

**EEC-ITIS Malta Tourism and Languages Institute – Follow-up report**

Follow-up Report

External Quality Audit Assurance conducted by the National Commission for further and  
Higher Education

EEC-ITIS Malta Tourism and Languages Institute

23 July 2021

## Introduction

In line with the guidelines set by the National Commission for Further and Higher Education (NCFHE), EEC-ITIS Malta Tourism and Languages Institute (EEC-ITIS), undergoes a cyclical external quality assurance, once every five years. Following the external quality assurance audit conducted by the NCFHE and the publication of the final report, EEC-ITIS is drawing up a follow-up report, detailing how the recommendations put forward by the reviewing panel are being addressed, including the timeframes put in place.

EEC-ITIS positively takes note of the key findings and the recommendations made by the peer reviewing panel. In this regard, EEC-ITIS welcomes the constructive feedback received by the peer reviewing panel as facilitated by the NCFHE, and believes that this exercise serves a good practice in itself to:

- I. Provide an external perspective on the overall administration and day-to-day running of EEC-ITIS from an operational point of view, the academic aspect and the student-centered environment in a bid to improve the quality of learning experience;
- II. Establish the state of play and provide an external assessment of the operational and quality assurance procedures which have been implemented in the first years of operation of EEC-ITIS, thus indicating their robustness and effectiveness;
- III. Identify promising and good practices within current procures which could benefit and further enhance Malta's educational landscape while highlight areas of improvement for EEC-ITIS.

The suggestions emanating from this quality assurance audit are considered crucial for EEC-ITIS in order to continue improving its quality assurance mechanisms, strengthen its capacity and improve its institutional quality.

While EEC-ITIS has taken note of some of the initial remarks made during the on-site audit visit by EQA peer review panel at EEC-ITIS on 11<sup>th</sup> and 12<sup>th</sup> October 2018, and had started addressing some of the immediate recommendations to further improve its institutional mechanism, it has also examined the final recommendations in this audit report as published by NCFHE on 24 July 2020, once the report was finalised.

In this regard, EEC-ITIS shall be taking on board all of the recommendations published in the quality assurance report as part of its future plan to continue strengthening its institutional approach. EEC-ITIS further notes that a good number of suggested recommendations had already become measures in place and had been put in practice since the site visit.

## **About EEC-ITIS Malta Tourism and Languages Institute**

EEC-ITIS Malta Tourism and Languages Institute holds over 20 years' experience in training and learning provision, policy consultancy, research, project management and learning mobility in the field of hospitality, tourism and business management. We provide small, dynamic classes with the best of European curricula.

Through constant experimentation and collaboration with renowned professionals, the institute strives to advance education and training in and for industry. This includes ongoing research and analysis of the changes in industry and the world of work to deliver more focused and industry-relevant learning methodologies and pedagogies.

Our high-calibre faculty of academics, entrepreneurs, consultants and business leaders combine the academic and professional to support a unique and exceptional quality of learning.

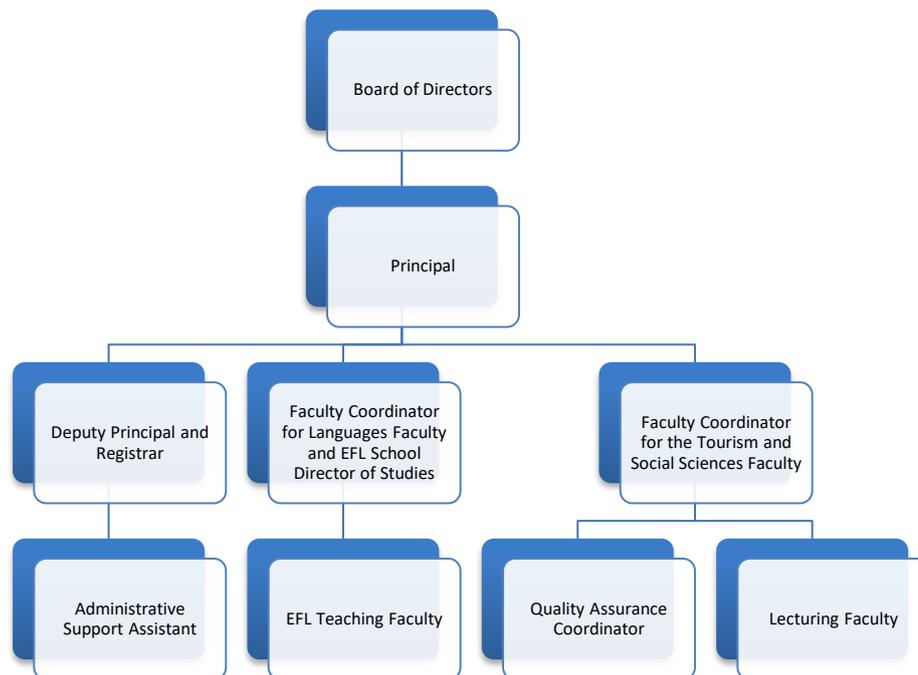
EEC-ITIS is an active member of international think-tanks and organisations including ATLAS and ATHE and has trained numerous professionals in the greater field of hospitality including through its accredited Certificate, Diploma, Higher Diploma and Bachelor of Arts courses in International Tourism and Hospitality Management.

Blending traditional teaching methods with on-the-job experience, site visits, and guest speaker sessions, our experiential approach to learning, provides students with the knowledge and tools to thrive in today's rapidly evolving business world.

## Follow-up Report

*General comments and clarifications further to the response to comments and proposals made by the Peer Review Panel on the Policy for Quality Assurance:*

EEC-ITIS notes that from the time when the on-site audit visit by the EQA peer review panel at EEC-ITIS on 11<sup>th</sup> and 12<sup>th</sup> October 2018 was conducted until this report was received for feedback, there have been some changes in its organisational structure. These are being reflected in an updated Quality Manual.



**Table 1.1 – New Organisational Chart**

The updates in the revised version of the Quality Assurance Manual include the following organisational changes:

### The Board of Directors

1. The institute's highest hierarchy is now a Board of Directors representing the shareholders to which the Principal is answerable. It is believed that this enhances the system of check and balances within the headship positions of the institute (see table 1.1). The role of the Board of Directors is to oversee, scrutinize and approve major strategic and financial decisions of the school, including its strategic outlook and business strategy and to vet the performance of the Principal and the respective faculty boards that are in place according to the quality manual;

### The Principal

2. The role of the Principal, who is now answerable to the Board of Directors (see table 1.1), includes, but is not limited to: course marketing; student pre-admission interviews (acting upon recommendations from the respective faculty coordinators – newly created roles); student admission (acting upon recommendation from the registrar); tutor selection and recruitment; tutor academic mentoring and appraising; overseeing the work of the faculty coordinators on scheduling of assessments, verification of all assignment briefs, liaison with internal verifier for assessment decisions; liaison with stakeholders from the world of work for organising placements; overseeing and approving the work of the respective faculty coordinators on the design, development and review of programmes; financial control and liaising with the NCFHE.

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

### **The role of the Deputy Principal and the Registrar**

3. EEC-ITIS has taken note of the Panel's observations on the necessity to have a deputy to the Principal. From the time of the on-site visit by the EQA peer review panel at EEC-ITIS on 11<sup>th</sup> and 12<sup>th</sup> October 2018, the role of Deputy Principal has been fulfilled. The role of the Deputy Principal and Registrar is to assist and support the Principal in the carrying out of the duties assigned to the latter, which taking care and overseeing student recruitment; student progression; coordination between the internal departments; liaising with stakeholders, international agents and coordinating the school outreach, including its marketing plan.

