



Malta
Further & Higher
Education Authority

External Quality Assurance

Audit Report

EDUCATIONAL SERVICES AND TESTING

Carried out on

5th July 2024

mfhea.mt

Quality education for
confident futures .

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Abbreviations List

CEFR	Common European Framework of Reference
ECTS	European Credit Transfer System
EFL	English as a Foreign Language
EQA/QA audit	External Quality Assurance Audit
ESaT	Educational Services and Testing Ltd
ESOL	English as a Second or Other Language
HoI	Head of Institution
IQA	Internal Quality Assurance
MFHEA/the Authority	Malta Further and Higher Education Authority
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

Educational Services and Testing (ESaT) Ltd, co-owned by Istituto Stefanini and Jason Fenech, was established in 2012 with the primary goal of supporting English as a Foreign Language (EFL) training and testing centres. At present, ESaT primarily dedicates its efforts to the design of English language courses and tests. Although the company has held a license as a Further Education Institution since 2018, it has only recently begun to explore and expand into the training sector. This strategic shift was likely driven by the need to meet the requirements for maintaining its license as an educational institution with the Malta Further and Higher Education Authority (MFHEA). It marks a new phase for ESaT, as it builds upon its established expertise in course and test design to broaden its offerings and provide comprehensive training solutions. The expansion into training signifies ESaT's commitment to becoming a more versatile educational provider, leveraging its years of experience to deliver high-quality training programmes in addition to its well-regarded language courses and tests.

The Testing division of ESaT specialises in English as a Foreign Language testing, as well as the auditing and accreditation of test centres and the training of testing personnel. ESaT offers two modern examination suites tailored to distinct audiences: the TELSa for adults and the jTELS for juniors. ESaT has developed an efficient and effective online platform to better serve the needs of today's learners and stay at the forefront of digital innovations.

The mission of the institution is 'to provide educational services and assessment which have a positive influence on teaching and learning', while the long-term vision of ESaT is to develop 'a comprehensive range of products for language schools, eventually leading to the creation of a network of schools united under the ESaT brand'.

Overview of the Audit Process

This report is a result of the External Quality Assurance process undertaken by an independent peer panel. The panel evaluated the documentation submitted by the educational institution and conducted an online scoping visit and an audit visit of the institution from their premises at Pieta. The panel is responsible for reaching conclusions on all Standards. As outlined in the External Quality Audit Manual of Procedures, the MFHEA sought external expert advice to evaluate the financial capacity of the provider. Through 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.

Timeline

Dates	Milestones
22 nd April 2024	Panel induction meeting
31 st May 2024	Desk-based analysis meeting
17 th June 2024	Preliminary scoping visit online
5 th July 2024	Audit visit carried out at the institution's premises, Pieta

Summary of the Conclusions Reached by the Peer Panel

On the basis of the findings documented in the report, the panel has concluded that ESaT meets Standards 2, 6, 9 and 11, and needs improvement to meet the requirements of Standards 1, 3, 4, 5, 7, 8 and 10. The recommendations in the report are meant to improve the standards already in place and to enhance good practice.

The panel made 11 mandatory recommendations, six of which are to be implemented within 12 months and five within 6 months from the date of publication of this report. They also made five key recommendations, of which four are to be implemented within 12 months and one within 6 months from the date of publication of this report. In addition, the panel made two recommendations.

About the External Quality Audit (EQA)

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 (IOA) is fit for purpose.
- iv. The External Quality Assurance (QA audit) is a tool for both development and accountability. The QA audit shall ensure that the internal quality management system of the provider is:
 - fit for purpose according to the provider's courses and service users,
 - compliant with Standards and regulations, and contributing to the development of a national quality culture,
 - contributing to the fulfilment of the broad goals of Malta's Education Strategy 2014-24,
 - implemented with effectiveness, comprehensiveness, and sustainability.
- v. The Quality Improvement Cycle is at the heart of the Framework.
- vi. The integrity and independence of the QA audit process is guaranteed.

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

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

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

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

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

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

8. Information management: entities shall ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.
9. Public information: entities shall publish information about their activities which is clear, accurate, objective, up to date and readily accessible.
10. 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.
11. Cyclical external quality assurance: entities should undergo an external quality assurance audit by, or with the approval of, the MFHEA on a cyclical basis, according to the MFHEA guidelines, once every five years.

Peer panels essentially ask providers the following question about their arrangements for quality management:

'What systems and procedures are in place and what evidence is there that they are working effectively?'

The approach to quality assurance can be encapsulated in a number of key questions which providers should ask themselves about their management of quality.

- What are we trying to do?
- Why are we trying to do it?
- How are we trying to do it?
- Why are we doing it that way?
- Is this the best way of doing it?
- How do we know it works?
- Could it be done better?

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

The approach of the QA audit is not simply about checking whether providers adhere to the regulations; it examines how providers are developing their own systems in addressing the expectations of sound management of educational standards and the quality of their learning and teaching provision. It does not involve the routine identification and confirmation of criteria – a 'tick-box' approach – but rather 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 Panel

The peer panel was composed of:

Chair of Panel:	Ms Veronica Montebello
Peer Reviewer:	Ms Stephania Cuschieri
QA Managers (MFHEA):	Ms Fiona McCowan
	Ms Bilyana Boshova
	Mr Mahmoud Awad Attia

Specific Terms of Reference

As defined in the MFHEA Quality Audit Manual of Procedures, the panel was responsible for examining how the institution manages its 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 MFHEA;
3. the governance and financial sustainability of providers, including assurance about the provider's legal status, the appropriateness of corporate structures and the competence of staff with senior management responsibilities.

