality Assurance 2020-2021, *the Curriculum Committee reviews the new proposals and makes recommendations to the Provost, who then approves the new programs or otherwise. Once the new program proposal is approved, this goes to the Accreditation/Planning Committee who makes sure that the content that is being developed is compliant with NCFHE standards. All new programs and courses are then submitted to NCFHE for accreditation.* Once functional, these new provisions would provide a broader consultation at the level of the academic community and stakeholders, however, this is not the case at the moment.

Each course has a credit value in American and European systems. A credit represents in-class instruction and out-of-class study per week during the 15-week semester. The credits for each course are specified in the Course Syllabus and at programme level. The credits are published in the University Catalog which is available on the university website. The Catalog also describes the policies regulating the expected student workload in terms of ECTS. The courses and the schedule of classes for each semester are determined and created so that they answer to areas of interest and needs for degree completion. Reports are generated to determine which classes should be offered so that students remain on track in terms of general education requirements. Each course is described in a Course Syllabus in terms of ECTS, subjects, teaching methods, assessments methods, issues regarding ethics, etc.

The assessments are designed to meet the training needs in relation to the proposed learning outcomes and students are satisfied with how the learning and teaching methods are aligned with assessment methods and learning outcomes proposed by the Course Syllabus. The panel learnt that academic staff are required to send student essays (a good one, a mediocre one and a poor one) to the provost, along with the proposed grading, as a quality assurance tool for the assessment process, and to check if the assessment methods are being successful in reflecting the achievement of the proposed learning objectives. Even if this is the only process that somehow resembles an internal grading moderation stage, the academic staff is not receiving any feedback. Therefore, the panel observes that this area needs further development.

The syllabus is approved as part of the programme's accreditation and, according to the meetings conducted by the panel; there is no space to change it at institutional level, without NCFHE approval, not even in a special situation as: COVID, new teacher for the course, updated bibliographic resources. However, the panel learnt that such modifications had been implemented internally at individual course level, even if not reflected on the syllabus, which would have required further approval processes with NCFHE. Furthermore, the panel learnt of the *Provision of Online Learning*, published by NCFHE in July 2020 as a response to the interest/need in online/blended learning,

proposing a set of rules to be respected, together with the requirements to be met, including the need of an updated Internal Quality Assurance to reflect the online/blended learning special requirements for teaching, learning and assessment. Therefore, the panel believes that the institution should look closer into its regulatory environment and take the opportunity of existing possibilities to keep their syllabus updated.

In terms of assessment procedures, the panel learnt during the audit that there had been some changes in line with the special requirements of online teaching, and students were prepared in advance accordingly.

The AUM's Strategy proposes to *highlight the research of their students in local, national and international competitions*; however, the panel found that none of the study programmes curriculum includes any discipline to support students in acquiring the required research competences, such as Research Methods or Academic writing.

Student admission information is published and available to students in advance, in addition to induction materials which familiarise students, not only with American University of Malta, but also life in Malta in general. The students find this information to be useful and complete. The students are also clear about what is expected of them in terms of rules generally, and what they need to do in order to progress in their studies. This is further detailed in Standard 5.

Hiring policies and processes for teaching staff are detailed and available in print, as well as online, through the *Faculty and Professional Staff Handbook*. While the clarity, fairness and transparency of teaching staff recruitment processes is not questioned, professional development of staff seems to be in serious need of improvement (updating pedagogy, expanding teaching skills). IT support to teaching is provided and this has been intensified during the recent months in connection to COVID-19 threats. This is further detailed in Standard 6.

The Quality Assurance Policy further detailed in Standard 1 defines the general principles for the design and approval of courses and programmes. The AUM has also set up the Curriculum Committee, which is responsible for the design of the new study programmes. However, the committee activity is still in its inception to allow for an assessment of its effectiveness by the panel.

According to *Committee members and charges 2020-2021* (document submitted to the panel as part of its supplementary documents requests), the Curriculum Committee is made of 4 academics and two students. However, in the minutes of the meetings requested by the panel, only one student was identified in the Committee. According to the Quality Manual, *annual program level review cycle, which is carried out for every program, is conducted by a Curriculum Committee that includes the Registrar, the Librarian, the QAM and Faculty*. No students are mentioned as part of the Committee. The institution has to

clarify the student membership in the committee and reflect it formally and consistently in its documentation.

The main responsibilities of the Committee are:

- Screening all proposals for course changes and reporting its recommendations to the Provost;
- Directing the content and structure of the sections of the University Catalog pertaining to curricular matters;
- Consulting with the Provost on curricular matters of concern;
- Participating in planning the development and improvement of the instructional programme of the institution, including review of new academic programs;
- Reviewing courses not taught on a regular basis;
- Evaluating programme review reports;
- Determining whether courses satisfy the general education requirements;
- Monitoring adherence to the approved curriculum, standards, and policies on an as needed basis; providing advice and assistance to faculty in the planning of the curriculum.

According to the minutes of the last two meetings of the Curriculum Committee, the committee is still in the initial stage of preparing the tools for carrying its proposed tasks: *Outline and discussion of the tasks of the Committee; Update on and discussion of the procedure for proposal/approval of programs/courses; Update on and discussion of the policy for program review, etc.*

Another AUM structure dedicated to the implementation of design and approval of programmes, as part of the quality assurance policy, is the Teaching and Learning Committee which, according to *Committee members and charges 2020-2021* (document submitted to the panel as part of its supplementary documents requests), has two students in its composition. However, in the minutes of the meetings requested by the panel, only one student was identified in the Committee. The responsibilities of the Committee are:

- Exercising quality control over Teaching & Learning initiatives;
- Analysing the relevance and academic standards of degree programs;
- Suggesting activities such as faculty seminars, discussion forums, etc.;
- Exploring innovative teaching and learning strategies and benchmark best practices;
- Advising faculty on the integration of effective learning strategies into existing courses.

Each of these structures has responsibilities in the processes relating to the design and monitoring of the study programmes, but the panel found that, at the time of the audit, the committees did not provide for an integrated and functional system. The accreditation process is not understood as a natural continuation of the internal processes regarding

the quality of study programmes, but it is instead the one that drives the internal processes, turning them into an attempt to comply with the Standards. The almost exclusively formal approach to external quality assurance processes is also demonstrated by the absence of students in the Accreditation/Planning Committee, as well as the motivation of the senior administration in this regard, which felt that it would not be beneficial for the students as it is not something they can learn and benefit from. Students have not been part of the programme development process at the AUM since the initial development of the programmes. The panel found no real student engagement in the activity of the Committees they are formally part of; students do not perceive themselves as co-creators of their educational journey, but rather see themselves merely as users of the process. This also leads to a minor responsibility of engagement with the programme design. The panel observed that there is no formal involvement of the labour market representatives in the process of design and approval of study programmes and it is unsure whether the added value of stakeholder's engagement is fully understood by the institution.

Good practice identified

1. The University Catalog, which presents the academic programmes, student services, general regulations, requirements and procedures and assures also transparency of the grading system, a tool easily accessed by students.
2. The Faculty and Professional Staff Handbook, a public document, which describes hiring policies and processes for teaching staff.

Recommendations for improvement

MR10. The institution shall, before the beginning of the 2021/2022 academic year, define a formalised process of yearly policy review to ensure their accuracy, relevance and continuity;

KR10. The institution should, before the end of the 2021/2022 academic year, implement the new provisions on design and approval of study programmes currently included in the Quality Assurance Policy;

KR11. The institution should, before the beginning of the 2021/2022 academic year, clarify the composition of the Committees involved in the design and approval of study programmes, and reflect it formally and consistently in its documentation;

MR11. The institution shall, before the end of the 2021/2022 academic year, evaluate all programmes' curricula and adapt them to students' needs;

KR12. The institution should, before the beginning of the 2021/2022 academic year, ensure that study programmes curricula include disciplines to support students in acquiring research competences, such as Research Methods or Academic writing.

MR12. The institution shall ensure, before the end of the 2021/2022 academic year, that all Course Syllabi comply with the teaching-learning evaluation processes;

KR13. The institution should, before the beginning of the 2021/2022 academic year, increase stakeholders' involvement in the design and approval of study programmes.

Conclusion

Requires improvement to meet Standard.

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

In terms of structuring the learning and teaching process, the American University of Malta benefits from a favourably high teacher to student ratio. Currently, 164 students are enrolled at the AUM, while 25 full-time members of faculty are employed. This results in a ratio of 1:6.56, which allows for close contact and interaction between students and teachers, fostering a student-centred environment. This potential is used to a satisfactory degree and consequently, students feel that they can always turn to their teachers for advice, guidance or help. Teachers are accessible and approachable, using a variety of methods of communication (in-person or online) for this purpose. This also includes communication with students outside of scheduled lectures or office hours.

The students also feel that the teachers are willing to adapt some elements of their teaching depending on students' interests and individual circumstances, such as their national background or level of familiarity and user experience with certain software tools, e.g. student projects based on the country that the student is coming from, or change in software used in courses based on the inability or difficulties experienced by some students. Although the dominant modes of delivery are on-site lectures/seminars/exercises with independent student work, there has been some variety in modes of delivery used, especially since the COVID-19 outbreak resulted in stronger emphasis on e-learning tools (e.g. Microsoft Teams, Big Blue Button). However, other aspects of flexibility in teaching and learning and study programme design are seriously lacking. No evidence was provided which would support a deeper level of individualisation of studies through supporting learners with certain difficulties or different interests. Essentially, the learning pathways are highly standardised and do not allow for significant deviation from the set, across the board programme. At course level, the only instances of flexibility are the aforementioned adaptations to certain individual experiences, while on a study programme level, the only instances of flexibility are elective courses and modules. The AUM does not register data about potential vulnerability factors of their student body (e.g. socioeconomic status, family background, learning difficulties, previous education etc.) which would provide for an early-warning system that would allow the institution to recognise barriers which certain groups of students might face, and then react accordingly.

