MAURITIUS QUALIFICATIONS AUTHORITY

QUALITY ASSURANCE

FRAMEWORK FOR

THE TVET SECTOR

IN

MAURITIUS

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1.0 Background

The Mauritius Qualifications Authority (MQA) is a body corporate, established under Act No. 42 of 2001 and operates under the aegis of the Ministry of Education and Human Resources, Tertiary Education and Scientific Research. Its main objectives are to develop, implement and maintain a National Qualifications Framework (NQF); ensure compliance with provisions for registration and accreditation of training institutions; ensure that standards and registered qualifications are internationally comparable; and recognise and evaluate qualifications for the purpose of establishing their equivalence in the Technical and Vocational Education and Training (TVET) sector.

The vision of the Authority is to promote valued qualifications for employability and lifelong learning and its mission is to continuously enhance good practices and relevant expertise to safeguard public interest in quality education and training. The main functions of the MQA are, inter alia, to formulate and publish policies and criteria for the registration of bodies responsible for establishing national standards and qualifications and the registration and accreditation of training institutions; generate and register national standards for any occupation; register qualifications in the TVET sector; evaluate qualifications and recognise and validate competencies for purposes of certification obtained outside the formal education and training systems.

The MQA is governed by the Mauritius Qualifications Authority Act 2001, which has been amended by the Education and Training (Miscellaneous Provisions) Act 2005 and subsequently by the Mauritius Qualifications Authority (Training Institutions) Regulations 2009 and as amended in Business Facilitation (Miscellaneous Provisions) Act 2019. Additionally, the Conditions Governing the Registration of Training Institutions, Managers, Programme Officers, Registration of Trainers, Accreditation of Programme and Approval of Courses as well as the Quality Assurance Standards were previously implemented to ensure quality in training.

Given that Quality Assurance Standards have evolved over time and with a view to further promote quality education and training in TVET, the MQA had conducted two focus group discussions and has subsequently, developed a Quality Assurance Framework (QAF) for the TVET sector in Mauritius in line with international norms.

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2.0   Quality Assurance Framework

The Quality Assurance Framework (QAF) for the TVET sector in Mauritius acts as an instrument for registered training institutions to enhance their quality assurance processes benchmarked against international norms, in order to further promote quality education and training in Mauritius. It consists of the totality of principles, methodologies, actions, measures and instruments through which quality in TVET is assured, both at system and provider level.

The Quality Assurance Framework ensures quality assurance of the following (Bateman et al, 2012, Bateman & Coles, 2013):

(i)   the product through the accreditation of achievement standards (such as educational and/or competency standards as well as certification of a qualification);

(ii)   the education and training providers through registration processes based upon their infrastructure, financial probity and health, staff qualifications and experience, management systems, delivery systems, and student support systems;

(iii)   the monitoring and auditing of provider processes and outcomes, including student learning and employment outcomes as well as student and user satisfaction levels;

(iv)   the control, supervision or monitoring of assessment, certification and graduation procedures and outcomes;

(v)   provider or system wide evaluations of quality, including evaluations by external agencies; and

(vi)   the provision of public information on the performance of providers such as programme and component completions, student and employer satisfaction.

2.1   Need for a Quality Assurance Framework in Mauritius

With the growing importance of TVET all over the world and with the advent of the nine year schooling in Mauritius and in line with Government's 2030 vision, the TVET sector will have a much more important role to play in the education system.

In this context, there is an urgent need for the MQA to have a more robust quality assurance mechanism so as to meet the needs of the new education system.

Therefore, the Quality Assurance Framework has been developed in order to have an integrated set of policies, procedures, rules, criteria, tools and verification instruments and

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mechanisms which together ensure and improve the quality of training provided by registered and accredited TVET training institutions.

2.2 Aim of the Quality Assurance Framework

The aim of the framework is to ensure that MQA and training institutions work together to achieve and enhance the quality of TVET and to have a single unified quality assurance process for the promotion of the sector.

The Quality Assurance Framework comprises the following components:

(i) The QAF process;

(ii) Quality principles;

(iii) Self-Assessment Report;

(iv) Audit.

2.3 Objectives of the QAF

The objectives are:

(i) to enable Training Institutions to develop their internal quality assurance processes;

(ii) to have an instrument to better assess and monitor Training Institutions in order to provide high quality education and training.

Generally, it covers three pillars, namely:

(a) Content and learning methodologies;

(b) Delivery;

(c) Learner focus.

2.4 Benefits of the Quality Assurance Framework

For Learners:

- equal opportunities for all;
- increased employability;
- learning programme meeting learners' expectations;
- proper information about educational and training offer;
- responsibility regarding academic and professional evolution;
- teaching and learning processes are centered on learners.

For Employers:

- confidence in the provision of quality of TVET;
- TVET programme meet the demand of the employers;

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For TVET Providers:

- better control in offering TVET programme;
- improved satisfaction of stakeholders;
- provides a culture for continuous improvement;
- access to information about good practices and experiences of success.