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 institution. The report therefore distinguishes between:

- Mandatory recommendations (MR) which are crucial to meet a Standard and **shall** be implemented within the timeframes indicated by the panel.
- Key recommendations (KR) which are important to improve a Standard and **should** be implemented expediently within the timeframes indicated by the panel.
- Recommendations (R) for improvement which are merely suggestions based on the panel's analyses and observations; these **could** be implemented by the institution.

Institutional Context

ESaT Ltd is an accredited institution licensed by the MFHEA to operate as a Further Education Institution under license number 2018-019. According to the MFHEA's licensing conditions, ESaT Ltd is officially based in Mosta, with an additional training facility located in Qormi. However, the recent audit was conducted at a different premises, situated in Pieta. The panel was informed that ESaT currently does not have its own training centre to deliver MFHEA-accredited courses. However, a room was rented to conduct training for students enrolled in the only course offered so far. The institution is currently in discussions to establish its own training facilities. The institution is also in negotiations and is close to finalising a partnership agreement with another educational institution. This collaboration is expected to enhance student enrolment and provide additional teaching and learning resources.

The current license, which initially spanned five years, has been extended by an additional year due to the ongoing audit process. The license is valid from 16th October 2018 to 15th October 2024. Under this license, ESaT Ltd is authorised to offer educational programmes up to Level 4 of the Malta Qualifications Framework (MQF), provided that these programmes receive formal accreditation from the MFHEA. The specific programmes offered under this license are as follows:

MQF Level 1: Elementary Award in English as a second language (ESOL) – 10 ECTS

MQF Level 1: Pre-Intermediate Award in English as a second or other language (ESOL) – 10 ECTS

MQF Level 3: Intermediate Award in English as a second or other language (ESOL) – 10 ECTS

MQF Level 4: Upper Intermediate Award in English as a second or other language (ESOL) – 12 ECTS

MQF Level 4: Proficiency Award in English as a second or other language (ESOL) – 14 ECTS

The student profile at ESaT includes secondary school students, pre-tertiary and tertiary students seeking formal certification to demonstrate their English language proficiency. It also encompasses adults who wish or need to obtain a certificate verifying that their English skills are sufficient for functioning independently in various academic and professional settings.

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

During the interviews with individuals in leadership positions, the panel learnt about ESaT's strategic plans for the coming years, which include several key initiatives. ESaT aims to expand its range of products and services to better align with market demands and to launch ESaT Language Training Centres in international markets. Additionally, the development and accreditation of online programmes are on the agenda. A significant focus will be on establishing an ESaT Language Training Centre in Malta. Regarding the timeline for enrolling students in MFHEA-accredited courses in Malta, the Head of Institution (HoI) stated that the goal is to achieve full operational status by April 2025. To ensure the successful implementation of ESaT's strategic initiatives, further development is needed in key areas. Specifically, comprehensive workforce planning must be established to identify and recruit the necessary talent and resources, and a detailed budget plan and an assessment of risks should be conducted to identify potential challenges and develop strategies to mitigate them. Lastly, operational plans need to be made explicit.

The panel received an updated Quality Assurance (QA) manual (April 2024), titled ESaT IQA (Governance) 04:2024, which had been revised a few weeks prior to the site visit. This document serves as a comprehensive repository of all the institution's policies, procedures and guidelines, meticulously organised according to the 11 Standards set forth in the National Quality Assurance Framework for Further and Higher Education (NQAF). This document is made available to the public since it can be accessed from the institution's website.

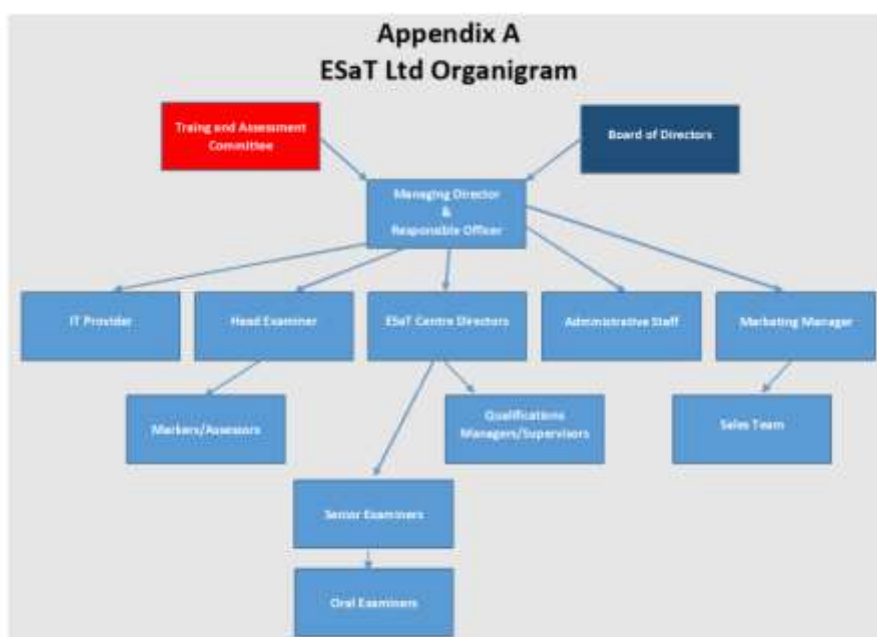
While the manual clearly details the development of these policies and procedures and demonstrates their alignment with NQAF Standards, the site visit highlighted that many of these practices have not yet been fully implemented across the institution. This lack of integration is particularly evident, as the institution has only conducted one course to date and has only had six students. Moreover, staff at ESaT is limited to the HoI and the Academic Director who were both involved in the development of the IQA manual. Consequently, there is limited evidence to support the consistent application, monitoring and review of the policies and procedures outlined in the IQA manual across the institution's training arm.

External stakeholder involvement in the IQA system of EsaT is currently very limited. The engagement of external stakeholders, such as employers, industry experts, alumni and partner institutions, in the IQA process is minimal and was not seen by the panel. Expanding their involvement could provide valuable insights and feedback, leading to more robust and comprehensive quality assurance practices which align with expectations and best practices.