The panel found no evidence of the AUM having reliable (or indeed, any) policies and possibilities of recognising informal and non-formal learning of students which would facilitate:

1. a more diverse and flexible admission and
2. the integration of learning outcomes achieved through informal or non-formal learning with the formal study programmes.

The awareness of any such options which students might use is rather reduced amongst the interviewees the panel has met. International mobility, which would be another way which the students could use to replace certain courses at the AUM with courses or activities completed outside of the AUM system, is possible in theory but is clearly not used in practice. This is especially problematic in the light of demands placed on the graduates to understand and thrive in an international context.

Partly as a consequence of the lack of essential tools for flexibilising and individualising their studies, students also do not seem to perceive themselves as co-creators of the learning process and experience, but rather as consumers or users of the educational offer. This also leads to a low sense of learner autonomy and responsibility for their own learning. Teachers perceive student-centredness primarily in terms of providing independent tasks and practical assignments, which is positive for students' independence, but it is unclear how much trust they actually place in students as partners with whom they could design the learning process in a manner of partnership. The main impact of students on the learning and teaching process and study programme design comes from informal communication with the teachers (e.g. providing immediate feedback, making small-scale proposals) and student surveys, which are carried out at the end of each course. While the method of informal discussions with the teachers seems to be working well and is in general highly beneficial (especially for an institution of the AUM's size), it needs to be complemented with more structured mechanisms, especially in order to produce deeper, more structural changes in the learning and teaching process. It is unclear to what degree the student surveys fulfil this role since the panel found, during the audit, little to no evidence of changes implemented based on the student survey results. Methodologically, the surveys are conducted in a responsible manner; with the quality manager working dedicatedly to ensure that even with small class sizes student anonymity is ensured. However, the panel did not find the same dedication to ensuring the usage of data in closing the quality feedback loop, when taking into account the lack of institutional impact of these surveys. In addition, student surveys are only conducted at the end of the course, while surveys at the end of the study programme or several years after graduation are planned, but have not yet been implemented, as it is still too early in the students' cycle to apply or assess these tools. Such surveys should, in the future, provide feedback about the study programme as a whole as opposed to only particular courses, and in this way should serve as information about the extent to which intended programme learning outcomes are being achieved.

When it comes to students' impact in broader governance and decision-making within the AUM, the panel found no substantial evidence of students' impact on academic processes and institutional change, at least on most matters. Even when there are efforts to include the students' voice in decision-making, it seems to be more in a consultative manner; students serve as feedback providers or idea testing groups, but rarely as true and equal partners. This is further detailed under Standard 2.

Both problems with the lack of students' impact (on the teaching and learning and on institutional governance and decision-making) are exacerbated by the lack of effective student government body/organisation. Student representatives in committees do not perceive that they have a significant impact (at least on the majority of issues), and also do not seem to be informed about the most important processes of the AUM. According to the meetings conducted by the panel, their initiatives are limited to student support services, extracurricular and leisure activities.

Students are fairly satisfied with how the learning and teaching methods are aligned with assessment methods and intended learning outcomes, and how feedback is provided to them about assessment results. Course syllabi contain all the relevant information about the learning process and assessment methods, and the students are therefore confident that they are familiar with what is expected of them from the very start. Feedback is given to students in a timely manner, and it includes communication on what the student needs to improve and what the standard that needs to be reached is, but not on how an individual student can actually improve and reach this standard – this is something that is instead developed in individual consultations of the teacher with the student. The students also have a complaint period at their disposal after receiving their grade. As regulated by the AUM Academic Policies, students can make an appeal if they believe that there was a technical error in their assessment or if they believe “that a grade was assigned arbitrarily or capriciously”. However, the panel learnt that students have no visibility of the formal appeals policy, and they try to resolve any such situation directly with the teacher. The panel has not identified any established system, such as internal and external moderation, for ensuring objectivity, consistency and fairness of both the assessment tasks (assignments) or the grading process itself. Furthermore, since professional development mechanisms for teachers are underdeveloped, as further detailed under Standard 6, there is also little opportunity to develop pedagogical and assessment methods which would contribute to these goals.

The course review reports, produced by course leaders at the end of each course and delivered to the provost, contain information on the alignment of learning and teaching methods, assessment methods and intended learning outcomes, as well as an evaluation of course effectiveness. This is a very useful practice which could be even more impactful if integrated with a professional development approach in order to improve teachers' competences needed to properly carry out self-assessment and continuously improve the course content and methods which course review reports deal with.

As per the AUM Student Attendance Policy (Student Handbook), class attendance is mandatory for the students and can significantly impact their grade and possibility of passing the course.

Good practice identified

1. Teachers are in constant close contact with students and are very approachable;
2. Course review reports are a useful tool for achieving alignment between intended learning outcomes, teaching and learning, and assessment methods.

Recommendations for improvement

KR14. The institution should, within 12 months of the publication of the present report, recognise and enable the students to assume a partnership and co-creator role in designing different institutional aspects, especially teaching and learning policies and processes;

MR13. The institution shall, before the end of the 2021/2022 academic year, develop learner autonomy through a higher level of flexibilization and individualisation of studies allowing for, for example, a wider variety of learning and assessment methods, or opportunities to integrate study mobility and competences acquired outside of formal education in the curricula;

MR14. The institution shall, before the end of the 2021/2022 academic year, encourage and enable students to make use of mobility opportunities through: 1) facilitating seamless recognition of credits from abroad, 2) informing the students about financing opportunities (e.g. Erasmus+ mobility) and 3) demonstrating to students how international mobility is useful for them;

R5. The institution could establish simple and reliable procedures for recognition of informal and non-formal learning which would be used for alternative admissions track (contextualised admissions), and as an option to replace a certain number of the students' study programme ECTS points (recognition of prior learning);

MR15. The institution shall, before the end of the 2021/2022 academic year, create and implement consistent systems for the quality assurance of its assessment process (usually in the form of internal and external moderation);

MR16. The institution shall, before the end of the 2021/2022 academic year, establish different types of training for teachers which would help them develop their competences in managing and innovating the teaching and learning process, assessing student competences and integrating generic competences in the curricula;

MR17. The institution shall, before the beginning of the 2021/2022 academic year, ensure that students are aware, and that there is a clear visibility, of the formal appeals procedure; students should be encouraged to pursue this option without fear of repercussion;

MR18. The institution shall, before the end of the 2021/2022 academic year, strengthen its reaction mechanisms of the course-level survey by increasing the transparency of

results and providing students with information of what was changed based on previous survey results;

R6. The institution could strengthen course review reports by integrating them with a professional development approach which would serve to improve teachers' competences needed to properly carry out self-assessment, and to continuously improve course content and methods which course review reports deal with;

R7. The institution could collect data about potential vulnerability factors of the student body in a way that this data could be correlated with academic success and progression of students. This could then be used to research specific vulnerabilities and for early detection of potential barriers experienced by individual students.

Conclusion

Requires improvement to meet Standard.

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

Student admission information is published on the AUM websites for each study programme and is, in this way, easily accessible for prospective students. The admissions portal also contains all other relevant information such as: required previous qualifications, language requirements, tuition fees, career opportunities etc.

For enrolled students, the AUM prepares an information package with induction materials which familiarise students not only with the AUM, but also life in Malta in general. The Students' Guide is a recent document used to facilitate arrival in Malta and the beginning of studies, while the Student Handbook is a more comprehensive document containing relevant information about students' rights and responsibilities, support services, facilities, practicalities etc. Overall, the students perceive this information to be useful and complete, and are therefore well-informed about studying at the AUM already before starting with their studies.

Students' progression through the study programme is recorded, tracked and analysed, although data analysis seems to be implemented at a rudimentary level. In cases in which there is a delay in study progression, low GPA of a student or any other issue with the progression, both the student and their academic advisor will be notified. The student and the advisor will then discuss and cooperate to find a way to improve the learning results of the student and help the student progress successfully.

Students are generally well-informed about the demands and requirements placed upon them, and what they need to do in order to progress in their studies. Both the study programme structure and course syllabi are sufficiently transparent and available to students, thus allowing them to prepare for their study obligations.

The AUM collects the following students' data:

Official Data: Name, Surname, Date of Birth, Nationality, Gender,

Personal Data: Address in Malta, Phone Number, Email

Documents (Admission): Proof of English Proficiency, Copy of High School/undergrad transcript, Copy of Passport

Academic Data: Grade, Attendance, Warnings, Academic Forms

This student data is stored in an online data management software, which is interoperable with various IT solutions used by the AUM. This set of data is used by the registrar in order to have an overview of the different student paths and those who may be potentially falling behind in their studies. The students can access and/or receive a document containing their student data, by requesting such a document through an online system. Upon course completion, grades are recorded in the system and are clearly visible to the students, together with information about grading, learning outcomes and course content. Students also receive a certificate of completion, which meets all the NCFHE criteria and references MQF level, amount of learning credit (ECTS points), content and status of the qualification gained. Students have their transcript of records released by the institution for a small fee.

The panel could find no evidence of procedure for recognition of prior (informal and non-formal) learning at the AUM. The interviewees the panel met are not aware of the existence of such procedures. This weakens not only student admission and progression, but also the level of flexibility of studies and potential for personalisation for the students. In recognising prior formal learning, i.e. enrolling students who have already studied at another higher education institution, the panel noted a problematic practice of using the grade of previously completed courses. If a student has passed a certain course at another institution which the AUM has trust in, then this should be a guarantee of acquiring the intended learning outcomes, which is sufficient ground for recognition, regardless of the grade.

Good practice identified

N/A

Recommendations for improvement

R8. The institution could carry out more in-depth analysis of student enrolment, progression and successful completion factors (e.g. previous education, socio-

demographic elements or any other characteristic which might have an impact), in order to support the AUM in developing evidence-based policies for the entire student life cycle; **KR15.** The institution should, before the end of the 2021/2022 academic year, develop a policy which allows for efficient and streamlined recognition of informal and non-formal learning, both in admissions and in complementing the formal educational programme.

Conclusion

Meets Standard.