The Deputy Principal and Registrar is assisted by the administrative support assistant (see table 1.1). Therefore, the role of Administrator and Registrar have been separated from each other into two full-time positions in order to separate the two roles. This was done in order to invest further in the capacity building of the institute by enhancing the administrative arm to deal with administrative procedures while ensuring that the registrar is able to focus more on recruitment, handle enquiries by applicants and current students while also supporting the Principal.

### **Faculty Coordinators**

4. EEC-ITIS has also seen been working on updating its business model and function to also include an English as Foreign Language (EFL) school operating under an EFL license issued and monitored by the EFL monitoring board. In this regard, EEC-ITIS has since updated its organisational structure to split its academic activities into two designated faculties: Faculty of Languages which is responsible for offering EFL courses at various levels along with other language courses, and a Faculty of Social Sciences and Hospitality which is currently responsible for offering the Certificate in International Tourism, Diploma in International Tourism and Hospitality Management, Higher Diploma in International Tourism and

Hospitality Management and a Bachelor of Arts (Honours) in International Tourism and Hospitality Management. The activities of each faculty are coordinated by a 'Faculty Coordinator' (see table 1.1). The Institute thus currently has two Faculty Coordinators, one for each faculty, supporting the principal in the academic affairs of each faculty<sup>1</sup>.

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

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

### **Quality Assurance Coordinator**

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

### **Other updates and revisions to the Quality Assurance Manual**

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

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

day-to-day administration of the institute. The Quality Manual has also been made accessible to students and staff via the student drop-box facility.

3. EEC-ITIS also notes that its business plan has been updated in order to reflect the renewal of the organisation's function. An ad hoc working group in this regard has been setup by the Principal in order to update EEC-ITIS's business plan reflecting on a three-pronged strategic approach:
  - I. International recruitment
  - II. Sustainability of the organisation
  - III. Commitment towards Malta's business community

The business strategy is set to further reflect on establishing a continuous approach to ensure that the programmes offered by the institute will continue reflecting the needs of industry and enterprise to ensure that EEC-ITIS will continue acting as a bridge between the academia and the world of work as part of its core strategic function. The working group has also worked on setting up the performance indicators to indicate and monitor performance in relation to the Institute's mission. The work of this group is included in the updated quality manual.

**STANDARD 1: STANDARDS FOR INTERNAL QUALITY ASSURANCE****JUDGEMENT: Requires improvement to meet standard****Recommendation  
(as per EQA Report)**

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

**Take-up and Implementation of  
Recommendation**

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

- I. Direct student feedback can be provided through the anonymous student feedback questionnaires sent at the end of each study unit whereby students are asked to provide their feedback on the effectiveness of the learning outcomes, teaching and instructional quality, assessment procedures, relevance of the study unit for the world of work and the administration of the study unit. This is in effect as of academic year 2020/2021. The questionnaires are disseminated at the at the end of the second semester of every academic year (end of July 2021 for the academic year of 2020/2021) to collect feedback on all study unit;
- II. In order to monitor student progress, a one-to-one meeting is held between the Faculty Coordinator and each student every semester in order to discuss academic progress and performance. This also provides another avenue for direct student feedback. This has been in effect since the beginning of 2020;
- III. The Faculty Coordinator also has scheduled student visiting hours, of a minimum of six hours weekly dedicated for students visits whereby students can

	<p>book an appointment to discuss any academic/administrative matters. This is in effect since the beginning of 2020.</p> <p>IV. Registrar and the Principal both operate an open-door policy in order to facilitate direct student assistance on any ancillary/administrative queries. This has always been in effect.</p> <p>V. All visiting lecturers are reachable by email for additional student support outside of lecturing hours as part of their work duties. This has always been in effect.</p>
<p>KR2. The Panel notes the need for a deputy to the Principal such that the Institute has the necessary resources to ensure a well-planned and effective delegation of tasks and hand-over of duties. This is deemed necessary by the Panel for the continuity of the Institute and the programmes on offer.</p>	<p>EEC-ITIS has already taken direct action on this recommendation. The post of the Deputy Principal has been filled. The role of the Deputy Principal and Registrar is to assist and support the Principal in the carrying out of the duties assigned to the latter, which taking care and overseeing student recruitment; student progression; coordination between the internal departments; liaising with stakeholders, international agents and coordinating the school outreach, including its marketing plan.</p> <p>EEC-ITIS has since updated its organisational structure to split its academic activities into two designated faculties: Faculty of Languages which is responsible for offering EFL courses at various levels along with other language courses, and a Faculty of Social Sciences and Hospitality which is currently responsible for offering the Certificate in International Tourism, Diploma in International Tourism and Hospitality Management, Higher Diploma in International Tourism and Hospitality Management and a Bachelor of Arts (Honours) in International Tourism and Hospitality Management. The activities of each faculty are coordinated by a 'Faculty Coordinator'. The Institute thus currently has two Faculty Coordinators, one for each faculty, supporting the principal in the academic affairs of each faculty. This ensures that the Institute has the necessary resources to ensure a well-planned and effective delegation</p>

	of tasks and hand-over of duties while ensuring the continuity of the Institute and the programmes on offer.
R3. The titles of 'Programme Coordinator(s)' and 'Course Coordinator' are used interchangeably in the Quality Manual, and thus requires clarification.	EEC-ITIS has already taken direct action on this recommendation. The role of Faculty Coordinator for the Faculty of Social Sciences and Hospitality, replaces what was previously referred to as 'programme coordinator' and 'course coordinator' in the Quality Manual which were previously used interchangeably. The Quality Manual has thus been updated.
KR4. The Institute should establish and implement appropriate performance indicators that are used to indicate and monitor performance in relation to the Institute's mission.	A specifically setup working group under the direct auspices of the Principal, has worked on setting up performance indicators to indicate and monitor performance in relation to the Institute's mission. The work of this group is included in the updated quality manual.
R5. The ethics policy and principles against intolerance need to also address the interaction between Student to Student and Student to staff.	EEC-ITIS has updated its ethics policy and principles against intolerance.
KR6. The Quality Manual should include a policy for reasonable adjustments (special arrangements) or alternative forms of assessment for Students with special needs.	EEC-ITIS has updated the Quality Manual to include a policy for reasonable adjustments or alternative forms of assessment for students with special needs.
KR7. The Institute should establish the frequency of meetings of the Board of Studies, the Examination Board and the Classification Board as well as ensure that an agenda and records of ALL the Board meetings are prepared and stored. The Institute is also required to set in operation the various Boards as set-out in the Quality Manual.	EEC-ITIS has set in operation the Board of Studies, the Examination Board and the Classification Board and the agenda and minutes of each board are being kept.

## **STANDARD 2: INSTITUTIONAL PROBITY**

### **JUDGEMENT: Meets Standard**

<b>Recommendation (as per EQA Report)</b>	<b>Take-up and Implementation of Recommendation</b>
KR1. EEC-ITIS should prepare a fully-fledged business plan, duly aligned with its academic plan, which sets identifiable and measurable financial and volume targets for its growth and puts into place adequate policies for the continued monitoring of progress and to take necessary corrective actions in a timely and effective manner.	EEC-ITIS has updated its business plan in order to reflect the renewal of the organisation's function. Due to the unprecedented effects of the COVID-19 pandemic and its impact on the institution, the business plan now has to be revised to take into account what adjustments needed to be made in this regard.