On a more positive note, the panel did observe that a robust internal quality assurance system has been effectively implemented within the institution's testing and assessment processes, indicating a strong foundation upon which further integration of QA practices could be built.

While the panel acknowledges that ESaT has only recently begun offering accredited courses, it also observes a significant reliance on the HoI and the Academic Director for its operations. To address this, the panel recommends developing a contingency plan to ensure the institution's continued smooth operation in the event of unforeseen circumstances affecting these key individuals. Such planning will help mitigate risks associated with the institution's heavy dependence on just two people. As the institution's training division expands, it will be important to hire additional administrative and teaching staff.

The current organisational structure of the institution (represented below) does not accurately represent the actual operations in terms of the management of the accredited courses. For example, the Academic Director is not listed, and the training arm responsible for managing accredited courses is absent from the structure. The organigram mostly represents the Testing division of the organisation (testing English as a Second or Other Language). The organisational chart needs to be revised to include a clear and factual description of the roles and responsibilities of all components within the structure especially concerning the Training section (delivering MFHEA-accredited courses) of the institution.



A procedure to address and prevent any form of intolerance towards staff and students is outlined in the IQA manual. Based on the limited feedback from students, it appears that these principles are being upheld. No feedback from tutors was possible since the only tutor who carried out teaching on the MFHEA-accredited course run by the institution was not available.

Good Practice Identified

Nil.

Recommendations for Improvement

- MR1: ESaT shall, within 12 months from the date of publication of this report, develop a comprehensive strategy that integrates workforce planning, budget planning, assessment of risks and operational plans.
- MR2: ESaT shall, within 6 months from the date of publication of this report, further develop the IQA (Governance) document taking into consideration the feedback and recommendations from this EQA audit. The institution shall ensure that all internal and external stakeholders participate in this development to strengthen the institution's internal QA system.
- MR3: ESaT shall, within 6 months from the date of publication of this report, conduct a thorough review and restructuring of the institution's organisational framework to ensure it accurately reflects the actual operations within the institution and clearly delineates the roles and responsibilities of each component, especially those concerned with the delivery of the MFHEA accredited courses.
- KR1: ESaT should, within 6 months from the date of publication of this report, have a procedure in place ensuring that feedback from all external stakeholders is formalised and the information is fed back into the strategic management mechanism of the institution.

Conclusion

ESaT requires improvement to meet Standard 1.

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

Educational Services and Testing Limited (ESaT) is a limited liability company registered as such, under registration number C-55855. The Company which operates the ESaT is jointly owned by Jason Fenech at 44.88%, Istituto Stefanini SRL at 55.04%, and 1 share held by Rosaria k/a Lucy Fenech 0.08%. The Company's Director is the sole Director, Jason Fenech. The Istituto Stefanini SRL is wholly owned by Raffaele Iervolino. It purchased the majority of the shares in ESaT on 15th March 2022. The Memorandum of the Company lists the main objectives of the Company as: to establish and carry on the business of an examination body and provide examinations and certifications of language skills and to provide educational and teaching content and materials to schools, colleges, academies and other educational bodies.

An accounting expert appointed by the Authority analysed the financial statements provided. From a review of the documentation, it transpired that the Company is compliant with all its fiscal responsibilities in terms of the submission of FSS documentation, income tax and Value Added Tax and, at the time of the review, had no pending liabilities in their respect with the Commissioner for Revenue.

The Company provided a list of employees duly registered with Jobplus and, as such, was found compliant with these requirements. Still, the only employee of the Company is the Director, Jason Fenech. It is assumed that ESaT would require more employees once it starts its operations.

The Company was also fully compliant with regard to the submission of annual audited financial statements, as its 2022 accounts were presented to the Malta Business Registry (MBR) and the annual return for the year 2023 was also duly submitted to the MBR.

ESaT Ltd provided audited signed financial statements for the year ending 31st December 2022 and signed unaudited financial statements for the year ending 31st December 2023. The year ended 31st December 2022 showed that it was profitable, although in the year 2021 it made a small loss. In the unaudited 2023 account, no profit and loss statement was presented, so the auditor could not see and analyse the results for the year ended 31st December 2023.

An analysis of the financial position of the Company showed that from 2022 to 2023 the Company substantially increased its liquidity, and as of 31st December 2023, the Company had adequate cash resources and also a positive equity. In 2021, it started from a negative equity moving to a healthy positive one in 2023. Overall, it can be concluded that the Company had adequate financial resources to meet unexpected challenges.

From the organigram provided, ESaT Ltd has clearly outlined the responsibilities of the main roles within the Company structure. It is positive to note that the role of the IQA features prominently in the organigram.

The Memorandum and Articles of Association as registered with the MBR, clearly list the objects of the Company, that is, to carry out examinations, provide education services and operate its property within the scope of the school.

ESaT did not provide any financial and business plan for the years of 2024 onwards, so the auditor could not give any opinion on the soundness of the plans that the Director made for this venture. It just presented an unaudited financial statement for 2023.

The Company employs only one employee, being the Director. The personal, educational and professional profile of the Director makes him suitable and fit for purpose to carry out his roles and responsibilities. As to labour force, ESaT Ltd uses subcontracted labour instead of Company employees. No details were presented explaining the pool of subcontractors being utilised, so there is no list of qualifications, experience and competence of the staff being utilised. But the parent Italian Company has a complement of employees (10) in Italy that can be utilised if required.

Attention must be given to succession planning. Considering that only one employee is managing the whole operation, should the person be indisposed, the whole operation could stall.

Good Practice Identified

Nil.

Recommendations for Improvement

MR4: ESaT shall, within 12 months from the date of publication of this report, prepare adequate continuance and succession planning procedures to ensure that should anything happen to the sole Director, the Company operations will continue.