Standard 6: Teaching Staff

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

Main findings

In general, the staff seem to be qualified sufficiently for the work to be done.

The monitoring of the delivery of teaching and learning to ensure the standards required are met is mainly conducted in two ways:

- through a performance review process conducted with each member of teaching staff - at the end of their probationary period, and subsequently on an annual basis; the portfolio of each teaching staff member is evaluated by the provost; however, this has been impacted by the lack of continuity in the role of the provost;
- through student feedback directed towards the teaching staff and their superiors. However, students do not seem to be informed of what happens with the feedback they provided and have little evidence of their suggestions leading to improvement, as further detailed in Standard 4.

Some other elements of support in the teaching and learning, such as entry-level lectures, were also identified. Peer observations are not yet implemented, even if formally regulated in the Quality Assurance Manual.

Clarity, fairness and transparency of the recruitment processes is looked after at the AUM. *The Faculty Employee Handbook* clearly defines expectations, rights, and duties of the staff. It also describes probationary period (usually 6 months) and establishes supervisors to each staff member under probationary period, including reporting about this period. The relationship between supervisor and the staff under probationary period, together with the processes within this supervision framework are not further defined.

The AUM provides clear and solid conditions of employment. The *Faculty Employee Handbook* clearly describes a number of employment policies that relate to main aspects of the employment, including qualifications, contract reviews, dress and appearance, personnel file and privacy, data protection, employee privacy, misconduct and discipline,

employees with disabilities, non-discrimination, position design, teaching opportunities for postgraduate students, remuneration and benefits, leave, resignation, and more. The *Harassment, Bullying and Anti-discrimination Policy* also contains information that supports provision of appropriate conditions of employment.

The professional development of the teaching staff does not seem to be strongly emphasised at the AUM, especially when taking into account that it lacks a clear framework and policies. The institution is planning to establish *The Centre for Teaching and Learning*, though this does not seem to be effectively working in the monitoring, evaluation, and support of teaching and learning-related processes at the AUM. The training of the teaching staff in the supervisory role is not provided. Overall, this deficit situation can have a negative impact on the development and innovation of teaching methods as well as research performance, links between teaching and research, and consequently on the enhancement of the student learning experience.

The AUM's promotion of staff research and scholarly activity to inform teaching is scarce. The organogram of the AUM places *The Research Support Centre* as an important unit to support research development of the staff, but as it appeared during the audit, this Centre is not strongly linked to professional development of the staff who are tasked with supporting the research skills so far. In general, there does not seem to be a systematic support of research activities of the staff at the AUM. Internal financial support is mainly focused on conference appearances, while systematic support of research development activities is not visible. This is confirmed by the list of existing research projects/grants, and by the list of research publications of AUM staff. This also raises a question about how realistic the possibilities to interlink teaching and research effectively are. Some support for students' research in the form of small projects and student conferences is provided. These deficits in staff development and the lack of attention to the research profile of the staff raise a question about the requirement that every academic staff member should split their energy in a threefold-direction (40% teaching, 40% research, and 20% community reach), as it is described in the AUM documents.

The institution is seeking part-time and sessional teaching staff, and it appears to provide them with solid arrangements.

Good practice identified

N/A

Recommendations for improvement

MR19. The institution shall, before the end of the 2021/2022 academic year, provide and facilitate more support activities dedicated to teaching staff in order to expand teaching skills and keep up to date with new pedagogies;

MR20. The institution shall, before the end of the 2021/2022 academic year, develop and implement effective policy and practice for staff development;

MR21. The institution shall, before the end of the 2021/2022 academic year, develop and regularly implement peer observations and other forms of teaching staff performance evaluation;

MR22. The institution shall, before the end of the 2021/2022 academic year, ensure that the teaching staff is sufficiently trained to supervise diploma theses;

MR23. The institution shall, before the end of the 2021/2022 academic year, support effective research skills development of staff and create realistic conditions for their research activity to be realised;

MR24. The institution shall, before the end of the 2021/2022 academic year, encourage and support research activities of the staff;

MR25. The institution shall, before the end of the 2021/2022 academic year, support the development of links between teaching and research;

MR26. The institution shall, before the end of the 2021/2022 academic year, clearly define the relationship scheme between supervisor and the staff under probationary period, as well as the processes included within this supervision.

Conclusion

Requires improvement to meet Standard.

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

The AUM library offers a relatively broad variety of resources, both printed and electronic, although the textbooks relevant for individual study subjects are not available in print in sufficient numbers. However, the AUM's collection of books and other study materials has been growing recently. The library's opening hours seem to be slightly limited and do not accommodate the course timings of all students, which can have an impact on availability of some of its services. The library staff are involved in informing students about the way they can access resources, including databases, but also about plagiarism and some other related issues.

Taking into consideration the audit limitations brought about by the global pandemic, the panel was unable to assess the institutional infrastructure and facilities in person. Therefore, all impressions in this regard were formed based on video material submitted by the institution, as well as answers to the questions asked during the meetings conducted by the panel. The learning infrastructure in terms of both buildings and

facilities seem to be on a good level. IT support to teaching (and partly to learning) is provided and this has been intensified in the recent months in connection with the impact of COVID-19.

Orientation activities are mandatory for new students. Academic advisory services are provided either by teachers of each discipline (undergraduate students), or by the teaching staff member assigned to a certain group of students. Tutoring is also available for those with poor academic results. Student counselling seems to be taking place ad hoc with the help of a telephone support line mediating contacts with specialists, if needed. The institution does not provide its own services in this respect. It seems that student counselling is being managed by the student affairs manager without an appropriate and up-to-date qualification for this, often delicate, task.

Career counselling service is declared in the documents of the AUM and its website. The interviews indicate it has been activated to some extent in recent times. Especially recently, students seem to be offered some assistance with particular processes such as the development of CVs, job interviews, and more. Placements and employment opportunities for the students are scarce.

The Scholarship Policy made available to the panel provides more concrete information about the academic year 2020/2021 and brings summative information about total sums of finance available for Non-EU, EU and Maltese students (these sums differ slightly: 14,500 EUR : 16,500 EUR : 17,500 EUR). According to the policy, the institution currently offers several scholarships in the form of fee waivers, as follows:

1. For prospective students:
 - a. academic excellence scholarship;
 - b. sportive excellence scholarship.

2. For current students:
 - a. academic excellence scholarship;
 - b. financial aid scholarship.
 - c. social-excellence scholarship.

The information included in the policy is very poor and unclear: the criteria for different types of scholarships are mixed so it is confusing what conditions students should meet so that to be eligible for each type of scholarship. The panel can observe, however, that the criteria for academic excellence and financial aid is common; we would therefore like to remind the institution that two categories of scholarships have different purposes: the first – academic scholarships – have the objective to support and encourage excellence and performance and therefore should be offered after taking into account academic results. The second type – social scholarships – have the role to facilitate the access to, progress in and completion of higher education studies and should therefore be offered

to students that need them when taking the socio-economic background point of view, without taking into account their academic performance. Consequently, the scholarship policy should ensure that the criteria for these 2 types of fee waivers are kept separately. The policy should also describe all the administrative steps students have to go through in order to benefit from a scholarship. This would ensure a transparent and objective process (the exact criteria for each of the categories mentioned above, as well as other technical aspects, such as deadlines for application, necessary documentation, possibility to cumulate the typologies of scholarships, etc.). The panel was not able to identify sufficient information about the scholarships on offer in the Student Handbook either.

The decision-making body (Scholarship Committee) consists of the CEO and Director of Finance and Administration, and no students.

Student social life mainly relates to several student clubs and to some other activities across the AUM and beyond, but also within these clubs. Except for one (Business Club), all the student clubs are related to leisure time activities. They do not serve as an explicit study programs-driven extension to students' professional interests. The AUM provides some support to student social activities.

Opportunities of mobility of students abroad are theoretically available, but they are rarely used despite the fact that the AUM has several exchange contracts with foreign higher educational institutions. Internship schemes are rather scarce.

Basic arrangements for students with some types of special educational needs (such as a platform for wheelchairs), are available but not used since there are currently no such students at the AUM.

Administrative and other support staff seem to be having often a relatively rich experience in different sectors of economy/segments of higher education sectors elsewhere, sometimes with more, at other times with less, relevance to the higher education position they have now (this includes some people at top management positions, too). A total number of this staff has been growing in recent years, also in comparison with a total number of teaching staff. Opportunities of their continuous professional development are available with limitations, which contrasts to the rather heterogeneous professional background of the administrative and other support staff, as indicated above.

Good practice identified

N/A

Recommendations for improvement

MR27. The institution shall, before the end of the 2021/2022 academic year, ensure the sufficiency of its library offerings both in terms of diversity i.e. covering the main reading lists of the programmes, but also in terms of the number of copies available;

R9. The institution could adapt its library working hours to accommodate the course timings of all students;

MR28. The institution shall, before the beginning of the 2021/2022 academic year, cater for personal and psychological counselling by qualified staff, in other to suitably attend to a more diverse range of non-academic student needs;

MR29. The institution shall, before the beginning of the 2021/2022 academic year, further enhance its career development support in terms of availability and number of placements and employment opportunities; also, career counselling should be more systematically and actively provided;

MR30. The institution shall, before the beginning of the 2021/2022 academic year, clarify and increase the transparency and visibility of its scholarships programmes, while also making them available in the student handbook and on the institutional website; it should also ensure student representation in the Scholarship Committee;

MR31. The institution shall, before the end of the 2021/2022 academic year, ensure that opportunities of outgoing student mobility become an integral part of studies at the AUM;

MR32. The institution shall, before the beginning of the 2021/2022 academic year, make available opportunities for the professional development of the administration and other support staff.

Conclusion

Requires improvement to meet Standard.

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

The university has several information systems in place to collect relevant information within the different departments of the institution. These are being managed and supported primarily by two people, the Head of IT and IT assistant.