	<p>A working group in this regard had been setup by the Principal in order to update EEC-ITIS's business plan reflecting on a three-pronged strategic approach: international recruitment, sustainability of the organisation and commitment towards Malta's business community. This is aligned with its academic offering and places adequate policies for the continued monitoring of progress and to take necessary corrective actions in a timely and effective manner.</p> <p>The business strategy reflects on establishing a continuous approach to ensure that the programmes offered by the institute will continue reflecting the needs of industry and enterprise to ensure that EEC-ITIS will continue acting as a bridge between the academia and the world of work as part of its core strategic function.</p>
<p>R2. EEC-ITIS should develop a written procedure for the engagement and selection of headship posts which, although might not be in the offing in the near future, is an important procedure to have in place for when such contingency arises.</p>	<p>The Board of Directors in liaison with the Principal has worked on a written procedure for the selection of headship positions when an outside call is issued and for when an internal call is issued.</p>

### STANDARD 3: DESIGN AND APPROVAL OF PROGRAMMES

**JUDGEMENT: Meets standard**

<b>Recommendation (as per EQA Report)</b>	<b>Take-up and Implementation of Recommendation</b>
<p>KR1. The provider should seek Student and external stakeholder feedback also during the initial 'Programme Proposal' stage.</p>	<p>EEC-ITIS notes this is already implemented. EEC-ITIS notes that it had already engaged with industry stakeholders via one-to-one meetings and other means in the design of the currently accredited programmes thus this recommendation is already partially in place in the established procedure as explained during the site-visit and also acknowledged in the QA report itself.</p> <p>Given that now there is an established student body and an alumni network is slowly generating, as the first intakes are finishing their cycle and getting into the world of work, EEC-ITIS considers this recommendation viable.</p>

In the design of future programmes, EEC-ITIS shall thus continue with its market research exercises including by taking into account the views of industry stakeholder and also by taking into account feedback from current students and alumni. Stakeholder and student feedback is thus currently being sought via the following measures:

- I. As from academic year 2020/2021, two types of online questionnaires are being disseminated in order to collect feedback from current students: one to assess student satisfaction and feedback on the effectiveness of each study unit and thus in order to be able to make adequate adjustments of each study unit and another one on the overall course programme in order to assess the adequacy of the overall programme. The questionnaires are disseminated at the at the end of the second semester of every academic year (end of July 2021 for the academic year of 2020/2021) to collect feedback on all study units and the course programme.

Students are asked to provide their feedback on the effectiveness of the learning outcomes, teaching and instructional quality, assessment procedures, relevance of the study unit for the world of work and the administration of the study unit and on the overall effectiveness and administration of the course programme. This feedback is then used and taken into account during programme proposal stage for the proposal of new programmes. This exercise is expected to be held at the end of every academic year and the feedback evaluated by the faculty coordinator to be taken into account in the preparation of new programmes and updating of study units. For the current academic year of 2020/2021, this exercise shall

	<p>kick-start in July 2021 and completed in September 2021.</p> <p>II. As from academic year 2020/21, an online questionnaire is being disseminated in order to collect feedback from alumni on the effectiveness and relevance of current programmes offered by EEC-ITIS and their use for the world of work, once every three years amongst the previous three intakes. This will also include a component for graduate tracing. The questionnaires are being disseminated in July 2021 in order to collect feedback on the course programme and shall be completed by September 2021.</p> <p>III. A standard operating procedure has also been developed for stakeholder consultation in view of new programme proposals and the revisions of current programmes at every three-year cycle. This includes:</p> <ul style="list-style-type: none"> <li>- a questionnaire designed for stakeholders including employers, industry operators and social partners working in the relevant fields related to the accredited programmes on offer, once every three years. The questionnaire is designed to help collect feedback from the latter on the effectiveness and relevance of current programmes on offer, collect feedback on what could be improved and what new elements could be added in order to make the current and future programmes on offer more relevant to the industry and world of work. The questionnaire dissemination shall take place in September 2021;</li> </ul>
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	<ul style="list-style-type: none"> <li>- follow-up one-to-one interviews with selected stakeholders once a new programme has been developed and rafted or a cyclical review of current programmes has been developed in order to provide feedback on the finalised draft which would then be considered by the Board of Studies This will be part of the upcoming cyclical review which will commence in October 2021;</li> </ul> <p>Due to the current COVID-19 pandemic and the disruptions this has caused to higher learning in terms of student admissions and applications, continuity of programmes and the industries relevant to the programmes on offer, the cyclical review of current programmes that was meant to commence in January 2021 has been moved to October 2021. This is in view to allow the industries relevant to the programmes on offer, tourism and hospitality to be able to adjust to the changes brought about by the COVID-19 pandemic and thus better interpret how the industry had adapted and be able to adequately incorporate and reflect such patterns and processes in the cyclical review.</p>
<p>KR2. The provider should ensure that the core members of the Special Committee and also the Board of Studies involved in the design, development and approval of new programmes have sufficient autonomy.</p>	<p>EEC-ITIS notes that this is already in place in practice. The Quality Manual has been updated to specifically clarify that both the approval of the core members of the Special Committee and approval of the Board of Studies is required whenever there is the development and updates of academic programmes, thus ensuring the autonomy of such boards.</p>
<p>R3. The scope of the design, development and approval of the Tutor teaching material is to be included as part of the 'Programme Content' process in the Quality Manual.</p>	<p>The programme content section in the Quality Manual has been updated to include the scope of the design, development and approval of the Tutor teaching material.</p>

**STANDARD 4: STUDENT-CENTRED LEARNING, TEACHING AND ASSESSMENT**

**JUDGEMENT: Requires improvement to meet Standard**

**Recommendation  
(as per EQA Report)**

**Take-up and Implementation of  
Recommendation**

<p>KR1. The Student Handbook should be developed further to include information regarding policies and procedures covering ethics, complaints, appeals, extenuating circumstances, fees for rescheduling and resit of exams, regulations regarding carrying forward of failed units and Student feedback.</p>	<p>The Student Handbook has been updated in order to include policies and procedures covering, ethics, complaints, appeals, extenuating circumstances, fees for rescheduling and resit of exams, regulations regarding carrying forward of failed units and Student feedback. EEC-ITIS further notes that the student handbook has already been updated from the time of the site-visit to include an examinations and assessment policy. This lists procedures on fees for rescheduling and resit of examinations.</p>
<p>KR2. The Institute needs to implement its requirement regarding the use of an index number as opposed to the current practice of Student entering their names on the examination script.</p>	<p>The examinations and assessment policy has already been updated to include the following examination procedure:</p> <ol style="list-style-type: none"> <li>I. At the beginning of every exam each student is allocated a unique index number (UIN) by the invigilator. The student writes the allocated UIN on the examination script front page instead of their name thus preserving their anonymity to the examiners. The invigilator will list the allocated UIN near each student name and student ID on the attendance sheet in order to be able to match the student with the examination script. This attendance sheet is passed on directly to the Registrar and Principal and not stored with the rest of the exam scripts which will be passed on to the tutor for the initial correction;</li> <li>II. The examination template has been updated to ensure the students list their UIN instead of their names. This would allow further transparency in the examination correction procedure. The same UIN shall be kept for the correction procedure by the second examiner.</li> </ol>
<p>KR3. The Provider should consider staggering the submission deadlines of the assignments and examinations more evenly over the semester.</p>	<p>EEC-ITIS notes that since the site-visit has taken place until the receipt of the QA report, this recommendation has already been implemented. The submission deadline for</p>