Conclusion

ESaT meets the requirements of Standard 2.

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 scope of this audit and report encompasses the MFHEA-accredited programmes previously mentioned in this document. These programmes clearly define the expected student workload in terms of ECTS credits and specify the target audience along with the eligibility criteria. As submitted to and accredited by the MFHEA, these programmes are structured around learning outcomes, distinguishing between knowledge, skills and competences. They also outline appropriate teaching methodologies, appropriate resources, and assessment strategies. Moreover, the approved programme documentation includes minimum qualification requirements for teaching staff.

The audit panel observed that the sole instructor/teacher who taught on the only delivered programme met the necessary qualifications and demonstrated competence in the subject matter. However, the panel was unable to interview this instructor as he was unreachable by the institution. The audit found that student progress is evident, as the accredited courses are structured to be progressively challenging, providing a clear pathway for students' academic advancement.

ESaT has established a formal, documented procedure, including a flowchart, within its IQA (Governance) document, for conducting market research and identifying the need for new programme development and accreditation. This process is primarily focused on creating and approving jTELS and TELS programmes, but the panel was informed that it also applies to MFHEA-accredited courses.

During the audit, the panel could not definitively determine the involvement of external stakeholders - who might benefit from these programmes - in the process of enhancing MFHEA-accredited courses, although this involvement appeared to be minimal. The panel was told that while ESaT is open to adjusting the mode of delivery to meet learner needs, the scope for modifying course content, however, is limited. This is particularly true for General English courses, which are closely aligned with the Common European Framework of Reference (CEFR) levels and corresponding 'Can Do' statements. Substantial alterations to content may compromise standardisation and recognition and could reduce interest in the courses ESaT offer. Hence the institution have thus far opted to adhere to industry expectations, which favour consistency with CEFR standards. Furthermore, students are not involved in the programme design process but do participate in the programme review through an online evaluation questionnaire provided to all students. The panel was shown examples of student feedback. However, since only one programme has been completed thus far, the panel could not assess the overall effectiveness of this feedback process.

Good Practice Identified

Nil.

Recommendations for Improvement

MR5: Within 12 months from the date of publication of this report, ESaT shall actively engage all relevant external stakeholders to ensure that its offerings remain aligned with evolving market demands and industry relevance.

MR6: ESaT shall, within 12 months from the date of publication of this report, maintain detailed records and minutes of meetings held with external stakeholders.

Conclusion

ESaT requires improvement to meet Standard 3.

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

Only one accredited course was run up until the day of the audit, with only six students attending. This indicates that the verbatim evidence supporting this Standard is, at best, limited. Notwithstanding, the course offered by ESaT included a variety of teaching methods and opportunities for students, as attested by the students themselves during interviews with the panel and the documents presented to the panel. The panel was informed that student diversity and special needs are catered for with regard to learning and assessment. During the interviews, the panel heard testimony showing that ESaT has supported a dyslexic student, ensuring his/her needs were met by assigning extra time during the assessment.

Documentation shows that ESaT has a number of assessment processes and policies in place relating to student-centred learning, teaching and assessment. These processes and procedures are intended to ensure fairness in assessment administration. A grading system is in place, and this is reflected in the certificate presented to students at the end of the course. The ESaT IQA (Governance) manual shows how course syllabi are published with comprehensive overviews of the test format and structure. Furthermore, the IQA manual provides detailed information to support effective assessment and learning processes. This includes resources such as the Writing and Test Construction Guidelines, Teacher Handbook, Candidate Handbook, Guidelines for Oral Assessors, and Guidelines for Markers and Assessors. These materials are designed to enhance the quality of teaching, assessment and overall learner experience. Notwithstanding, during the scoping and audit visit, the institution did not show the panel evidence of how all the measures were implemented during the delivery of the single accredited course which was run. This highlights the necessity for the institution to ensure compliance with the established IQA processes found in the IQA manual of ESaT and have evidence to show how these processes were implemented.

The panel noted an issue with placement tests, highlighted as a "weak link" during the interviews. This issue could undermine the goal of forming reasonably homogeneous groups. A robust placement process is essential for tailoring the learning experience to students' starting levels and ensuring balanced group composition.

During the interviews, it was also suggested that more time was needed for both the course and assessments, indicating a potential mismatch between the course design and learners' pacing needs. This feedback suggests the importance of incorporating more flexible pacing options.

ESaT has a documented Feedback and Complaints Policy as well as a Complaints and Feedback Procedure. This demonstrates a commitment to fairness and transparency, which are key to a student-centred approach. Feedback is gathered through the Complaint Form, Course Evaluation, and Teacher Observation. All feedback is analysed. Students complete mid-course and end-of-course feedback forms, allowing issues that arise mid-course to be addressed immediately. End-of-course feedback is used to make necessary improvements for future courses.

However, evidence of the implementation and practice of these policies is limited due to the constraints of having only one course with six students to date. The institution itself stated that data analysis and synthesis of possible opportunities for enhancing the learning process of students was not possible either in this restricted timeframe.

Good Practice Identified

Nil.

Recommendations for Improvement

- KR2: ESaT should, within 12 months from the date of publication of this report, revise and enhance the placement process to ensure students are grouped more effectively based on their abilities, reducing disparities within classes.
- KR3: ESaT should, within 12 months from the date of publication of this report, offer extended course durations or more flexible pacing options to accommodate students who need additional time.
- KR4: ESaT should, within 12 months from the date of publication of this report, take steps to ensure full compliance with the established IQA processes supporting students' active engagement and be able to show evidence of how the measures included are implemented.

Conclusion

ESaT requires improvement to meet Standard 4.