The panel concluded that the subject of Information Management is important to all departments within the university. The top management and the IT department are working together to find better solutions in which all the departments within the institution could integrate the university's internal business processes such as Finance, Human Resources, IT, Marketing etc., in order to work together to improve efficiency, visibility and quality. This collaboration and synergy ensures that the university wants to

have all the necessary data at hand so that they could then use it to manage the day-to-day operations efficiently so as to support students during their life at the university.

Student information is being kept on the SONIS student data system whilst academic data is being stored and displayed through a Moodle tailor-made instance. Data is being stored with a relational database management system and thus, can be easily managed, backed up and restored. A backup system is in place and daily onsite backups are being made to make sure that no data is lost; however, there is no offsite backup system. This concerns the panel as it could potentially expose the institution to the risk of loss of data. On the other hand, the panel could not find any evidence of how such stored data is being used by the management to analyse and use it effectively for strategic purposes or any future programs or activities being held.

The panel has observed that, in the documentation provided, there was a link to a platform (<http://learning.aum.edu.mt/studsect.cfm>); the use of this platform, however, was not mentioned during the audit. Furthermore, it has also been observed that the website was not secure. During the audit, the panel has been notified that such a system is not in service anymore and not being used by the university.

In order to protect the confidentiality of information and the integrity of systems, the IT department also enforced a password reset policy so that passwords would have to be reset every three months. There is no DRP (disaster recovery plan) in place. An extensive DRP is being drafted in order to make sure that AUM activities resume rapidly following a downtime.

There is no system access control policy in place, but systems have levels of access control and thus, only groups of authorised users can make amendments to the system. This also ensures that student records and information such as PII (Personally identifiable information) is only accessible only to the people who need it. Furthermore, based on the evidence provided, systems enable administrators to generate audit log reports to know who and what has been created, modified or deleted from the systems if need be.

It has also been noticed that, due to the COVID pandemic, the university had to adapt to new challenges. To ensure that a collaborative environment within the university continues, Microsoft 365 accounts have been created to be used by staff and students. This technological change enabled the university students to take part and collaborate through online sessions with tutors through Microsoft Teams. The university was also able to record and upload such sessions for students to access them at a later stage. Attendance was also being recorded through such collaboration software. Training of how to use the software was also provided over several sessions.

The AUM makes sure that it abides to the General Data Protection Regulation (GDPR); the prospective student can access some policies. Moreover, during the registration phase, the

student is informed and has to agree on the terms and conditions of the processing of personal data prior proceeding to the application.

It was noticed that the IT department is allocated a good substantial amount of funds to be able to sustain and implement new solutions within the AUM.

Good Practice identified

1. The IT systems follow a set of IT security policies such as session timeout or password reset every three months, which are commendable.
2. The AUM has an advanced onsite backup solution running to back up system data.

Recommendations for improvement

MR33. The institution shall, before the beginning of the 2021/2022 academic year, make sure that any systems which are not being used anymore, are decommissioned so as to reduce risks, such as security breaches.

R10. The institution could invest in an offsite backup solution so as to protect crucial data from natural disasters, human error or security breaches.

R11. The institution could draft a Data Retention Policy in order to have formal documentation of how such retention is being controlled.

Conclusion

Requires improvement to meet Standard.

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

The AUM makes use of its website to publish all the information about the programmes and its activities. The website clearly shows an array of information for visitors accessing it. Every programme includes the selection criteria, learning outcomes and MQF level, ECTS, teaching and assessment procedures, pass rates and further learning opportunities available. Moreover, when visitors navigate under the programmes menu, they can clearly identify the types of programmes the AUM is offering.

The way information on the website is displayed makes it easy for visitors to see and retrieve information. Furthermore, it was noticed that the website changes appearance, depending on the screen size and orientation of the device being used to visit the website.

The AUM has a high online presence, as can be seen from their website, Facebook, Twitter, Instagram, YouTube and LinkedIn pages. These pages are all updated on a regular basis. Moreover, the information on all sites is consistent. The AUM also displays credits in US credits, which makes it easier for foreign students to compare it with their learning credits.

The website makes it easy for an applicant to apply for a programme/course. Beforehand it displays what the applicant will have to do/fill in to be able to submit the application. Furthermore, the AUM offers the applicant the option to receive the AUM's newsletter. The panel observed that the university publishes a wide range of policies such as GDPR, privacy, cookies, IT, student data protection policies and more. However, the visitor cannot see how the AUM processes the visitor's personal data before agreeing. This is because the "Privacy Preference Center" functionality being used in the website is not showing any information or does not redirect the visitor to the same policies published on the website.

During the audit, the panel observed that information such as the level of qualifications, which is published onto the website for visitors, first is being sent by email to the QA department for approval. This process ensures that the published information is correct and in line with the Malta Qualifications Framework and the European Framework.

In order to make sure that published information is compliant with the MQF and EQF, all the information published has to be approved internally by the QA Manager first.

Good practice identified

1. Before online content is published on website, it has to be approved by QA responsible person, therefore adding an extra layer of accuracy and consistency;
2. The AUM institutional website is intuitive and responsive;
3. The AUM has a high Social Media presence and its pages are updated regularly and consistently.

Recommendations for improvement

MR35. The institution shall, within a month of the receipt of this report, ensure that the website landing page Privacy Policy/Consent Management is properly configured;

MR36. The institution shall, within a month of the receipt of this report, include the NCFHE logo and pass marks in courses which are accredited by the NCFHE.

Conclusion

Meets Standard.

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

According to the Quality Assurance Policy 2020-2021, *an annual program level review cycle is carried out beginning in September and ending in May of each year.* The QA Policy states also that the review cycle aims to *examine the evaluation of programmatic student learning outcomes to include such activities as class observation, faculty annual report, and senior exit survey.* The proposed annual programme level review cycle has not yet been put into practice. The programmes' monitoring is almost exclusively linked to the external quality assurance procedures.

Some processes, mechanisms, instruments, reporting, data collection and timeframes for the assessment and quality improvement process of study programmes are described in the AUM's Quality Assurance Manual 2020-2021. However, with the exception of the course evaluations, none of the instruments are yet being successfully implemented at the AUM. The course review summary reports are produced by course leaders at the end of each course and delivered to the Provost. The reports take into account the content, the course learning outcomes, the engagement, the assignments, the communication and the students' performance. The panel learnt of the *Evaluation of Course and Instructor* done by the students through anonymous evaluation questionnaires at the end of each semester but noticed little evidence of improvements following the observations made. The panel noted that some of the proposed tools were not used because there are no graduates yet.

The activity of those directly involved in monitoring the programmes (Provost and Quality Assurance Manager) is supported by various Committees:

- Curriculum Committee
- Teaching and Learning Committee
- Accreditation/Planning Committee
- Academic Standards Committee

The composition and tasks of each of the Committees were previously mentioned in other sections of this report. As already detailed in Standard 3, even if students are members in some committees, they do not perceive themselves as co-creators of their educational journey but rather see themselves merely as users of the process. This also leads to a minor responsibility of engagement with the on-going monitoring and periodic review of study programmes. At this time, there is no formal involvement of the labour market

representatives in the process of on-going monitoring and periodic review of programmes.

The ongoing monitoring and periodic review of programmes represents one of the most important processes in a functional quality assurance system. The process must be carried out in accordance with the expectations of all those involved, as well as with the expectations of the labour market. Monitoring programs does not mean demonstrating compliance with some external evaluation standards, but it is a process of internal ownership and commitment for constant quality improvement.

Good practice identified

N/A

Recommendations for improvement

MR37. The institution shall, before the end of the 2021/2022 academic year, implement clear systems and processes to monitor and periodically review their programmes in order to ensure that these achieve the objectives set out; to review the content of the programme in the light of latest research/practice in the sector, in order to ensure that the programme is up to date, and to respond to the changing needs of students and society;

MR38. The institution shall, before the end of the 2021/2022 academic year, put in practice the policies for the on-going monitoring and periodic review of programmes and actually implement the proposed annual programme level review;

MR39. The institution shall, before the end of the 2021/2022 academic year, involve stakeholders in the on-going monitoring and periodic review of its programmes, in terms of engagement in different organisational structures charged with curriculum development, as well as engagement in feedback collection exercises that are producing data to inform improvement.

Conclusion

Does not meet Standard.

Standard 11: Cyclical External Quality Assurance

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

Main findings

The audit at the American University of Malta was conducted by the panel nominated by NCFHE and agreed by the institution. The audit took place between the 13th and 15th

October 2020 in an online setting (via Microsoft teams), based on an agenda drafted and agreed jointly by the institution, the audit panel and NCFHE.

During the audit, the panel confirmed the information provided by the institution in the self-assessment documentation and explored, during meetings, the perceptions of the internal and external stakeholders; based on these main aspects, the panel assessed the compliance of the institution with NQAF standards.

The audit faced a few challenges, some of which have made the mission of the panel more difficult.

Firstly, the SAR was of very poor quality and it failed to provide sufficient explanatory/descriptive information in order to support the panel in assessing the institutional compliance of the AUM with the NCFHE External Quality Assurance Provider Audit Manual of Procedures. Instead of following the guidance provided in Annex 1 of the Manual, the institution structured its SAR in the form of a series of responses to the Clemson Report of 2019; this has led to the panel requesting a considerable amount of supplementary documents and having to compensate with a higher number of questions during the audit.

Secondly, the institution lacked a self-critical capacity, as evidenced both in the submitted documentation, as well as in the meetings conducted during the audit exercise. This, not only made it difficult for the panel to distinguish between objective information, facts unsupported by evidence and unsubstantiated judgements, but also made the panel wonder if the institution is generally self-aware of its current and upcoming challenges and has the ability to identify its risks and be transparent about them (at least to itself), in order to address them accordingly. Generally, it is considered a significant shortcoming when an external quality assurance process identifies weaknesses that the institution has not already identified by itself and thus acknowledged them in the self-assessment documentation or during the audit meetings. In particular, the panel has not been made available any of the following, as per the NCFHE Manual, to a satisfactory extent:

1. an account of what the provider is currently doing to meet the expectations, in terms of the existing systems and procedures for internal quality assurance;
2. an assessment of how effective these practices and procedures are in ensuring that the provider is fully compliant with the Standard;
3. an outline of proposals for further developments to address any perceived gaps in procedures and to enhance the quality and standards of academic provision and the student experience.