	<p>assignments is now taking place three weeks after examinations for each semester thus allowing for a more staggered procedure which doesn't overburden students.</p> <p>Furthermore, for those study unit where a presentation or a written assignment component is part of the procedure, there has been an established practice whereby the assignment/presentation title is provided to students within the first week of the commencement of the study unit in order to allow enough time for self-study and individual research. This is considered as a good practice by EEC-ITIS.</p>
<p>KR4. The Provider should set-up and implements clear guidelines for the visiting Tutors on what constitutes good practice in terms of ensuring the separation of 'teaching and learning' from 'assessment'.</p>	<p>EEC-ITIS takes note of this recommendation and the subsequent clarifications which have followed by the NCFHE in order to explain the following further in the correspondence dated 10/09/2020.</p> <p>In this regard, EEC-ITIS welcomes the recommendation. The practice of Tutors giving feedback to students on their first assignment draft has been discontinued and replaced with more formative feedback in the form of tutorials when the assignment brief is issued. This is taking place in the form of a one-hour tutorial for each study unit. In this regard, a guideline for tutorials has been finalised.</p> <p>Furthermore, each study unit has clearly defined learning outcomes, learning objectives and assessment guidelines and objectives which are all unique to every study unit. These were also subsequently verified by the NCFHE as part of the accreditation process. Therefore EEC-ITIS doesn't understand what is the purpose of this recommendation and thus requires further clarification as to what is meant by this recommendation.</p> <p>EEC-ITIS notes that since the site-visit has taken place until the receipt of the QA report, further action has been taken in this regard through the following procedures:</p> <ol style="list-style-type: none"> <li>I. Assignment titles and presentation titles are provided within the first week of lectures for every semester.</li> </ol>

	<p>This serves to make it clear what are the assessment objectives and how the teaching and learning methods and approaches will feed and complement the assessment criteria;</p> <p>All assignment titles, presentation themes, examination paper questions and any form of assessment are first drawn up by the respective study unit lecturer in charge, vetted by the Faculty Coordinator and approved by the Examinations board whose autonomy is guaranteed under the Quality Manual. The purpose of this is to ensure that the assessment quality remains high and reflective of the learning outcomes that are supposed to be achieved.</p>
<p>R5. The Provider should ensure that the Students have regular access to the corrected scripts that includes, not only the Marking Sheet with the marks and general comments, but also formative feedback by the Tutors as well as access to past papers from previous cohorts.</p>	<p>This measure is already in place. Upon request to the Faculty Coordinator, students can have access to corrected scripts, including the marking sheet and comments sheet. Furthermore, students are able to book an appointment with their lecturer or obtain feedback in writing from the respective lecturer on their assessment. All visiting lecturers are reachable by email for additional student support outside of lecturing hours as part of their work duties.</p> <p>Past papers have also been made available on the shared student online dropbox folder.</p>
<p>KR6. Documented evidence of the decisions by the Internal Verifier (signature, date etc.) is required both for the Internal Verification of the assignment brief (tasks) and Internal Verification of the assessment decisions, in particular, were the brief is modified following the internal verification process.</p>	<p>Documented evidence of the decisions by the Internal Verifier (signature, date etc.) are being recorded.</p>
<p>R7. The Provider may include a reference in the Quality Manual to the established sampling size (currently 100 % of Student cohort size) for the post-assessment internal verification.</p>	<p>EEC-ITIS takes note of this recommendation and has updated the Quality Manual to make it clear that the established sampling size for the post-assessment internal verification is 100 % of Student cohort size.</p>
<p>KR8. The Institute should consider using model answers or marking schemes or grading rubrics when assessing Student work to ensure fairness and consistency when grading.</p>	<p>This measure is already in place. There are established marking schemes/grading rubrics for assignments and examinations. These mechanisms are in place to ensure fairness and consistency when grading. Model answers are drawn up by the respective tutors are these are</p>

	different for each study unit based on the learning outcomes.
R9. The Provider may implement the requirement in its Quality Manual for a viva voce for the Degree programme.	EEC-ITIS takes note of this recommendation and considers it a good practice to include a viva voce for the degree programme in the Quality Manual. This has been included in the Quality Manual.
KR10. The Provider should implement more consistently its policy regarding the Student feedback questionnaire at the end of each unit.	<p>A student feedback questionnaire is disseminated at the end of each study unit.</p> <p>Direct student feedback can be provided through the anonymous student feedback questionnaires sent at the end of each study unit whereby students are asked to provide their feedback on the effectiveness of the learning outcomes, teaching and instructional quality, assessment procedures, relevance of the study unit for the world of work and the administration of the study unit. This is in effect as of academic year 2020/2021. The questionnaires are disseminated at the at the end of the second semester of every academic year (end of July 2021 for the academic year of 2020/2021) to collect feedback on all study units.</p>
KR11. The Provider should retain records of formal complaints and appeals.	<p>This measure is already in place and records are kept in case there is an appeal. The QA audit report confirms that:</p> <p><i><u>“During the interviews with the Panel, the Students noted that they never had the need to make an official written appeal or complaint since they prefer to communicate any issues verbally with the Principal.”</u></i></p> <p>This confirms that up to the site visit there had never been an appeal, especially given that the relatively small size of the student body. In this case, it is to be noted that in the eventuality that an appeal is made, follow-up action will be recorded in writing through email. Notwithstanding, EEC-ITIS has since never received an appeal from any of its students. In this regard and based on the above observation, EEC-ITIS finds the following remark by the panel contradictory to the above finding especially since there had never been an appeal prior to this date and thus doesn’t see the availability of this observation:</p>

	<p><i>“The Panel was not provided with any records of appeals or complaints received, processed and upheld or refused. The Panel, therefore, could not, through documented evidence provided (emails, decisions etc.,) reach any conclusion or opinion regarding the effectiveness and consistency of the processes in place for the formal resolution of appeal or complaint cases relating to lack of academic integrity, discrimination, intolerance etc.”</i></p> <p>It is to be noted that one recorded intention of complaint has been made in March 2020 and a record of such correspondence whereby the student wanted to make a complaint has been kept. The student decided not to go forward with the complaint.</p>
<p>KR12. The Provider should identify, as part of the accredited work-based learning unit, a set of competences that need to be successfully demonstrated by the Students during the placement assessment.</p>	<p>This recommendation is already in place.</p> <p>The questionnaires filled by employers and students during the accredited work-based learning unit, are based on identifying a set of competences that need to be successfully demonstrated by the Students, including managerial competences, soft skills, teamwork, on-site and practical learning and theoretical knowledge acquired during the placement assessment. Furthermore, the assessment criteria for the final essay and for the reflective journal are further based on such competences.</p> <p>An updated draft of the study unit description has been finalised to clearly indicate such learning competences that need to be acquired and will be taken into consideration in the upcoming cyclical review of the programme which shall commence on October 2021.</p>
<p>KR13. Policy and governance structure should allow Students to have recourse to an appeal of an academic decision or the outcome of a complaint decision and change the target of six weeks for the resolution of complaints to a matter of days.</p>	<p>This measure is already in place. The Policy and governance structure already allows students to have recourse to an appeal of an academic decision as is attested in the audit itself and the findings of the panel. The outcome of a complaint decision for the resolution of complaints has now been changed to 13 working days. This amendment was included in the Quality Manual.</p>

**STANDARD 5: STUDENT ADMISSION, PROGRESSION, RECOGNITION AND CERTIFICATION****JUDGEMENT: Meets standard**

<b>Recommendation (as per EQA Report)</b>	<b>Take-up and Implementation of Recommendation</b>
KR1. Admission Board Policy and guidelines for the definition and assessment of prior learning should be documented to ensure consistency and fairness in the application of recognition of prior learning and consideration of applications by mature students.	The Admission Board Policy and guidelines for the definition and assessment of prior learning have been documented and updated in the Quality Manual.
KR2. The Institute should have a policy on the actual number of maximum units that can be carried forward and on the number of times a Student can be allowed to resit the same exam without the need for repeating the unit with attendance.	The new examinations and assessment policy establishes the number of maximum units that can be carried forward and the number of times a Student can be allowed to resit the same exam without the need for repeating the unit with attendance.