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

ESaT has a procedure related to student admission, progression and certification. The Application procedure falls within the remit of the Academic Director. It was pointed out to the panel that students did not sit for a placement test, and this led to shortcomings. As a result, two students out of the six managed to pass at the end of the course. During the interviews, a couple of students pointed out to the panel that they would have been better off in a different level as the one they were placed in did not align with their requirements and needs.

Students who join a course may be exempt from sitting from the placement test upon provision of proof related to successful completion of a recent accredited course one level lower than they are applying for. Students who satisfy all the requirements are registered via a Student Application Form and all bookings are channelled through the ESaT platform. Students receive an email confirming their registration. The induction process takes into consideration students with special needs and their requirements. There have been special cases which were admitted to courses offered by ESaT.

Students' progression is monitored and aided by means of a myriad of tools, namely, the Student Evaluation Report, progress tests, final assessment, satisfaction surveys and the Complaints Form. Students confirmed during the interviews that they sat for two progress tests. They also delved into the procedure of making a complaint either verbally or via email.

Given that ESaT offers courses which are not accredited, the panel was informed that students are provided with a Certificate of Attendance. With regard to the completion of the accredited course, students are provided with a course transcript and Certificate in line with the MFHEA regulations.

Good Practice Identified

Nil.

Recommendations for Improvement

MR7: ESaT shall, within 6 months from the date of publication of this report, provide and administer a placement test to students so as to establish the correct level.

Conclusion

ESaT requires improvement to meet Standard 5.

Standard 6: Teaching Staff

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

Main Findings

The panel was informed during the audit that the one and only teacher who taught the accredited course was not available on the day of the audit and inaccessible prior to the audit, hence the information gathered could not be verified through first-hand experience by the teacher himself. The information was gathered from management, and the documentation was provided by ESaT for audit purposes. ESaT has formal recruitment procedures for its personnel. The procedures stipulate the process for the recruitment and selection of staff. The Teacher Recruitment Handbook is a very resourceful tool which offers guidance in relation to the recruitment needs, advertising the calls for applications, receiving and processing the CVs, and preparing the interview.

The Academic Director is responsible for the assessment criteria at ESaT. The panel was informed that not all programmes developed by ESaT are accredited by the MFHEA. The assessment criteria include knowledge of subject matter, teacher motivation, communication skills, classroom management, level of cooperation between teacher and Academic Department, and punctuality. The panel was informed that teachers are observed from time to time and given feedback. Nevertheless, this could not be confirmed as the teacher who delivered lessons was not available for an interview.

The Academic Staff Minimum Requirements addresses the minimum requirements for each and every academic role. ESaT provides a Job Descriptor that ensures that personnel involved in the recruitment process understand the rights, duties and obligations of the role.

With regard to both Professional Development as well as Evaluation, no first-hand information was obtained, and the panel heard and read what is being planned in relation to both. With regard to Professional Development, ESaT is looking into having a sponsorship scheme for training purposes, namely, seminars and courses. It is also envisaged that Teacher Development Workshops will be provided with the aim of teacher growth, dialogue and reflection.

The panel noted that an observation was carried out during the course at Sprachcaffe. It is also the intention of the management to have a section dedicated to teachers as part of the ESaT platform. Student feedback is gathered through the student questionnaire.

Good Practice Identified

Nil.

Recommendations for Improvement

Nil.

Conclusion

ESaT meets the requirements of Standard 6.

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 panel did not have visibility of the physical school premises given that the course was run in conjunction with Sprachcaffe school and Learning Works in Qormi. The audit was held at Blackley's Boutique Offices in Pieta. The panel is not in a position to comment with regard to the sufficiency and suitability of premises, including accessibility, and its compliance to national regulations and the appropriateness of the physical facilities, including specialised rooms/areas. The panel was satisfied that ESaT demonstrated that it takes the needs of a diverse student population into consideration when planning and providing learning resources and support.

The panel was informed and presented with documentation whereby it is reiterated that students are informed about all learning resources and student support offered at every ESaT centre when they meet their teacher for the first time. It was noted that although ESaT's SAR states that administration staff are knowledgeable about programmes and procedures, neither the SAR nor the IQA describe processes intended to ensure that they are appropriately qualified and supported to develop their competences. During the interviews held with students, the panel was informed that the school premises had WiFi and other technological equipment, such as computers.

The persons who attended courses attested during the interviews that the provision and access to physical resources was appropriate. Lessons were held in person. The resources referred to were ESOL course books. Students were informed about the services offered at the school, and had words of praise for the level of support provided, namely tutorials, and assistance and guidance in relation to any queries and help required. The IQA indicates that students are provided with a Student Evaluation Report whereby they are provided with an overview of their strengths and weaknesses, progress and recommendations for improvement.

Good Practice Identified

Nil.

Recommendations for Improvement

MR8: ESaT shall, within 12 months from the date of publication of this report, have physical premises which are accessible and in compliance with national regulations.

R1: ESaT's SAR and IQA shall include processes intended to ensure that administration staff are appropriately qualified and supported to develop their competences.

Conclusion

ESaT requires improvement to meet Standard 7.

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 panel was not shown the physical online information and records onsite. Although ESaT has an online platform, they are working to further enhance it to support blended learning and improve student experience through better access to attendance, assessments, feedback and support services. ESaT's IQA and SAR state that due to the sensitive nature of student data, learners are required to consent to the storage of their personal data the first time they log on to the ESaT platform following the profile creation. The panel was informed that ESaT has recently updated its Data Collection and Privacy Policy. This will enhance awareness among learners, candidates and users of how data is handled and what happens to it, and also their rights. Qualifications Managers are responsible for the uploading of data for their Centre. The data is obtained through the Student Application Form, Needs Analysis, Placement Test, Progress Tests, Final Exam, Feedback Forms, Attendance and Copy of Identity. The data is regularly monitored by the Academic Director. An annual report is prepared by the Academic Director, which is presented to the Managing Director and Board of Directors. ESaT has a Retention Statement whereby it is stipulated that data which is anonymised may be retained up to 40 years to allow ESaT to carry out analysis of its products and services and also in the eventuality of replacement of certificates in case of loss or damage. ESaT also provides a Rights of the Data Subject. Learners, candidates and users are requested to inform ESaT of any changes referring to the personal data held by the data controller. They also have the right to request the blocking or erasure of data which has been processed unlawfully, as well as rectification of any inaccurate data.