The panel wishes to thank the facilitator for all the preparations associated with the audit agenda: facilitating the presence of different stakeholders particularly in a more challenging context than initially anticipated, as well as diligently supporting the panel access to the supplementary documentation.

Recommendations for improvement

N/A

Conclusion

Meets Standard.

Response by the Provider

Preamble

Quality assurance for the AUM is understood as including all activities related to defining, assuring and enhancing the quality of the university from strategic planning to staff and curriculum development. The university is aimed at continuing the development and enhancement of QA processes and develop quality culture, but we understand that a considerable time will be spent by the University community in order to understand them and their implications. Therefore, QA processes will help us to create platforms for horizontal and vertical communication at various levels, between departments, committees and other bodies. This kind of effective dialogue will contribute to the development of quality culture.

While developing and enhancing QA, the university takes into account disciplinary characteristics, organisational culture, historical position of the institution as well as the national context.

The AUM is committed to developmental approach in our quality assurance processes. The concept of building QA includes a system-based approach leading to dynamic improvement of the university processes. Strategic planning, educational development and staff development are considered as part of QA processes.

Internal, External evaluation and Quality Guidelines

Internal and External evaluation practices can encourage the university to analyse the way the university should enhance and improve its QA systems and processes in order to achieve effective progress in its development. Internal evaluation is able to define failures and define the process through which the university reacts and rectifies the situation when a failure has taken place, rather than prohibit risk taking altogether. External quality assurance should aim at checking if the university is capable of reacting to abnormal circumstances rather than sanctioning occasional failures.

The AUM is expanding QA guidelines and reviewing procedures we should have in place to address deficiencies, developing measures we can make to show that standards and requirements are achieved, improving setting up a coherent Internal QA system. An internal QA system will help us to integrate strategic planning with operational management, to evaluate the effectiveness of strategic planning and operational management processes, to have procedures agreed and then operated successfully. It will also help to have the staff engaged in quality assurance, establish effectiveness of QA review and how the QA system be measured. Internal evaluation procedures are described in the Academic Quality Handbook. This Handbook is a separate guide for QA. The Academic Quality Handbook, alongside the AUM Organisational Regulations and AUM

Academic Regulations, serves as a key constituent of the University's quality assurance framework, defining and providing detailed operational guidance on the academic quality assurance procedures. The three main components include: Course/Programme Validation – a process whereby all new courses/programmes are subject to formal consideration and approval prior to implementation; Annual Appraisal – a process whereby the delivery of all courses/programmes and output standards achieved are monitored; Internal Review – a process conducted on an annual and 5-yearly basis which consists of two major elements i.e., the critical review of the course and its development and the formal re-approval of the associated course portfolio. Other sections of the Academic Quality Handbook refer to: Academic Collaboration, External Examiners, Placements and Research Degrees. The Academic Quality Handbook is subject to regular review.

QA Management and involvement of all players

The AUM, in the process of the annual review of its Policies (including principles, values and standards), sets periodic improvement of QA systems. These systems include processes, procedures and management of quality. All institutional Policies will be divided and collected into AUM Academic Regulations and AUM Organisational Regulations. QA management will be structured on all levels of the university. This will help us to provide involvement of all players (teaching staff, administrative staff, students, social partners, professional bodies, external experts) so that their commitment can be reached and the principle of subsidiary can be implemented. It is the way where top-down meets bottom-up.

Publication of evaluation reports

The University collects, analyses and uses relevant information for the effective management of our programmes of studies and other activities. Our publications include: Strategic Plan 2021-2025, Annual Reports, Accredited programs, Quality Reviews, etc.

Student involvement

In order to identify a clear procedure of demonstration of students' involvement, the University has developed a mechanism which allows them to express their views. The representatives of students will be followed up in the composition of all University Committees and Councils. We will also include students in the accreditation process. The surveying of students at the end of a programme or module, the exit student survey, is also practised. Here we need to work on introduction of such surveys with faculty.

Response to Key recommendations and Recommendations made by the Peer Review Panel

Action plan Audit Report MFHEA 2021/2022		
Recommendations	Actions to be taken to address the recommendations	Date for completion
Standard 1: Policy for Quality Assurance		
KR1. The institution should clarify, before the beginning of the 2021/2022 academic year, the role of the students in quality assurance beyond being solely a source of information in surveys, and the responsibilities of the Accreditation/ Planning Committee in the Quality Assurance Policy.	<ol style="list-style-type: none"> 1. Each Academic committee and Councils will include minimum 1 student as an active member. 2. Student Union recommends students' representative to the academic committees and Councils and will get feedback and discussions at their meetings on the contribution of the involvement that students make in the change of programmes, in establishing QA, initiating something for academic or research enhancement, in student affairs 3. AUM University Council and Academic Council analyse and approve the composition and responsibilities of Committees 	August 14 th 2021
R1. The institution could revisit the Quality Assurance Manual and ensure greater harmonisation and consistency with the Quality Assurance Policy, in both scope and content.	<ol style="list-style-type: none"> 1. Development of <i>AUM Academic Quality Handbook (operational guidance to quality)</i> approved by the Academic Council 2. Development of <i>AUM Academic Regulations</i> (collection of Policies, including QA Policy) 3. Development of <i>Programme Handbook, Course Handbook and update of Student Handbook</i> (responding to QA operational guidance) 4. Development of <i>AUM Organisational Regulations</i> (collection of Policies related to Faculty and Administrative staff, including QA policy related to Organisational standards) 	August 14 th 2021

<p>KR2. The institution should ensure, before the beginning of the 2021/2022 academic year, that the Quality Assurance Manual is fit for purpose with regards to the tools it proposes; the institution should be now able to clarify what should be kept in the Manual and implemented and what can be removed.</p>	<ol style="list-style-type: none"> 1. Implementation of updated QA procedures (including Internal, External, Annual Reviews, Program Development, etc.) and documentation (in accordance with <i>Academic Quality Handbook</i>) 	<p>August 14th 2021</p>
<p>KR3. The institution should clarify, before the beginning of the 2021/2022 academic year, the roles and responsibilities with regards to quality assurance, including ensuring institutional alignment with the reporting lines.</p>	<ol style="list-style-type: none"> 1. QA operation guidelines will be implemented (as described in <i>Academic Quality Handbook</i>) 2. QA monitoring will be done by QA Department on a regular basis (through participation in meetings, individual visits to structural units and University bodies) 3. Academic and Institutional structural units will develop annual development plans and report annually to the University bodies 4. Analysis of activities of all bodies will follow up with improvement actions (will be monitored and reviewed by QA officer) 5. Consultations on QA, reports on QA outcomes will be presented on a regular basis (in accordance with QA and Enhancement Plan) 	<p>August 14th 2021</p>
<p>KR4. The institution should revisit, by not later than 12 months of the publication of the present report, the institutional approach to quality assurance so that it is driven by an internal commitment for quality management and enhancement, rather than external processes.</p>	<ol style="list-style-type: none"> 1. Development of <i>Institutional Quality Handbook</i> (operational guidance to institutional quality, including Internal Review procedures, documentation and management) 	<p>September 10th 2022</p>
<p>R2. The institution could support the development of quality culture across the institution.</p>	<ol style="list-style-type: none"> 1. Promotion and Awareness of QA activities in all administrative and academic units, students' bodies through organising seminars, meetings, informative emails, 	<p>August 14th 2021</p>

	<p>visits to departments throughout the academic year</p> <ol style="list-style-type: none"> 2. Develop <i>Quality Assurance and Development Plan 2021-2022</i> and report annually on quality output 3. Upload on AUM website European and Maltese national legislative acts, standards and regulations regarding quality in higher education 4. Introduction of QA criteria and requirements in all university units 5. Organise quality events (quality monitoring, improvement actions, review procedures) 	
KR3. The institution could increase the institutional awareness of the sanctions applicable in case of breach in the academic integrity expectations (including cheating and plagiarism).	<ol style="list-style-type: none"> 1. Academic Integrity is included into updated <i>Student Handbook</i> 2. Distribute and collect signatures - <i>Anti-plagiarism and Academic misconduct Form</i> 3. Antiplagiarism policy will be included into <i>Course Handbook, Program Handbook</i> and <i>AUM Academic Regulations</i> 	August 14 th 2021
KR5. The institution should increase, before the end of the 2021/2022 academic year, the institutional visibility of the anti-plagiarism software Turnitin and regulate its use as a mandatory step of the assessment process.	<ol style="list-style-type: none"> 1. Update of the <i>AUM Student Handbook</i> with AUM policies on Academic Integrity and Plagiarism (highlighting the role of Turnitin and include a description of the penalties) 2. Implementation of Turnitin for Similarity Checks across the Academic Community. 3. Antiplagiarism Policy & Turnitin will be also included in <i>AUM Academic Regulations, Course Handbook</i> 	August 14 th 2021
KR6. The institution should ensure, by not later than 12 months of the publication of the present report, that the strategic planning is a participatory process by	<ol style="list-style-type: none"> 1. Development of <i>Strategic Development Program for 2021-2025</i> discussed with all stakeholders and approved by 	August 14 th 2022