**STANDARD 6: TEACHING STAFF****JUDGEMENT: Meets standard**

<b>Recommendation (as per EQA Report)</b>	<b>Take-up and Implementation of Recommendation</b>
R1. Recruitment of lecturing to be conducted through a formal interviewing Board.	EEC-ITIS notes that this recommendation has already started being implemented since from the time that the site visit took place until the audit report was received. All recruitment is done through interviews in order to assess eligibility for the respective posts. The interviewing board is chaired by the Principal, and composed of a nominee representing the Board of Directors and the Faculty Coordinator who must collectively decide whether the candidate is eligible against a set of established assessment criteria. EEC-ITIS considers this to be a good practice.
KR2. The current practise of 'walk-in' appraisals needs to be formalised into a schedule in order to facilitate consistency in its implementation. Also, the process for Tutor appraisal needs to be documented in the Quality Manual, including the frequency of appraisal and how the output	A performance appraisal of each lecturer is done at the end of the calendar year by the Faculty Coordinator, which is then approved by the Principal and verified by the Board of Directors. This has been included in the Quality Manual.

of this appraisal process is communicated to the Tutors.	
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<b>STANDARD 7: LEARNING RESOURCES AND STUDENT SUPPORT</b>	
<b>JUDGEMENT: Meets standard</b>	
<b>Recommendation (as per EQA Report)</b>	<b>Take-up and Implementation of Recommendation</b>
R1. The Institute is encouraged to establish working contacts with professional service providers who can be a possible point of contact by its Students for dealing with anxiety, being away from home.	<p>EEC-ITIS notes that this practice is already in place through the following measures:</p> <ol style="list-style-type: none"> <li>I. A list of medical professional endorsed by the school including psychologist, therapist, medical doctor and dentist is made available to student with the welcome pack upon enrolment;</li> <li>II. In order to monitor student progress, a one-to-one meeting is held between the Faculty Coordinator and each student every semester in order to discuss academic progress and performance. This also provides another avenue for direct student feedback;</li> <li>III. The Faculty Coordinator also has scheduled student visiting hours, of a minimum of six hours weekly dedicated for students visits whereby students can book an appointment to discuss any academic/administrative matters;</li> <li>IV. Registrar and the Principal both operate an open-door policy in order to facilitate direct student assistance on any ancillary/administrative queries.</li> </ol>
KR2. The Quality Manual and the Student Handbook should include a provision for the extension of the submission date of an assignment due to extenuating circumstances.	EEC-ITIS notes that this recommendation has already started being implemented since from the time that the site visit took place until the audit report was received. The Quality Manual and the Student Handbook now include a direct reference for the extension of the submission

	date of an assignment due to extenuating circumstances. This amendment will be included in the October 2020 update of the Quality Manual as approved by the Board of Directors.
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<b>STANDARD 8: INFORMATION MANAGEMENT</b>	
<b>JUDGEMENT: Requires improvement to meet Standard</b>	
<b>Recommendation (as per EQA Report)</b>	<b>Take-up and Implementation of Recommendation</b>
<p>KR1. Assignment feedback is an opportunity for reflection, thus facilitating continuous improvement and should therefore be forwarded to the students together with the assessment grade/mark.</p>	<p>EEC-ITIS welcomes this recommendation and considers that this might constitute a good practice to further enhance its student support mechanisms. Until now feedback was provided upon request, however EEC-ITIS shall thus implement this within immediate effect especially since the assessors' comments are already collated within the current correction system.</p> <p>This is being implemented as of academic year October 2020/21.</p>
<p>KR2. The Institute should ensure that the Student questionnaires include a date showing when the questionnaire was filled in.</p>	<p>This shall start being implemented as of academic year October 2020/21.</p>
<p>KR3. The documentation comprising the Quality Management System should be adequately referenced and revision controlled to ensure reliable information management such that both Students and staff always have in hand access to current and approved printed versions of documents.</p>	<p>EEC-ITIS notes that since the site-visit has taken place until the receipt of this report, this recommendation has already been implemented. All policies have been updated with the last date of revision and indicating the version number to ensure reliable information management such that both Students and staff always have in hand access to current and approved printed versions of documents.</p>
<p>KR4. The Institute should consolidate the process of periodic analysis of data about the inputs and outputs of the quality management system.</p>	<p>The Institute is processing periodic analysis of data about the inputs and outputs of the quality management system on a yearly basis at the end of the year.</p>
<p>KR5. The Institute should revise the way it collects and analyses the Student satisfaction and graduate (tracer) feedback in a way that ensures that the information obtained from these studies informs the decision-making process thus resulting in the enhancement of the Student experience.</p>	<p>EEC-ITIS welcomes this proposal and is conducting a student satisfaction and graduate (tracer) feedback study once every three years on the previous three intakes which would have graduated. This had not yet been conducted so far as there hadn't been a high volume of graduates and alumni in the first place to obtain an objective sampling.</p>

	As from academic year 2020/21, an online questionnaire is being disseminated in order to collect feedback from alumni on the effectiveness and relevance of current programmes offered by EEC-ITIS and their use for the world of work while also serving as a graduate tracer data collection questionnaire, once every three years. The questionnaires are disseminated at the at the end of the second semester of the academic year 2020/21 (end of July 2021 for the academic year of 2020/2021) to collect feedback on the course programme and shall be completed in September 2021.
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### **STANDARD 9: PUBLIC INFORMATION**

**JUDGEMENT: Requires improvement to meet Standard**

<b>Recommendation (as per EQA Report)</b>	<b>Take-up and Implementation of Recommendation</b>
KR1. The printed Prospectus should incorporate revision control (traceability to the year of issue).	The year of issue is included in the new prospectus.
KR2. The information on the Prospectus with respect to the entry requirements, working experience, and title of the Degree should be corrected/updated.	The information on the Prospectus with respect to the entry requirements, working experience, and title of the Degree have been updated.
KR3. The Provider should provide access to the prospective Students (and staff), via the public website, the key policies and regulations.	The key policies and regulations shall be made available to students and the staff through the internal dropbox and are emailed to prospective students upon application.
KR4. The Provider should provide details explaining the pass rate as well as the applicable fees for rescheduling and resit of examinations.	EEC-ITIS notes that since the site-visit has taken place until the receipt of this report, this recommendation has already been implemented. An examinations and assessment policy has been issued which explains the pass mark and the applicable fees for the resit of examinations and assignments.

### **STANDARD 10: ON-GOING MONITORING AND PERIODIC REVIEW OF PROGRAMMES**

**JUDGEMENT: Requires improvement to meet Standard**

Recommendation (as per EQA Report)	Take-up and Implementation of Recommendation
<p>CR1. The Institute should have in place within six months of the official communication of the EQA Audit Report appropriate arrangements for monitoring and periodical reviewing of academic programmes to ensure that these are meeting the set objectives and expectations. The Institute is also required to implement a process that facilitates direct Student/alumni feedback in its cyclical review of its accredited courses.</p>	<p>EC-ITIS notes that a set procedure for monitoring and periodical reviewing of academic programmes is already included in the Quality Manual to ensure that these are meeting the set objectives and expectations, also as stated and acknowledged in the report itself:</p> <p><i>“The Panel was informed that the course content is discussed regularly between the Principal and the QA Coordinator and with the industry stakeholders and the academic team. The Principal confirmed to the Panel that the involvement of the stakeholders is conducted informally. The Principal stated that this process is leading to improvements....The Principal remarked that although the formal review period is planned every five years, decisions to review and updated programmes are taken on a regular basis”</i></p> <p>Notwithstanding, EEC-ITIS has further established a standard operating procedure detailing the monitoring and periodic reviewing of the academic programmes, by building on the provisions already established in section 10 of the Quality Assurance manual.</p> <p>Periodic Monitoring is the building block of the Institute’s Quality Assurance and Quality Enhancement processes and the process whereby EEC-ITIS checks that individual study units and programmes meet the expectations of lecturers, students, prospective students and industry.</p> <p>Periodic monitoring has a key role in:</p> <ul style="list-style-type: none"> <li>(a) Maintaining academic standards</li> <li>(b) Monitoring and enhancing the management of assessment and of feedback to students</li> <li>(c) Monitoring student performance and progression</li> <li>(d) Evaluating the quality of the student experience and identifying enhancements</li> <li>(e) Evaluating the effectiveness of learning and</li> </ul>

teaching resources and identifying matters requiring attention<sup>[11]</sup><sub>SEP</sub>