Good Practice Identified

Nil.

Recommendations for Improvement

MR9: Within 12 months from the date of publication of this report, ESaT shall expand its online platform to incorporate comprehensive student records, ensure data retention, and enhance traceability. The institution may also consider involving students and staff in the collection, analysis and use of this data to support continuous improvement.

Conclusion

ESaT requires improvement to meet Standard 8.

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

EsaT has a website which serves as a key resource for providing information about the institution to the public, including details on English language testing (TELS for adults and children) and MFHEA-accredited courses. The website also functions as a promotional tool for these courses. Hosting and maintenance of the website are outsourced to an IT company specialising in software-as-a-service web-based business solutions.

The panel noted that the information on the website aligns with MFHEA requirements. The website includes essential details such as:

- student minimum requirements and selection criteria,
- learning outcomes,
- information on the EQF/MQF level of accredited courses,
- the number of ECTS credits,
- details on teaching, learning, assessments,
- opportunities for further studies.

The content is regularly updated based on feedback from the Hol, and ESaT reviews and validates all changes once implemented.

While the institution has not yet sought direct feedback from students regarding the usefulness of the website's information, students have responded positively when asked, indicating that they were able to find the information they needed. Incorporating questions about the website's effectiveness into the evaluation questionnaire would help ensure that the institution's website remains relevant and useful. The panel noted that the website is user-friendly, responsive and easily accessible from various devices. The information presented is clear, accurate, up to date and readily available.

Good Practice Identified

Nil.

Recommendations for Improvement

R2: ESaT could consider including questions about the website's effectiveness into the evaluation questionnaire used to collect student feedback.

Conclusion

ESaT meets the requirements of Standard 9.

Standard 10: Ongoing 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

ESaT has established theoretical frameworks for monitoring and periodically reviewing its academic programmes to ensure they meet established objectives and expectations. These frameworks are documented within the institution's IQA (Governance) document. However, the current procedure requires further refinement, particularly in specifying persons responsible for monitoring and review, timelines, and establishing a clear, systematic methodology. As only one course has been offered so far, the panel could not assess the effectiveness or practical application of these arrangements due to a lack of evidence.

The institution has initiated a process for collecting student feedback through questionnaires. However, since only one course has been offered with just six students participating, the limited data available restricts the ability to implement outcomes that could enhance the training provision. Feedback from other stakeholders, such as possible employers and other education institutions where students may continue their studies and alumni, has not yet been integrated. Therefore, ESaT has not yet formulated any recommendations for the improvement or further development of its programmes and has not yet fully implemented its monitoring and periodic review processes.

During the audit interviews, students expressed their overall satisfaction with the course they completed, noting that it provided valuable knowledge and skills that they believe will be beneficial in improving their future employment and education prospects. They appreciated the opportunity to participate in the course. However, some students found the course to be somewhat challenging, particularly given the condensed timeframe. They felt that extending the course duration could enhance their learning experience and allow for a more thorough exploration of the course content.

Good Practice Identified

Nil.

Recommendations for Improvement

- MR10: ESaT shall, within 6 months from the date of publication of this report, further develop the procedure for the monitoring and periodic review process of the courses it offers in the IQA (Governance) document. At a minimum, this revised procedure must include a more detailed methodology, specify the frequency of reviews, and identify the individuals responsible for conducting these reviews. Additionally, the process must incorporate input from both internal and external stakeholders.
- MR11: ESaT shall, within 6 months from the date of publication of this report, have a documented and formalised procedure for the monitoring and periodic review process of the IQA system of the institution, the QA processes and procedures. This must involve contributions from all internal and external stakeholders.
- KR5: ESaT should, within 12 months from the date of publication of this report, have a system in place to collect formal feedback from employers, other education institutions and alumni, which information is fed back into the management mechanism of the institution.

Conclusion

ESaT requires improvement to meet Standard 10.

Standard 11: Cyclical External Quality Assurance

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

Main Findings

ESaT has met this Standard by actively participating in the external audit process outlined in this report. This audit marks the institution's first cycle of External Quality Assurance (EQA). Throughout the audit, ESaT demonstrated a high level of cooperation, openly welcoming the panel and expressing a clear commitment to using the process to enhance their organisation and educational offerings.

The institution was transparent about its current stage of development, noting that it has only conducted a single course to date. As a result, many aspects of their QA processes remain theoretical and have yet to be fully implemented. A challenge that arose during the audit was the inability to contact the sole lecturer who had conducted training sessions. Consequently, the panel was unable to verify certain processes related to recruitment and teaching.

Despite these challenges, the stakeholders involved in the audit were consistently engaged and cooperative. Although there were understandable difficulties in recruiting students for the site visit, the panel was able to meet with one student online, while another provided responses to questions submitted to the MFHEA. This level of engagement from all parties involved contributed positively to the overall audit process.

Recommendations for Improvement

Nil.

Conclusion

ESaT meets the requirements of Standard 11.

Response by the Provider

Preamble

We feel it is important to start by commenting on the audit process. The members of the board carried out the audit in a very professional and supportive manner. All ESaT members interviewed/involved in the process confirmed the comments above.

Overall, we feel that the report is a fair reflection of the state of ESaT when assessed. We generally agree with the conclusions and will work to meet these recommendations, not only to adhere to MFHEA standards but more importantly, as we feel they can help us to continue to improve the service offered to the students and grow as a company.