actively involving staff, students and external stakeholders.	<i>University Council and Board of Trustees</i>	
R4. The institution could ensure the continuity of the strategic planning processes at the AUM by creating a link between the different strategic plans drafted and adopted by the institution.	<ol style="list-style-type: none"> 1. Development of <i>Academic and Research Development Plan 2021-2022</i> 2. Development of <i>Quality Assurance and Development Plan 2021-2022</i> 3. Development of <i>Finance and Administrative Development Plan 2021-2022</i> 4. Development of <i>Library and IT Resources Development Plan</i> for 2021-2022 <p>(all abovementioned Plans are linked and based on <i>Strategic Development Plan</i>)</p>	
KR7. The institution should, within 12 months of the publication of the present report, ensure a coherent and integrated interaction/link between the strategic and operations management and the quality assurance system, where the latter supports the decisions of the former.	<ol style="list-style-type: none"> 1. Publication of the <i>Strategic Development Program 2021-2025</i> on AUM website. 2. Implementation of Monitoring and Internal Institutional Quality Review procedures of Strategic Development Programme 3. Annual Reports Strategic Development Programme, Academic and Research Development Plan, Quality Assurance and Development Plan, Administrative and Finance Development, Library and IT Resources Development Plan 4. Reports will be done to the University Council and Academic Council 	September 10 th 2022
Standard 2: Institutional Probity		
KR8. The institution should, by not later than 12 months of the publication of the present report, implement more consistent mechanisms to safeguard institutional	<ol style="list-style-type: none"> 1. Revise of <i>Organisational Chart</i> 2. Revise <i>Employment contract</i> conditions 3. Revise composition of <i>University and Academic Councils</i> 	August 14 th 2022

continuity, in particular within its management positions.	4. Introduction of AUM <i>Organisational Regulations, Academic Regulations (specify management structure, duties, scope of responsible issues)</i>	
KR9. The institution should, before the end of the 2021/2022 academic year, formalise its academic governance by defining clear Terms of Reference for all structures and ensure meeting minutes are held on every occasion.	<ol style="list-style-type: none"> 1. Approval by Councils of annual Plans of Committees and structural units 2. Documentation of meetings 	August 14 th 2022
R5. It is recommended that Sadeen Education Investment Limited undertakes all the necessary managerial and financial steps to ensure its financial viability in the short term, so as to ensure its survival and continued operation in Malta, for the benefit of its current and future student populations.	<ol style="list-style-type: none"> 1. Publish information on Sadeen Education Investment Limited and its financial sustainability (<i>website, Regulations</i>) 2. Development of <i>Financial Support Planning (AUM Budget)</i> (as an integrated part of Strategic Development Program) and its approval by Board of Trustees and University Council 3. Publish students' support programs (scholarships, social support, financial aid, support of talents, handicapped, international students, etc.) on the University website and include into Handbooks 4. Publish financial support programs for university staff (Faculty and administrative staff) and include into AUM Organisational Regulations 	
Standard 3: Design and Approval of Programs		
KR10. The institution should, before the end of the 2021/2022 academic year, implement the new provisions on design and approval of study programmes currently included in the Quality Assurance Policy;	<ol style="list-style-type: none"> 1. <i>Academic Quality Handbook</i> will include the design and approval of study programmes procedures. 2. Implementation of Program Approval Procedures 3. QA monitoring and annual review of study programmes through 	August 14 th 2022

	Curriculum Committee, Academic Council	
KR11. The institution should, before the beginning of the 2021/2022 academic year, clarify the composition of the Committees involved in the design and approval of study programmes, and reflect it formally and consistently in its documentation.	<ol style="list-style-type: none"> 1. Revise the Academic Committees (composition, effectiveness, responsibilities) discussion and approval at the Academic Council meeting 2. Curriculum committee reports regularly to the Academic Council 	August 14 th 2021
KR12. The institution should, before the beginning of the 2021/2022 academic year, ensure that study programmes curricula include disciplines to support students in acquiring research competences, such as Research Methods or Academic writing.	<ol style="list-style-type: none"> 1. Development of Research Methods and Academic Writing Modules for all curriculum, undergraduate and graduate 2. Introduction of Research Methods and Academic Writing Modules in <i>Program and Course Handbooks</i> 	August 14 th 2021
KR13. The institution should, before the beginning of the 2021/2022 academic year, increase stakeholders' involvement in the design and approval of study programmes.	<ol style="list-style-type: none"> 1. Procedures of design and approval of studying programmes is included into <i>Academic Quality Handbook</i> 2. <i>AUM Academic Regulations</i> will describe requirements for study programmes approval and design 	August 14 th 2021
Standard 4: Student-centred Learning, Teaching and Assessment		
KR14. The institution should, within 12 months of the publication of the present report, recognise and enable students to assume a partnership and co-creator role in designing different institutional aspects, and especially teaching and learning policies and processes.	<ol style="list-style-type: none"> 1. To include students' representatives in all the University Committees, in particular Institutional and Academic Committees 2. To consult student body on their roles in University bodies and the importance of their representation in committees and Councils (how students can influence quality) 	September 10 th 2022
R5. The institution could establish simple and reliable procedures for recognition of informal and non-formal learning which would be used both for alternative admissions	<ol style="list-style-type: none"> 1. Describe exit awards programmes approved/accredited in Program Handbooks, Course Handbooks 2. Transfer credit equivalency procedure to be developed and implemented 	August 14 th 2021

track (contextualised admissions) and as an option to replace a certain number of the students' study programme ECTS points (recognition of prior learning).		
R6. The institution could strengthen course review reports by integrating them with a professional development approach which would serve to improve teachers' competences needed to properly carry out self-assessment, and continuously improve the course content and methods which course review reports deal with.	<ol style="list-style-type: none"> 1. To prepare a Professional Development Programme for Faculty and Staff 2. To create Centre of Excellence 	August 14 th 2021
R7. The institution could collect data about potential vulnerability factors of the student body in a way that this data could be correlated with academic success and progression of students. This could then be used to research specific vulnerabilities and for early detection of potential barriers experienced by individual students.	<ol style="list-style-type: none"> 1. To create students' qualitative and quantitative data base 2. Develop Counselling service 3. To continue students' academic survey (questionnaires for First year students, exit students, including course surveys and AUM stay experience) 4. Include approval of questionnaires, survey results and further improvement measures into agenda of meetings of the Academic Council 5. To present survey results to faculty to improve study programmes and other departments to take improvement measures 	August 14 th 2021
Standard 5: Student Admission, Progression, Recognition and Certification		
KR15. The institution should, before the end of the 2021/2022 academic year, develop a policy which allows for efficient and streamlined recognition of informal and non-formal learning, both in admissions and in	<ol style="list-style-type: none"> 1. Revision of admissions policies along with Maltese Requirements. 2. Describe exit awards programmes approved/accredited in Program Handbook, Course Handbook 	August 14 th 2022

complementing the formal educational programme.		
R8. The institution could carry out more in-depth analysis of student enrolment, progression and successful completion factors (e.g. previous education, socio-demographic elements or any other characteristic which might have an impact), in order to support the AUM in developing evidence-based policies for the entire student life cycle.	<ol style="list-style-type: none"> 1. Create <i>Qualitative and Quantitative Data Base</i> of Students and Faculty 2. Develop a project on <i>Automated Quality Management System</i> 	2021-2022
Standard 7: Learning Resources and Student Support		
R9. The institution could adapt its library working hours to accommodate the course timings of all students.	<ol style="list-style-type: none"> 1. Revise Library Structure and submit offers for changes (including changes of working hours) 2. Update of Library Policy (including Inter-Library Loans) and submission for approval 3. Elaboration of <i>Library Development Plan</i> and submission for approval to the University Council 4. Prepare Library Annual Report 	
Standard 8: Information Management		
R10. The institution could invest in an offsite backup solution so as to protect crucial data from natural disasters, human error or security breaches.	<ol style="list-style-type: none"> 1. Development of data Protection Policy & Back up 	July 15 th 2021
R11. The institution could draft a Data Retention Policy in order to have formal documentation of how such retention is being controlled.	<ol style="list-style-type: none"> 1. To develop the retention policy (with procedures) 	July 15 th 2021

Response to Mandatory recommendations made by the Peer Review Panel

Mandatory recommendations	AUM Actions to be taken to address the recommendation	Date for submission
Standard 1: Policy For Quality Assurance		
<p>MR1. The institution shall ensure, before the beginning of the 2021/2022 academic year, that the Quality Assurance Policy limits itself to a quality assurance remit: the organisation of the quality assurance system i.e. processes, mechanisms, instruments, reporting, data collection, timeframes, quality cycle, together with the responsibilities of different organisational units - those of institutional leadership, individual staff members and students with respect to quality assurance – while the rest of the academic policies are organised separately in the Policies and Procedures Manual, as reflected in the Bylaws of the Board of Trustees.</p>	<ol style="list-style-type: none"> 1. Development and approval of <i>Academic Quality Handbook</i> 2. Development of <i>Institutional Quality Handbook</i> 	August 14 th 2021
<p>MR2. The institution shall ensure, before the beginning of the 2021/2022 academic year, the publication of a Policies and Procedures Manual, updated on an annual basis, as per the Bylaws of the Board of Trustees.</p>	<ol style="list-style-type: none"> 1. Develop and publish the <i>Academic Quality Handbook</i> (operational guidance for quality) (with annual review and publication), <i>AUM Academic Regulations</i> (collection of academic Policies) (with annual review and publication), <i>AUM Organisational Regulations</i> (collection of Organisational policies) (with annual review and publication) 2. Develop and publish <i>Course, Program Handbooks</i> (with annual review and publication) 	August 14 th 2021
<p>MR3. The institution shall, before the beginning of the 2021/2022 academic year, publish the Quality Assurance</p>	<ol style="list-style-type: none"> 1. Publish <i>Institutional and Academic Quality Handbooks</i> in AUM Internal Platform 	August 14 th 2021