(f) Identifying, promoting and disseminating good practice

(g) Informing the lecturers of matters requiring their attention

### **Monitoring and reviewing tools**

As established in the revised standard operating procedure included under section 10 of the Quality Assurance Manual, there are five main elements that are taken into account in the updated process for monitoring and periodical reviewing of individual study units and academic programmes. These include:

#### **I. Student feedback**

Student feedback obtained through the questionnaires filled in by student at the end of every academic year. Two types of online questionnaires are being disseminated in order to collect feedback from current students: one to assess student satisfaction and feedback on the effectiveness of each study unit and thus in order to be able to make adequate adjustments of each study unit and another one on the overall course programme in order to assess the adequacy of the overall programme.

Students are asked to provide their feedback on the effectiveness of the learning outcomes, teaching and instructional quality, assessment procedures, relevance of the study unit for the world of work and the administration of the study unit and on the overall effectiveness and administration of the course programme. This feedback is then used and taken into account both for the creation and proposition of new programmes and in the periodical reviewing of current and existing academic programmes. This

exercise is expected to be held at the end of every academic year and the feedback evaluated by the faculty coordinator which would then report to the Board of Studies.

**II. Alumni feedback**

As from academic year 2020/21, an online questionnaire is being disseminated in order to collect feedback from alumni on the effectiveness and relevance of current programmes offered by EEC-ITIS and their use for the world of work, once every three years amongst the previous three intakes. This will also include a component for graduate tracing.

**III. Stakeholder feedback: Employers, Industry Operators and Social Partners**

A standard operating procedure has also been developed for stakeholder consultation in view of new programme proposals and the revisions of current programmes at every three-year cycle. This includes:

- a questionnaire designed for stakeholders including employers, industry operators and social partners working in the relevant fields related to the accredited programmes on offer, once every three years. The questionnaire is designed to help collect feedback from the latter on the effectiveness and relevance of current programmes on offer, collect feedback on what could be improved and what new elements could be added in order to make the current and future programmes on offer more relevant to the industry and world of work.

- follow-up one-to-one interviews with selected stakeholders once a new programme has been developed and drafted or a cyclical review of current programmes has been developed in order to provide feedback on the finalised draft which would then be considered by the Board of Studies.

#### **IV. Lecturer Feedback**

As from academic year 2020/21, a questionnaire is being distributed to each lecturer requiring the latter to conduct a self-assessment and self-audit of each study unit and the overall course programme highlighting revisions and recommendations they wish to propose on the learning outcomes, teaching and instructional facilities and tools, including digital tools, assessment procedures, relevance of the study unit for the world of work, the administration of the study unit and on the overall effectiveness and administration of the course programme. This self-assessment by lecturers is carried out once every three years, and the feedback evaluated by the faculty coordinator which would then report to the Board of Studies prior to the cyclical programme revision every three years.

#### **V. External Agencies**

Feedback is taken from the recommendations emanating from the external quality assurance audit conducted by the Malta Further and Higher Education Authority every five years. Recommendations would be incorporated in the revised academic programmes every

cyclical review by the Board of Studies.

**Phase I: Periodic Study Unit Review**

The periodic review of study units is one of the main ways by which the Institute assures itself of the quality of the student learning experience and of the provision delivered. This is conducted by the Faculty Coordinator as part of the periodic programme review every three years.

The review provides a formal opportunity for EEC-ITIS to reflect on and critically evaluate its provision and to benefit from a constructive dialogue with the lecturers who are teaching the subjects.

<b>Criteria for Periodic Study Unit Review</b>	<b>Monitoring and Reviewing Tools in use</b>
Teaching and assessment of learning and assessment	Lecturer Feedback – every 3 years  Student Feedback – every year  Alumni Feedback – every 3 years
Student experience	Student Feedback – every year  Alumni Feedback – every 3 years
Enhancement procedures including academic management, research and resources as they relate to teaching, learning and	Lecturer Feedback – every 3 years  Stakeholder Feedback – every 3 years  Student Feedback –

	<p>assessment <sup>[1]</sup><sub>SEP</sub></p>	<p>every year</p> <p>Alumni Feedback – every 3 years</p> <p>External Agencies – every 5 years</p>
<p>Upon the commencement of a cyclical review every three years of existing course programmes and following the recommendations emanating from the evaluation of lecturers' questionnaires on the self-assessment and self-audit of the structures, course content and learning outcomes of the study units within their portfolio, the Board of Studies shall decide which study units will merit a revision. The respective lecturer responsible for the delivery of that study unit will be requested by the Board of Studies to draft a revised study unit course description and structure including learning outcomes.</p> <p>The following assessment procedure shall be used by the Board of Studies to consider a draft revised study unit presented by the lecturer:</p> <p>Step 1: Assess whether the study unit is complementary and fits within the overall scope, aims and objectives of any revised programme. <sup>[1]</sup><sub>SEP</sub></p> <p>Step 2: Assess the accurate presence of the study unit objective, rationale, description, learning outcomes, number of learning hours, number of ECTS, assessment, reading list <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> and lecturer's name <input type="checkbox"/>. Specifically during study unit evaluation the following are considered:</p> <ul style="list-style-type: none"> <li>(i) Where the intended outcomes realistic, achievable, and appropriate? <sup>[1]</sup><sub>SEP</sub></li> <li>(ii) Has the curriculum content been altered to reflect new research/practice? <sup>[1]</sup><sub>SEP</sub></li> <li>(iii) Is the delivery method appropriate? <sup>[1]</sup><sub>SEP</sub></li> </ul>		

(iv) Should the study unit be core/compulsory to the programme? <sup>[1]</sup><sub>SEP</sub>

(v) What changes are necessary in the reading list? <sup>[1]</sup><sub>SEP</sub>

(vi) Are the assessment methods suitable? <sup>[1]</sup><sub>SEP</sub>

(vii) Are the grading criteria clear and successful in distinguishing performance? <sup>[1]</sup><sub>SEP</sub>

(viii) Has a critical reflection been made on the teaching staff? <sup>[1]</sup><sub>SEP</sub>

Step 3: Analysis of annual student questionnaire feedback on the individual study units by the Faculty Coordinator. An evaluation report is drawn up from the feedback collected. The recommendations of the evaluation report of every year are taken into account by the board of Studies in the three-year cyclical review of each academic programme.

Step 4: In the case of a significantly revised study unit, changes are tracked to reflect all amendments. <sup>[1]</sup><sub>SEP</sub>

Step 5: In the case of a new study unit, a fresh numerical code is generated. <sup>[1]</sup><sub>SEP</sub>

Step 6: Provide a recommendation for approval of the revised or new study unit and its inclusion in the programme. If a study unit is not approved by the board of studies recommendations for revisions by the lecturer need to be drawn up by the Board of studies and steps 1-5 are again repeated until the Board of Studies is satisfied with the quality of the study unit. Once a study unit is finalised this shall be included in the revised course programme. Once all study units are revised, the cyclical review will move into Phase II – periodic programme review.

### **Phase II: Periodic Programme Review**

The Periodic Programme Review is designed to act as the single action plan for programme planning and development. It provides a mechanism for the Quality Assurance Office to

review a programme's success every three years, and to capture actions designed to enhance that programme.