For the Community

- transparency of quality in TVET programme;
- responsibility of TVET providers as key elements in TVET quality assurance;
- increasing attractiveness of TVET programme.

2.5   Definitions of Terms

(i)   Quality Assurance

Quality Assurance is a process (or set of processes) of enforcing quality control standards by applying the planned, systematic quality activities and working to improve the processes that are used in producing the web sites and its components, infrastructure and content. Quality assurance examines the processes of site implementation from inputs to output (European Commission, 2016).

(ii)   Quality Control

Quality Control involves the formal and systematic use of testing to measure the achievements of a specified standards and recommendations; the measurement and enforcement of defined level of standards (European Commission, 2016).

(iii)   Quality Assessment

Quality Assessment entails external assessment by peers of the quality of teaching and learning through the scrutiny of institutional documentation and student work, direct observation, interview, as well as reference to performance indicators (National Council for Higher Education, 2014).

(iv)   Quality Audit

Quality Audit is a process of checking or examining what goes on in an institution to ensure that there is institutional compliance with quality assurance procedures, integrity, standards

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and outcomes. The audit can be internal or external. (National Council for Higher Education, 2014).

2.6   The Quality Assurance Framework Model

The focus of the Quality Assurance Framework is on the performance of the TVET providers and of their learning programme. The model adopted for the Quality Assurance Framework for the TVET sector is a 4-phased process, including a methodology (Cedefop, 2010; Voinea et al, 2010; NCFHE, 2015) as shown in Figure 1.

Figure 1: The QAF Model
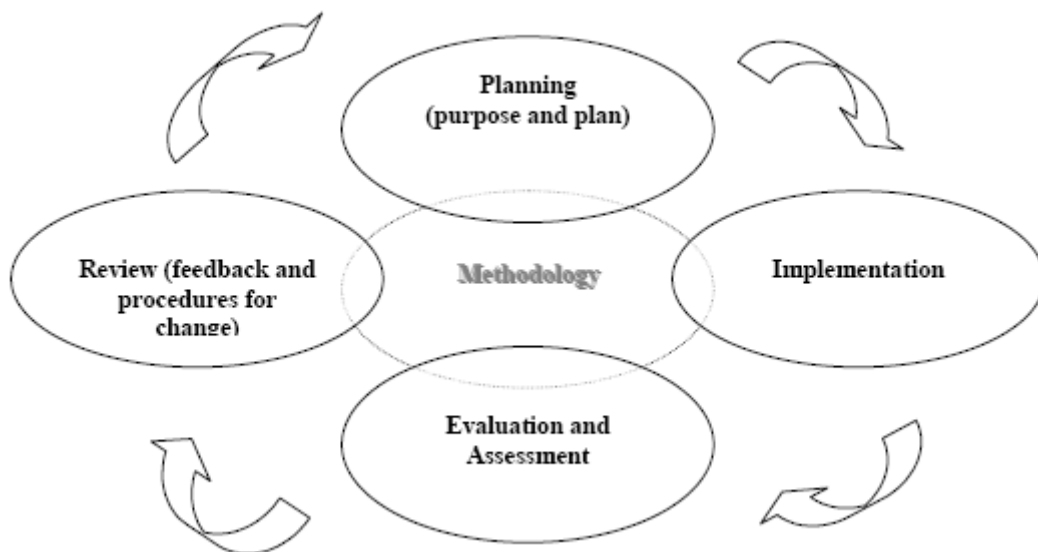
(i)   Phase I: Planning

Phase I relates to the setting up of clear and measurable goals regarding policies, procedures, tasks, and human resources. It also relates to defining input and output standards linked with goals to support the design and implementation of the quality assurance, as well as with providing reference points for certification of individuals or the accreditation of TVET institutions and/or programme.

Goals and objectives should be formulated in clearly understandable terms and as far as possible they should be combined with definitions of measurable indicators, as this allows for checking the achievement of the planned objectives, in later stages.

Quality in TVET is not primarily a technical issue. It is always linked to specific policy, institutional or/and individual goals and objectives which are to be achieved, according to different time frames. Therefore, it is crucial that relevant national, regional and local

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stakeholders take part in the decision- making process on goals and objectives concerning the quality of TVET.

Key questions that should be asked during this phase are as follows:
- Are your policy goals/objectives clear and measurable?
- What are the goals/objectives of your system/ institution in relation to TVET?
- How are these goals/objectives assessed?
- What is the procedure for the planning process within the quality approach in use?

(ii)   Phase II: Implementation

It is essential to establish key principles that underpin the implementation of the planned actions in order to ensure effectiveness in achieving the goals and objectives which have been planned. These principles have to be coherent with the goals that have been set.