Policy and Policies and Procedures Manual so that they are accessible on the institutional website for all interested parties.		
MR4. The institution shall, before the beginning of the 2021/2022 academic year, revisit the 2021-2025 strategic plan so as to further detail specific objectives and actions, coordinators and measurable KPIs (intermediary and final), timelines and resource allocation.	<ol style="list-style-type: none"> 1. Develop performance metrics for strategic development and management 2. Update of Strategic Development Plan 	August 14 th 2021
MR5. The institution shall, before the beginning of the 2021/2022 academic year, clarify, formalise and implement a reporting methodology to enable the institution keep track of its strategic planning progress.	<ol style="list-style-type: none"> 1. Development of Institutional QA Monitoring and Review of Strategic development (<i>in accordance with approved performance metrics, approved procedures of Internal QA monitoring and review</i>) 	August 14 th 2021
Standard 2: Institutional Probity		
MR6. The institution shall, before the beginning of the 2021/2022 academic year, carefully revise the structures and positions on the AUM organisation chart and ensure that the needs of the institution are met, in order to enable it to meet its strategic objectives successfully.	<ol style="list-style-type: none"> 1. Update of the Organisational Chart, introducing new structures and positions from effective management perspective and quality 	August 14 th 2021
MR7. The institution shall, before the beginning of the 2021/2022 academic year, clarify the roles and responsibilities across the organisation chart, their reflection on the relevant formal documentation and their transparent communication across the institution.	<ol style="list-style-type: none"> 1. To Develop and publish <i>AUM Organisational Regulations</i> with indication of professional responsibilities for each position 	August 14 th 2021
MR8. The institution shall, before the beginning of the 2021/2022 academic year, ensure that all individuals at	<ol style="list-style-type: none"> 1. To review management positions 2. Develop <i>AUM Organisational Regulations</i> (with indication of 	August 14 th 2021

the AUM hold positions they have the right qualifications and experience for.	requirements for managers, faculty positions)	
MR9. The institution shall, before the end of the 2021/2022 academic year, increase student engagement and representation in all decisional, consultative, and executive bodies at the AUM, guided by the European principles of representativeness, openness, democracy, accountability, and independence. Specific mechanisms should be implemented to ensure that students receive both material (e.g. facilities, finances) and non-material (e.g. training, stimulative environment) support in order to allow their voice to impact all matters in the institution.	<ol style="list-style-type: none"> 1. To ensure students representation in all committees 2. Rights of students will be included into the <i>Students Handbook and AUM Academic Regulations</i> 3. To arrange support of students on their participation in university activities (training and consultation on procedures that they can contribute in terms of quality, management and contribution to development) 	August 14 th 2022
Standard 3: Design and Approval Of Programs		
MR10. The institution shall, before the beginning of the 2021/2022 academic year, define a formalised process of yearly policy review to ensure their accuracy, relevance and continuity.	<ol style="list-style-type: none"> 1. To provide Policy Review Procedures in accordance with Institutional and Academic quality procedures 2. Arrange Annual Review and Approval of Policies 	August 14 th 2021
MR11. The institution shall, before the end of the 2021/2022 academic year, evaluate all programmes' curriculum and adapt them to students' needs.	<ol style="list-style-type: none"> 1. To establish <i>Annual Program Appraisal and Annual Course Review Procedures</i> 	2021-2022
MR12. The institution shall ensure, before the end of the 2021/2022 academic year, that all Course Syllabi comply with the teaching-learning evaluation processes.	<ol style="list-style-type: none"> 1. Introduction of course quality requirements and teaching-learning evaluation processes in AUM Academic Regulations 	August 14 th 2022
Standard 4: Student-centred Learning, Teaching and Assessment		

<p>MR13. The institution shall, before the end of the 2021/2022 academic year, develop learner autonomy through a higher level of flexibilisation and individualisation of studies allowing for, for example, a higher variety of learning and assessment methods, or opportunities to integrate study mobility and competences acquired outside of formal education in the curricula.</p>	<ol style="list-style-type: none"> 1. To develop procedures for the flexibility of programmes through mobility programmes. 2. Define mobility programmes opportunities through university partnership, European and international mobility programs 	<p>August 14th 2022</p>
<p>MR14. The institution shall, before the end of the 2021/2022 academic year, encourage and enable students to make use of mobility opportunities through: 1) facilitating seamless recognition of credits from abroad, 2) informing the students about financing opportunities (e.g. Erasmus+ mobility) and 3) demonstrating students how international mobility is useful for them.</p>	<ol style="list-style-type: none"> 1. Develop Policies and procedures of mobility programmes 	<p>August 14th 2022</p>
<p>MR15. The institution shall, before the end of the 2021/2022 academic year, create and implement consistent systems for the quality assurance of its assessment process (usually in the form of internal and external moderation).</p>	<ol style="list-style-type: none"> 1. To update assessment criteria and develop procedures for QA of assessment process 	<p>August 14th 2022</p>
<p>MR16. The institution shall, before the end of the 2021/2022 academic year, establish different types of training for teachers which would help them develop their competences in managing and innovating the teaching and learning process, assessing student competences and</p>	<ol style="list-style-type: none"> 1. To develop plans for professional development for teaching and administrative staff 2. To create <i>Centre of Excellence (for Staff Development)</i> 	<p>August 14th 2022</p>

integrating generic competences in the curricula.		
MR17. The institution shall, before the beginning of the 2021/2022 academic year, ensure that students are aware, and there is a clear visibility, of the formal appeals procedure; students should be encouraged to pursue this option without fear of repercussion.	<ol style="list-style-type: none"> 1. To approve <i>Student Appeal and Misconduct Committee</i> by the Academic Council 2. To get an annual report of the Committee 3. Provide analysis of appeals and misconduct and arrange improvement measures 	August 14 th 2021
MR18. The institution shall, before the end of the 2021/2022 academic year, strengthen its reaction mechanisms of the course-level survey by increasing the transparency of results and providing students with information on what was changed based on previous survey results.	<ol style="list-style-type: none"> 1. To develop a course survey and provide students with the survey results 2. Discuss and publish results at academic committees and prepare Improvement plan 	August 14 th 2022
Standard 6: Teaching Staff		
MR19. The institution shall, before the end of the 2021/2022 academic year, provide and facilitate more support activities dedicated to teaching staff in order to expand teaching skills and keep up to date with new pedagogies.	<ol style="list-style-type: none"> 1. Develop clear Policy and procedure for Professional Development and access the financial funds for professional developments based on clear Professional development Plan (criteria and needs specified) 2. Provide <i>Internal Professional Development</i> through Centre of Excellence (including invitation of representatives of university partners and from industry) 	August 14 th 2022
MR20. The institution shall, before the end of the 2021/2022 academic year, develop and implement effective policy and practice for staff development.	<ol style="list-style-type: none"> 1. To develop and implement effective policy and practice for staff development. 	August 14 th 2022
MR21. The institution shall, before the end of the 2021/2022 academic year, develop and regularly implement peer observations	<ol style="list-style-type: none"> 1. <i>AUM Organisational Regulations</i> includes Faculty Evaluation procedures 	August 14 th 2022

and other forms of teaching staff performance evaluation.		
MR22. The institution shall, before the end of the 2021/2022 academic year, ensure that the teaching staff is sufficiently trained to supervise diploma theses.	<ol style="list-style-type: none"> 1. To update Faculty Policy in regards to requirements for the supervision of Diploma Thesis. 2. <i>AUM Organisational Regulation</i> (including Faculty Policy). 	August 14 th 2022
MR23. The institution shall, before the end of the 2021/2022 academic year, support effective research skills development of the staff and create realistic conditions for their research activity to be realised.	<ol style="list-style-type: none"> 1. To promote and support staff research skills development to create Research Centres per College (Business, IT, Engineering) and develop financial sustainability of research Centres (fundraising, joint project collaborations, project funding opportunities, etc.) 2. Participate in University Ranking - QS (includes international research development criteria) 3. Apply for external accreditation (Institutional and program evaluation) by specialised Agencies to be competitive in higher education market nationally and internationally 	August 14 th 2022
MR24. The institution shall, before the end of the 2021/2022 academic year, encourage and support research activities of the staff.	<ol style="list-style-type: none"> 1. Develop <i>Academic and Research Development Plan</i> 2. Publish research outcomes of staff 3. Create University Research Centre\Lab\School 4. Encourage Faculty to search for research projects 	August 14 th 2022
MR25. The institution shall, before the end of the 2021/2022 academic year, support the development of links between teaching and research.	<ol style="list-style-type: none"> 1. To create Research Centre/Lab/School with active involvement of faculty and students 2. Use research outcomes in teaching programmes 3. To include Research modules into curriculum 	August 14 th 2022

<p>MR26. The institution shall, before the end of the 2021/2022 academic year, clearly define the relationship scheme between supervisor and the staff under probationary period, as well as the processes included within this supervision.</p>	<ol style="list-style-type: none"> 1. <i>AUM Organisational Regulations</i> will include staff under probation and conditions. 	<p>August 14th 2022</p>
<p>Standard 7: Learning Resources and Student Support</p>		
<p>MR27. The institution shall, before the end of the 2021/2022 academic year, ensure the sufficiency of its library offerings both in terms of terms of diversity i.e. covering the main reading lists of the programmes, but also in terms of the number of copies available.</p>	<ol style="list-style-type: none"> 1. Develop <i>Library Development Plan</i> 2. To develop a procedure on how FM should require support and sources 	<p>August 14th 2022</p>
<p>MR28. The institution shall, before the beginning of the 2021/2022 academic year, cater for personal and psychological counselling by qualified staff, in other to suitably attend to a more diverse range of non-academic student needs.</p>	<ol style="list-style-type: none"> 1. To develop a policy and procedure for <i>Student Support Services, Counselling Services</i> 	<p>August 14th 2021</p>
<p>MR29. The institution shall, before the beginning of the 2021/2022 academic year, further enhance its career development support in terms of availability and number of placements and employment opportunities; also, career counselling should be more systematically and actively provided.</p>	<ol style="list-style-type: none"> 1. To develop career counselling services, Placement, Scholarship Opportunities 2. Create a space for this on the Students Affairs Webpage 	<p>August 14th 2021</p>
<p>MR30. The institution shall, before the beginning of the 2021/2022 academic year, clarify and increase the transparency and visibility of its scholarship programmes, while also making them available in the student handbook and on the</p>	<ol style="list-style-type: none"> 1. To revise scholarships policy, and procedures to access the scholarship. 2. To update the website accordingly (Create a space for this on the Students Affairs Webpage) 	<p>August 14th 2021</p>