<b>Criteria for Periodic Programme Review</b>	<b>Monitoring and Reviewing Tools in use</b>
to consider the validity of a programme in light of developments in research, and industry practice, and the continued alignment with the Institute's strategy and mission;	Lecturer feedback – every 3 years  Stakeholder Feedback – every 3 years
changes in the external environment such as requirements of professional and regulatory bodies	External Agencies – every 5 years
to ensure that students are attaining the intended learning outcomes and whether assessments enable this to be appropriately demonstrated;	Student Feedback – every year  Alumni Feedback – every 3 years
to highlight where improvements to provision are possible in order to enhance the student learning experience.	Lecturer Feedback – every 3 years  Stakeholder Feedback – every 3 years  Student Feedback – every year  Alumni Feedback – every 3 years  External Agencies – every 5 years

	<p>The following procedure is followed:</p> <p>Step 1: Analysis of annual student questionnaire feedback on the overall course programme by the Faculty Coordinator. An evaluation report is drawn up from the feedback collected. The recommendations of the evaluation report of every year are taken into account by the board of Studies in the three-year cyclical review of each academic programme.</p> <p>Step 2: Analysis of lecturer questionnaire feedback on the self-audit and self-assessment of their own study units and overall course programme by the Faculty Coordinator carried out every three years. An evaluation report is drawn up from the feedback collected. The recommendations of the evaluation report are taken into account by the board of Studies in the three-year cyclical review of each academic programme.</p> <p>Step 3: Analysis of alumni questionnaire feedback and graduate tracer study by the Faculty Coordinator carried out every three years. An evaluation report is drawn up from the feedback collected. The recommendations of the evaluation report are taken into account by the board of Studies in the three-year cyclical review of each academic programme.</p> <p>Step 4: Analysis of stakeholder questionnaire and one-to-one meeting carried out every three years. An evaluation report is drawn up by the Faculty Coordinator. The recommendations of evaluation report are taken into account by the board of Studies in the three-year cyclical review of each academic programme.</p> <p>Step 5: Analysis by the Board of Studies of the recommendations emanating from the external quality assurance audit conducted by the Malta Further and Higher Education Authority every five years.</p> <p>Step 6: Analysis by the Board of Studies of the approach used towards 'weaker' students, i.e. those who have failed more than two study units per academic year, and how this was handled by the faculty through interviews with relevant lecturers as part of the cyclical review every three years in order to highlight what could be</p>
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	<p>improved in terms of procedural approach.</p> <p>Step 7: Assessment by the Board of Studies that current research and/or practice is reflected in the updated content of every study unit. This will take place through peer reviewing amongst lecturers of each other study units according to relevant area of expertise which would then report to the Board of Studies.</p> <p>Step 8: Assessment by the Board of Studies that the programme has kept pace with developments in teaching and learning, e.g. use of technology, innovations in course design, improving availability of resources for students. <sup>[1]</sup><sub>SEP</sub> This will take place through peer reviewing amongst lecturers of each other study units according to relevant area of expertise which would then report to the Board of Studies.</p> <p>Step 9: Self-audit carried out by the Board of Studies to ensure that students with disabilities have equal access to the facilities of the Institute. Such students are provided with a chair lift, special restroom facilities, and large interactive boards for those suffering from eye-impairment.</p> <p>Step 10: Analysis by the Board of Studies on the number and quality of applications and admissions. <sup>[1]</sup><sub>SEP</sub></p> <p>Step 11: Analysis by the Board of Studies of the method of communication to current and prospective students. <sup>[1]</sup><sub>SEP</sub></p> <p>Step 12: Analysis by the Board of Studies of data sets in order to evaluate student performance and achievement. <sup>[1]</sup><sub>SEP</sub></p> <p>Step 13: Once the Board of Studies has concluded the programme review and all members on the board are in agreement with the revised programme content, the board shall inform the Principal to communicate changes to the programme to MFHEA prior to the launch of the revised programme and in any case not before the formal approval and re-accreditation of the changes by the MFHEA Accreditation Unit.</p> <p>Step 14: Upon formal approval and re-accreditation of the changes by the MFHEA</p>
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	<p>Accreditation Unit, the study unit is promoted by the Principal.</p> <p>Step 15: Once an academic year has commenced, no amendments should be introduced to existing study units in that year.</p>				
<p>KR2. The Institute should evaluate whether the five-year cyclical programme is considered to be realistic in terms of ensuring that the programmes are still relevant to the world of work after 60 months.</p>	<p>The Institute has re-evaluated the time frame for the cyclical programme to enact a more frequent overall programme review based on every three years.</p> <p>Due to the current COVID-19 pandemic and the disruptions this has caused to higher learning in terms of student admissions and applications, continuity of programmes and the industries relevant to the programmes on offer, the cyclical review of current programmes that was meant to commence in January 2021 has been moved to October 2021. This is in view to allow the industries relevant to the programmes on offer, tourism and hospitality to be able to adjust to the changes brought about by the COVID-19 pandemic and thus better interpret how the industry had adapted and be able to adequately incorporate and reflect such patterns and processes in the cyclical review.</p>				
<p>CR3. The Institute should introduce within six months of the official communication of the EQA Audit Report a formal, structured documented internal review of the Quality Management System.</p>	<p>EEC-ITIS welcomes this recommendation and has introduced a standard operating procedure for documented internal review of the Quality Management System in its Quality Manual.</p> <p>A structured procedure for internal review of the quality management system forms the basis of the renewal process of the Institute's Quality Assurance and Quality Enhancement processes and the process whereby EEC-ITIS checks that its management system remains relevant to today's requirements in terms of financial regulations, regulatory requirements to operate as a higher education and to maintain internal quality.</p> <p>A periodic internal review of the Quality Management System shall be conducted on the following areas:</p> <table border="1" data-bbox="810 1899 1385 2047"> <thead> <tr> <th data-bbox="810 1899 1091 1966">Area</th> <th data-bbox="1091 1899 1385 1966">Frequency</th> </tr> </thead> <tbody> <tr> <td data-bbox="810 1966 1091 2047">Institute's financial</td> <td data-bbox="1091 1966 1385 2047">External financial audit of the institute's</td> </tr> </tbody> </table>	Area	Frequency	Institute's financial	External financial audit of the institute's
Area	Frequency				
Institute's financial	External financial audit of the institute's				

	performance	financial accounts conducted by a qualified financial auditor and as per MFSA requirements every year. The report shall be communicated to the Principal and the Board of Studies in order to assess the quality assurance and management system from a financial aspect.
	Quality assurance audit of the Institute's Management structure	Conducted by the Board of Directors every three years. The next audit shall take place in September 2021.
	Quality assurance audit of Institute's policies, regulations, visions and goals	Conducted by the Board of Directors every three years. The next audit shall take place in September 2021.
	Quality assurance Audit of Programme Proposals and Cyclical Revision of Existing Academic Programmes	Conducted by the Board of Directors every three years. The next audit shall take place in September 2021.
	Quality assurance audit of marketing of programmes	Conducted by the Board of Directors every three years. The next audit shall take place in September 2021.
	Quality assurance audit of recruitment and admissions policy	Conducted by the Board of Directors every three years. The next audit shall take place in September 2021.
	Quality assurance	Conducted by the

audit of student assessment procedure	Board of Directors every three years. The next audit shall take place in September 2021.
Quality assurance audit of student welfare and support	Conducted by the Board of Directors every three years. The next audit shall take place in September 2021.
Quality assurance audit on staff recruitment and staff management	Conducted by the Board of Directors every three years. The next audit shall take place in September 2021.

**Area 1: Institute’s financial performance**

Step 1: External financial audit of the institute’s financial accounts conducted by a qualified financial auditor and as per MFSA requirements every year. The auditor is chosen by the Principal and approved by the Board of Directors.