Our new premises represent a new start. We are certain that, slowly but surely, the organisation will grow. Growth will allow us to recruit the human resources necessary to reach the targets that we originally set ourselves.

Response to Key Recommendations and Recommendations Made by the Peer Panel

Action plan		
Recommendations	Actions to be taken to address the recommendations	Date for completion
Standard 1:		
KR1: ESaT should, within 6 months from the date of publication of this report, have a procedure in place ensuring that feedback from all external stakeholders is formalised and the information is fed back into the strategic management mechanism of the institution.	The new procedure will be integrated into the updated IQA manual.	April 2026
Standard 2:		
Standard 3:		
Standard 4:		
KR2: ESaT should, within 12 months from the date of publication of this report, revise and enhance the placement process to ensure students are grouped more effectively based on their abilities, reducing disparities within classes.	Agreed. ESaT has a detailed set of procedures, which could not always be applied due to the 'temporary' setting. The issue with the audited group arose due to the collaboration ESaT had with another institution who had already carried out onboarding procedure. In future, all learners will follow standard procedure.	Nov 2025

<p>KR3: ESaT should, within 12 months from the date of publication of this report, offer extended course durations or more flexible pacing options to accommodate students who need additional time.</p>	<p>ESaT programmes apart from an efficient placement test, already incorporate progress tests to monitor progress and take remedial action when necessary. Our permanent premises, more focus on recruitment from abroad, with more long-term students, should guarantee a bigger school population and thus more flexibility in providing students with groups that better fit their needs.</p>	<p>Nov 2026</p>
<p>KR4: ESaT should, within 12 months from the date of publication of this report, take steps to ensure full compliance with the established IQA processes supporting students' active engagement and be able to show evidence of how the measures included are implemented.</p>	<p>A bigger student population will make producing evidence much easier.</p>	<p>Nov 2026</p>
<p>Standard 5:</p>		
<p>Standard 6:</p>		
<p>Standard 7:</p>		
<p>R1: ESaT's SAR and IQA shall include processes intended to ensure that administration staff are appropriately qualified and supported to develop their competences.</p>	<p>As we develop and grow, we will continue to develop our SAR and IQA to ensure that the client, organisation and human resources' needs are met.</p>	<p>Nov 2026</p>
<p>Standard 8:</p>		

Standard 9:		
R2: ESaT could consider including questions about the website's effectiveness into the evaluation questionnaire used to collect student feedback.	This recommendation will be implemented and a section added to our feedback forms.	March 2026
Standard 10:		
KR5: ESaT should, within 12 months from the date of publication of this report, have a system in place to collect formal feedback from employers, other education institutions and alumni, which information is fed back into the management mechanism of the institution.	We feel that this recommendation is useful and it will be implemented.	Nov 2026
Standard 11:		

Response to Mandatory Recommendations Made by the Peer Panel

Action plan		
Mandatory recommendations	Actions to be taken to address the recommendation	Date for completion
Standard 1:		
MR1: ESaT shall, within 12 months from the date of publication of this report, develop a comprehensive strategy that integrates workforce planning, budget planning, assessment of risks and operational plans.	<p>Now that we have our permanent premises, we are working on a comprehensive strategy that integrates workforce, budgeting, assessment of risks and operational plans.</p> <p>The revised plan should be completed by the first trimester 2026.</p>	March 2026
MR2: ESaT shall, within 6 months from the date of publication of this report, further develop the IQA (Governance) document taking into consideration the feedback and recommendations from this EQA audit. The institution shall ensure that all internal and external stakeholders participate in this development to strengthen the institution's internal QA system .	We will update the IQA reflecting the recommendations. We will include feedback from all stakeholders especially learners, teachers and agents. This might prove challenging until we get a constant stream of Long-Term Learners as at present, most of our clients opt for short-term courses. Once again, our own premises, not shared with other organisations will facilitate this process.	April 2026
MR3: ESaT shall, within 6 months from the date of publication of this report, conduct a thorough review and restructuring of the institution's organisational framework to ensure it accurately reflects the actual operations within the institution	The organigram will now slowly start to reflect the growth of the organisation. One must always keep in mind the size of ESaT. Due to obvious limitations, at present, staff cover various roles and responsibilities. Objectively, the company will see a complete team over 12 months. However, a more accurate organigram will be drawn up to reflect the actual situation and not what we are aiming for.	April 2026

and clearly delineates the roles and responsibilities of each component, especially those concerned with the delivery of the MFHEA accredited courses.		
Standard 2:		
MR4: ESaT shall, within 12 months from the date of publication of this report, prepare adequate continuance and succession planning procedures to ensure that should anything happen to the sole Director, the Company operations will continue.	At present, the Academic Director is responsible for the academic side, the Administration manager responsible for admin, whereas Raffaele Iervolino (one of the shareholders) is in charge of marketing. Jason Fenech, Director, oversees the whole operation. We believe that if something were to happen to Mr Fenech, the company would still be in a position to continue operations. As the company grows, an assistant will be employed to better cater for the needs of a bigger organisation. At present, we believe this would be an unnecessary burden.	Nov 2026
Standard 3:		
MR5: Within 12 months from the date of publication of this report, ESaT shall actively engage all relevant external stakeholders to ensure that its offerings remain aligned with evolving market demands and industry relevance.	Our courses are aligned with the CEFR. Most published material is aligned with the aforementioned standards. The CEFR is the industry standard and it is what learners and institutions expect. ESaT also offers other programmes that are industry specific (such as medical, business and legal English), which are, however, not accredited by the MFHEA. ESaT will, however, gather feedback from all stakeholders to ensure that the quality criteria are met and that courses align with customer expectation.	Nov 2026
MR6: ESaT shall, within 12 months from the date of publication of this report, maintain detailed records and minutes of meetings held with external stakeholders.	Where and when possible, ESaT will maintain minutes of meetings with agents, group leaders, students. This information will be transmitted to the relevant person to ensure that our programmes meet the set criteria and client expectations.	Nov 2026