institutional website; ensure student representation in the Scholarship Committee.	3. To include scholarship programmes in the Program Handbook	
MR31. The institution shall, before the end of the 2021/2022 academic year, ensure that opportunities of outgoing student mobility become an integral part of studies at the AUM.	1. To develop policy and procedures for mobility programmes 2. To include to Student Affairs Webpage (Mobility Program Details).	August 14 th 2022
MR32. The institution shall, before the beginning of the 2021/2022 academic year, make available opportunities for the professional development of the administration and other support staff. (In line with MR 19 and MR 20).	1. Development of Administrative Staff Development Plan	August 14 th 2021
MR33. The institution shall, before the beginning of the 2021/2022 academic year, make sure that any systems which are not being used anymore, are decommissioned so as to reduce risks such as security breaches.	1. To Revise Risk and Safety Policy 2. To approve the Policy	August 14 th 2021
Standard 9: Public Information		
MR35. The institution shall, within a month of the receipt of this report, ensure that the website landing page Privacy Policy/Consent Management is properly configured.	1. To revise Privacy/Consent Management	May 2 nd 2021
MR36. The institution shall, within a month of the receipt of this report, include the NCFHE logo and pass marks in courses which are accredited by the NCFHE.	1. Include MFHEA logo and pass marks in courses which are accredited by NCFHE.	May 2 nd 2021
Standard 10: On-going Monitoring and Periodic Review of Programmes		
MR37. The institution shall, before the end of the 2021/2022 academic year, implement clear systems and processes to monitor and	1. Course Review Procedure (described in Academic Quality Handbook) 2. Creation of the <i>Industry Advisory Board</i> and get documented	August 14 th 2022

<p>periodically review of their programmes in order to ensure that they achieve the objectives set out; to review the content of the programme in the light of latest research/practice in the sector in order to ensure that the programme is up to date, and to respond to the changing needs of students and society.</p>	<p>approval of our programmes from the side of the Industry. 3. Peer review of programmes</p>	
<p>MR38. The institution shall, before the end of the 2021/2022 academic year, put in practice the policies for the on-going monitoring and periodic review of programmes and actually implement the proposed annual programme level review. 4. (In line with MR 37).</p>	<p>1. To develop monitoring a periodic review of programmes (<i>Academic Quality Handbook (Annual appraisal Review and Report)</i>).</p>	<p>August 14th 2022</p>
<p>MR39. The institution shall, before the end of the 2021/2022 academic year, involve stakeholders in the on-going monitoring and periodic review of its programmes, in terms of engagement in different organisational structures charged with curriculum development, as well as engagement in feedback collection exercises that producing data to inform improvement.</p>	<p>1. Questionnaires (undergraduate, graduate and postgraduate students' questionnaires) 2. Curriculum Committee reviews and monitors programmes 3. Curriculum Committee involves professionals from the field for external evaluation 4. Academic Council discusses review outcomes</p>	<p>August 14th 2022</p>

Annex 1: Review Panel Bio Notes

In the setting up of the review panel for American University of Malta, 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 (13th – 15th October 2020).

Chair of Review Panel:

Dr. Anca Prisacariu holds a PhD in Educational Sciences from the University of Bucharest, Romania and was a Research Fellow within the Institute of Behavioural Sciences at the University of Helsinki, Finland. Her research preoccupations are around the quality assurance of higher education, focusing on enhancement-led systems and processes.

Apart from her studies, she has broad working experience with international organisations for higher education and acts as expert for different national quality assurance agencies across Europe and beyond. From these positions, she has been part of numerous review panels at study programme, institutional and quality assurance agency level. Her consultancy roles in different countries have given Anca extensive experience and expertise in quality assurance, regulation, the development and review of standards frameworks.

Her activity as Advisor to the Minister of Education in Romania has increased her experience in formulating, reviewing and implementing policies in higher education at a national level. In addition, her background in the student movement adds to her expertise topics like the Bologna Process, student-centred learning, equity, equality and the social dimension of higher education, student engagement, and representation.

Her positions as Head of Quality Assurance at Wintec Saudi Arabia and, subsequently, the African Leadership University in Mauritius, added to Anca's background expertise in vocational education and training, as well as in the development of internal quality management frameworks, coordination of the policy-making and revision, monitoring and performance management of the strategic and operational plans, and ensuring institutional compliance in external accountability processes.

Peer Reviewers:

Prof. Milan Pol works at the Faculty of Arts, Masaryk University, as Professor of Education and, since 2014, Dean of Faculty. His professional interests are divided between school leadership/management and educational evaluation, recently focusing more intensely on evaluation in higher education settings (he has also served as ENQA expert). Among other subjects, he has been involved in research in school culture, school administration, organisational learning in schools and life/professional careers of school leaders. He is author and co-author of a variety of home and foreign publications and has been editor-in-chief of the journal *Studia paedagogica* since 2009 (Scopus-databased). Since 2018, he has been serving as the ENIRDELM (*European Network for Improving Research and Development in Educational Leadership and Management*) board member again.

Ms. Oana Sârbu is the Director of the Quality Management Department at the University of Bucharest. She has a Bachelor degree in Mathematics awarded by the "Al.I.Cuza" University of Iași, a Master degree in Education Management awarded by the University of Bucharest and she is currently a PhD candidate, developing a research on the Impact of Quality Assurance in Higher Education System in Romania. She has dedicated her entire career to quality assurance, especially to quality assurance in higher education. She has coordinated the Romanian Agency for Quality Assurance in Higher Education (ARACIS) Experts Department for more than 10 years and she was involved in many national and international projects in quality assurance of higher education. Between 2011 and 2013, she was appointed as Romanian Bologna Expert by the National Ministry of Education. Since 2013, she has been an ENQA evaluator and member of various structures within ENQA such as the Appeals and Complaints ENQA Committee, Internal Quality Assurance - ENQA Group or ENQA - Staff Development Group. She has participated in many national and international external evaluations at different levels (programmes, higher education institutions and quality assurance agencies), and she was involved in developing national and international strategies, methodologies and procedures in QA in HE, but also in monitoring the implementation of the objectives proposed. For the last three years, she has decided to change the perspective from external quality assurance to internal quality assurance, which gave her a deeper understanding of the processes inside the universities, the possible problems and the implementation of the quality assurance in daily routine of the academic, research or administrative activities.

Student Peer Reviewer:

Mr. Aleksandar Šušnjar is a certified expert in external evaluation of quality assurance systems of the Croatian Agency for Science and Higher Education (agency responsible for external quality assurance) and a member of ENQA's pool of student experts for external review of quality assurance agencies. As a student member of the panel, he has participated in audits and re-accreditation procedures in Croatia (both internal and external), as well as in thematic international evaluations. Aleksandar Šušnjar was also active in numerous student organisations and representation bodies, including holding positions of president of the Croatian Students' Council and being a member of the Executive Committee of the European Students' Union for two mandates. He is currently

a member of the Steering Committee of ESU's Student Experts' Pool on Quality Assurance, EQAF Programme Committee and ENQA External Review Steering Committee.

Mr. Christian Sammut works as a Head of IT with a Maltese-based online gaming company. Previously, he worked as Senior Systems Administrator within the Ministry of Education and Employment in the Government of Malta. He has a broad experience in the IT sector within the public and the private sector. Christian holds a Diploma in Industrial Electronics and Computer Engineering, a BTEC Diploma in Computer and Information Systems, a Higher National Diploma in Computing and Systems Development, a BSc. Hons in Information Technology and a Master degree in Business Administration. Christian has successfully achieved several other IT-related certification, such as MCSA (Microsoft Certified System Administrator), CompTIA Network+, APMG ITIL Foundation, ISTQB-ISEB Certified Tester Foundation besides others.

Annex 2: Agenda of the on-site visit.

QA Audit Agenda: American University of Malta

Date: 13th -15th October, 2020

Venue: AUM, Triq Dom Mintoff, Bormla

Day 1

08.30 – 09.00	NCFHE representatives arrive at AUM
09.00 – 09.30	Welcome by Provost and Facilitator <i>[Professor Dr Narcisa Mosteanu/ Ms Audrey Abela]</i>
09.30 – 11.00	Meeting with Senior Administration – CEO and Provost <i>[Mr Ziya Alpay/ Professor Dr Narcisa Mosteanu]</i>
11.00 – 11.30	Panel Discussion
11.30 – 12.30	Meeting with the Board of Trustees <i>[His Royal Highness Prince Jean de Nassau HE Dr Ibrahim Saif Professor Derrick Gosselin]</i>
12.30 – 13.30	Lunch break
13.30 – 15.00	Meeting with Quality Assurance Officer and the Accreditation Committee
15.00 – 15.30	Panel Discussion
15.30 – 16.30	Meeting with Clemson University
16.30 – 17.00	Panel Discussion and conclusions of day 1

Day 2

08.30 – 09.00	NCFHE representatives arrive at AUM
09.00 – 09.15	Meeting with Facilitator <i>[Ms Audrey Abela]</i>
9.15 - 10.45	Meeting with Lecturers
10.45 – 11.15	Panel Discussion
11.15 – 12.00	Meeting with Students Government
12.00 – 13.00	Lunch Break
13.00 – 14.30	Meeting with Students
14.30 – 15.00	Panel Discussion
15.00 – 16.00	Meeting with HR and Finance <i>[Mr Mustafa Odeh]</i>
16.00 – 16.30	Panel Discussion and conclusions of day 2

Day 3

08.30 – 09.00	NCFHE representatives arrive at AUM
09.00 – 09.15	Meeting with Facilitator <i>[Ms Audrey Abela]</i>
09.15 – 10.45	Meeting with IT, Registrar and operation of Online Platform
10.45 – 11.15	Panel Discussion
11.15 – 12.00	Meeting with Research Centre and Library
12.00 – 13.00	Working Lunch
13.00 – 16.30	Internal Panel Working Session
16.30 – 17.00	Presentation of Initial Findings (Provost & Facilitator to be present)