Step 2: The report shall be communicated to the Principal and the Board of Studies in order to assess the quality assurance and management system from a financial aspect.

Step 3: An evaluation of the report shall be carried out by the board of Directors in order to ensure no financial irregularities on a yearly basis. The principal shall report to the Board of Directors on any actions carried out to address any financial irregularities within one months from the issuance of the auditor’s report.

**Area 2: Quality assurance audit of the Institute’s Management structure**

Step 1: The Board of Directors shall request the respective boards which make up the structure of the Faculty of Social Sciences and Hospitality to undertake an audit through a written procedure to assess the soundness of the institute’s management. This shall be made through a written request by the Board of

Directors which is sent to the Board of Studies, the Board of Examiners and the Classifications Board to kick start a written consultation process. This would provide a system of check and balances, where the management which at the end of the day are expected to provide institutional support to the respective boards are then assessed on a cyclical basis on their performance.

Step 2: Upon the receipt of the written request from the Board of Directors; the Board of Studies, the Board of Admissions, the Board of Examiners and the Classifications Board shall kick-start an audit process whereby each board would individually and independently from each compile a written consultation in the forms of a performance appraisal of the Principal, the Faculty Coordinator and the QA Coordinator. This would be compiled within a month of communication from the Board of Directors to each respective board or on the first date of meeting of each respective board, whichever comes first. The feedback for each written consultation must be agreed and endorsed upon by all respective board members within that specific board which feedback has been requested for and thus must universally reflect the opinion of the board.

The written consultation delivered by each board (the board of studies, the board of examiners, the board of admissions and the board of classifications) shall consist of feedback on the following three main criteria:

- i. Leadership measures implemented in the last 3 years
- ii. Timeliness measures implemented in the last 3 years
- iii. Teamwork measures implemented in the last 3 years
- iv. Change management measures implemented in the last 3 years
- v. Personal development undertaken in the last three years

	<p>Each board must comment on the effectiveness, provide recommendations for improvement and an overall mark out of 10 (10 being the highest and 0 being the lowest) to assess the performance of each member of the faculty management structure as part of the written consultation process.</p> <p>Step 3: Upon receipt of feedback as per written consultation process from the respective boards; the Board of Studies shall assess the feedback and recommendations put forward by each board. The Board of Studies shall work with the management of the faculty to address the recommendations and feedback provided by the respective boards.</p> <p><b>Area 3: Quality assurance audit of Institute's policies, regulations, visions and goals</b></p> <p><b>Area 4: Quality assurance Audit of Programme Proposals and Cyclical Revision of Existing Academic Programmes</b></p> <p><b>Area 5: Quality assurance audit of marketing of programmes</b></p> <p><b>Area 6: Quality assurance audit of recruitment and admissions policy</b></p> <p><b>Area 7: Quality assurance audit of student assessment procedure</b></p> <p><b>Area 8: Quality assurance audit of student welfare and support</b></p> <p><b>Area 9: Quality assurance audit on staff recruitment and staff management</b></p> <p>Step 1: The Board of Directors shall request the respective boards which make up the structure of the Faculty of Social Sciences and Hospitality to undertake a self-assessment exercise and self-audit on areas 3-9, in order to assess the soundness of all existing institutes' policies, regulations and the overall mission and goal, procedure for new programme proposals and cyclical revision of existing academic programmes, marketing of programmes,</p>
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student assessment procedure, student welfare and support, staff recruitment and staff management. This shall take place once every three years. This shall be made through a written request by the Board of Directors which is sent to the Board of Studies, the Board of Examiners and the Classifications Board to kick start a written consultation process.

Step 2: Upon the receipt of the written request from the Board of Directors; the Board of Studies, the Board of Admissions, the Board of Examiners and the Classifications Board shall kick-start an internal self-evaluation and self-audit process whereby each board would individually and independently from each compile a written consultation in order to express feedback from each board on how they assess the soundness of the procedures in place for areas 3-9 as stipulated in the QA manual. This would be compiled within a month of communication from the Board of Directors to each respective board or on the first date of meeting of each respective board, whichever comes first. The feedback for each questionnaire must be agreed and endorsed upon by all respective board members within that specific board which feedback has been requested for and thus must universally reflect the opinion of the board.

The written consultation delivered by each board (the board of studies, the board of examiners, the board of admissions and the board of classifications) shall consist of feedback on the following three main criteria:

- I. Effectiveness and robustness of current Institute's procedures in place as stipulated in the QA manual for areas 3-9 (each Board must comment and deliver an opinion on the soundness and relevance of each existing policy within the Institute. The principal shall compile an updated list of all existing procedures in the QA manual which would be brought to the attention of each respective board, upon the deliverance of the written request

	<p>by the Board of Directors to kick-start the written consultation).</p> <p>II. Identification of scope for new procedures to be included in the QA manual for areas 3-9 (each Board must comment and deliver an opinion upon the deliverance of the written request by the Board of Directors to kick-start the written consultation).</p> <p>III. Effectiveness of the implementation of procedures place as stipulated in the QA manual for areas 3-9 (each Board must comment and deliver an opinion upon the deliverance of the written request by the Board of Directors to kick-start the written consultation).</p> <p>Each board must comment on the effectiveness, provide recommendations for improvement and submit proposed changes on each of the above three criteria as part of the written consultation process.</p> <p>Step 3: Upon receipt of feedback as per written consultation process from the respective boards; the Board of Studies shall assess the feedback, recommendations and proposed changes put forward by each board on each respective existing policy, regulations, mission vision and goals. The Board of Studies shall work with the Principal to incorporate those changes which are deemed feasible by the Board of Studies, on each respective existing policy, regulations, mission vision and goals.</p> <p>Step 4: Upon finalisation of changes and incorporation of feedback provided through the written consultation with each respective Boards, the Principal shall convene a Quality Assurance Symposium on a minimum of three days (two areas for each day) which takes place once every three years. This is to be attended and chaired by the Board of Directors and the members of all respective boards of studies, admissions, classifications and examinations. The symposium shall focus on an exchange of views, discussion and final endorsement of the</p>
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	<p>changes proposed for the procedures listed in the QA manual for each areas 3-9 which would have been suggested during the written consultation process, updates to existing procedures and their implementation methods and endorsement of new procedures. Decisions are taken by qualified majority of attendees in the symposium.</p>
<p>CR4. The Institute should ensure that changes to the programmes are communicated to NCFHE prior to the launch of the revised programme and in any case not before the formal approval and re-accreditation of the changes by the NCFHE Accreditation Unit.</p>	<p>The Institute shall ensure that changes to the programmes are communicated to NCFHE prior to the launch of the revised programme.</p> <p>As explained prior, EEC-ITIS has further established a standard operating procedure detailing the monitoring and periodic reviewing of the academic programmes, by building on the provisions already established in section 10 of the Quality Assurance manual.</p> <p>As detailed in the revised standard operating procedure, the monitoring and review of academic programmes is split into two phases: periodic study unit review and periodic programme review.</p> <p>Once the Board of Studies has concluded the programme review and all members on the board are in agreement with the revised programme content, the board shall inform the Principal to communicate changes to the programme to MFHEA prior to the launch of the revised programme and in any case not before the formal approval and re-accreditation of the changes by the MFHEA Accreditation Unit.</p> <p>Upon formal approval and re-accreditation of the changes by the MFHEA Accreditation Unit, the study unit is promoted by the Principal. Once an academic year has commenced, no amendments should be introduced to existing study units in that year.</p>

**STANDARD 11: Cyclical External Quality Assurance**

**JUDGEMENT: Meets Standard**

**Recommendation  
(as per EQA Report)**

**Take-up and Implementation of  
Recommendation**

N/A

N/A