Standard 4:		
Standard 5:		
MR7: ESaT shall, within 6 months from the date of publication of this report, provide and administer a placement test to students so as to establish the correct level.	Agreed. Administering a placement test is already part of the procedure. More care will be taken to ensure that nobody receives 'special' treatment.	Nov 2025
Standard 6:		
Standard 7:		
MR8: ESaT shall, within 12 months from the date of publication of this report, have physical premises which are accessible and in compliance with national regulations.	Our new premises are in 128 Triq is-Sirk, Swieqi. The premises are fully licenced to be used as a school.	Oct 2025
Standard 8:		
MR9: Within 12 months from the date of publication of this report, ESaT shall expand its online platform to incorporate comprehensive student records, ensure data retention, and enhance traceability. The institution may also consider involving students and staff in the collection, analysis, and use of this data to support continuous improvement.	It is a project we are currently working on and we are in discussions with a provider to incorporate their software with our existing platform.	Nov 2026

Standard 9:		
Standard 10:		
MR10: ESaT shall, within 6 months from the date of publication of this report, further develop the procedure for the monitoring and periodic review process of the courses it offers in the IQA (Governance) document. At a minimum, this revised procedure must include a more detailed methodology, specify the frequency of reviews, and identify the individuals responsible for conducting these reviews. Additionally, the process must incorporate input from both internal and external stakeholders.	Agreed, although we might need to extend the 6-month period until we have sufficient learners to ensure objective feedback. The lack of permanent premises has hindered our development of accredited programmes. We are now actively pushing, with the help of agents, to recruit more long-term students who would be focused on the MFHEA accredited awards.	Nov 2026
MR11: ESaT shall, within 6 months from the date of publication of this report, have a documented and formalised procedure for the monitoring and periodic review process of the IQA system of the institution, the QA processes and procedures. This must involve contributions from all internal and external stakeholders.	As in MR10, we will start with the first draft. This will definitely evolve as numbers grow and we gain more experience through bigger numbers. The present document needs to be tested on larger numbers before we can truly evaluate changes that need to be made.	Nov 2026

Standard 11:		

Annexes

Annex 1: Panel Bio Notes

In the setting up of the panel for Educational Services and Testing, the MFHEA sought to maintain a high degree of diligence in the process of selection of the members of the peer 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 MFHEA.

The following bio notes present the profiles of the members of the peer panel. The bio notes are correct as at the time the QA audit was carried out, in July 2024.

Chair of Panel: Ms Veronica Montebello

Ms Montebello is a visiting senior lecturer at the University of Malta teaching both online and face to face and is also a clinical supervisor with the Faculty of Dental Surgery and the Faculty of Health Science, University of Malta. She is a registered dental hygienist by profession who works in the public and private sectors. She held the position of Director designate at the Department of Programme Implementation, MFH and currently works at the Directorate Allied Health Care Services. Ms Montebello is the project leader of an ambitious ESF project. She has a degree in Dental Hygiene, Health Sciences, a Masters in Blended and Online Education (Edinburgh) and is pursuing a Doctoral degree. She is a Senior Fellow with the Higher Education Academy UK. Ms Montebello is involved in the development, delivery and evaluation of a number of online modules at UM and collaborates with various foreign universities to enhance educational programmes of study. She is actively involved with a number of European and international federations, committees and associations. She sits on the Council for the Professions Complementary to Medicine. Since 2016, Ms Montebello has been an expert panel reviewer and chairperson of several External Quality Assurance audits and programme evaluations for the MFHEA.

Peer Reviewer: Ms Stephania Cuschieri

Ms Cuschieri graduated with a BA (Honours) and PGCE, followed by a Master of Arts in Educational Leadership and MSc in Career Guidance. She has been working within the education sector for over twenty years. Over the span of time, she has occupied posts of Teacher, Assistant Head of School, and is currently an Education Officer within MFED.

Her role within the Education Resources Department is to ensure that human resources within non-state schools meet the requirements for teaching grade posts as per eligibility requirements in public calls. She is currently Chairperson of the Selection Board for the Position of Learning Support Educator I. She has taught EFL for ten consecutive summers. Subsequently she was appointed as Inspector for FELTOM-approved ELT schools. Her responsibilities consist of spot checks, review visits and full accreditation inspections, as well as compiling of reports to the FELTOM Accreditation Council.

Annex 2: Agenda of the Onsite Visit

EQA Audit Agenda

Educational Services and Testing

(Further Education Institution)

Date: 5th July 2024

Venue: [Blackley's Business Centre, Triq id-Duluri, Pieta](#)

Panel: Ms Veronica Montebello (Chair of the peer review panel), Ms Stefania Cuschieri (Peer reviewer)

Officers: Ms Fiona McCowan, Ms Bilyana Boshova and Mr Mahmoud Awad Attia (MFHEA officers)

08:30 - 09:00	MFHEA officers and the panel preparation meeting for the institutional audit
09:00 - 10:00	Meeting with Head of Institution - Mr Jason Fenech
10:00 - 10:15	Panel discussion
10:15 - 10:30	Meeting with student (online)
10:30 - 11:15	Meeting with Academic Director
11:15 - 11:30	Panel discussion
11:30 - 12:30	Meeting with External Stakeholders (online)
12:30 - 12:45	Panel discussion
12:45 - 13:15	Meeting with Administration and Finance
13:15 - 13:45	Working lunch and panel discussion
13:45 - 14:00	Meeting with students (online)
14:00 - 15:30	Panel discussion on the QA Report
15:30 - 15:45	Presentation of Initial Findings – Chair of panel and Head of Institution



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