Such coherence can be achieved in many ways, for example through regulations, funding incentives, provision of guidelines on how to proceed at local level, building capacity of key actors on quality issues through training, combination of internal quality systems at provider level with external inspections.

Whichever approach is chosen, it is essential that expectations are transparent and that the procedural steps, including time-spans and tasks to be fulfilled are clear for all the relevant factors involved. Developing ownership and personal motivation amongst staff, trainers and trainees, are important preconditions to achieve coherence between goals, objectives and implementation.

Key questions that should be asked are as follows:
- How do you implement a planned action?
- Describe the key principles in the procedure of the implementation process.

(iii)   Phase III: Evaluation and Assessment

It implies designing evaluation mechanisms according to the context, defining the frequency and scope of evaluations, and providing evidence of the findings of the evaluation to those concerned, including strengths, areas for improvement and recommendations for action.

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In general, the assessment and evaluation phase consist of two parts, i.e. the collection and processing of data and the discussions on the results which have been achieved. An important challenge is to avoid the collection of useless data.

The effectiveness of assessment depends to a large extent on a clear definition of the methodology and frequency of data collection, and on the coherency between data collection and the pre-defined indicators on the one hand and the goals and objectives to be achieved on the other hand. The relevant stakeholders, like current and former trainees, staff, employers and trade union representatives should be involved in the discussions arising from evaluation results.

Key questions that should be asked are as follows:
- What is the procedure for assessing:
  - Input
  - Processes
  - Output
  - Outcome results
- How do you ensure that your assessment and evaluation are relevant and systematic?
- Who are the stakeholders participating in the assessment and evaluation processes?
- What roles do the different stakeholders play?
- When do you monitor, assess and evaluate (frequency)?

(iv)   Phase IV: Review
Quality assurance and development is a continuous and systematic process. It must undergo constant review combining self-assessment with evaluation by an external body, processing feed-back and organising procedures for change.

Despite the fact that the other elements of the quality cycle are valuable only when conclusions are drawn, and lessons are learned and put into operation, the analysis of the quality management systems which have been reviewed so far, shows that in practice, this last phase of the cycle is quite often the weakest: i.e., revision of planning, fine-tuning of quality objectives and of quality management activities.

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A key factor in this process is to make available publicly the results of the quality assessment procedure and to foster an open debate with the relevant stakeholders on the factors which might have contributed to certain results. Furthermore, the organisation of benchmarking processes between comparable settings can strengthen mutual learning, especially when combined with incentives for good practices and for further improvement.

Key questions that should be asked are as follows:
- How do you organise feedback and procedures for change?
- How do you ensure systematic feedback?
- How do you make the feedback on quality in TVET transparent?
- How do you ensure that the results of the assessment/evaluation are being used?
- How do you relate goals/objectives to the assessment and evaluation?

(v) Methodology

This is an important transversal dimension which is present throughout all the elements of the model. It includes decisions about participation mechanisms, measurement and indicators; design of assessment and evaluation tools; procedures for planning, implementation and feedback; ways of combining all elements in order to create a unified system. The process culminates in the development of a Quality Manual for the training institution and subsequently in the development of the self-assessment report.

Key questions that should be asked are as follows:
- In what way do you use a systematic Quality Assurance approach?
- What is the role of self-assessment in your Quality Assurance approach?
- Who are the stakeholders involved in the different steps of your quality approach and in which roles?
- Which tools and procedures do you use for data collection, measurement, analysis, conclusions and implementation?
- How do you motivate the actors to play their role properly?
- What strategies assure the implementation of change?
- In what way do you use external assessment?

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2.7 Quality principles

The QAF is structured in 7 areas, referred to as quality principles (Cedefop, 2010, Voinea et al, 2010; National Commission for Further and Higher Education, 2015) as follows:

(i) Quality Management;

(ii) Management of Responsibilities;

(iii) Resource Management;

(iv) Design, development and revision of learning programme;

(v) Teaching, training and learning;

(vi) Assessment and certification of learning;

(vii) Evaluation and improvement of quality.

3.0 Self-Assessment

The Self-Assessment by a provider of its own programme and services is a fundamental part of its quality assurance system. The aim of Self-Assessment is to explore, reflect and report on the effectiveness of programme, services and the quality assurance system which supports them. In doing so, existing good practices can be identified and maintained while areas needing improvement can be identified and addressed.

The outcome of a Self-Assessment is two-fold:

(i) A Self-Assessment Report which will include findings and recommendations for improvement.

(ii) An Improvement Plan which will commit the provider to implement actions to build on the report's recommendations, thereby consolidating areas of good practice and addressing areas requiring improvement.

3.1 Objectives of Self-Assessment

The Self-Assessment serves the following objectives:

(i) the Self-Assessment outcome is an important document for institutional administrators to be used in development planning;

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(ii)   the outcome/s of the Self-Assessment should be reported to plan the budget and staff allocation;

(iii)   the Self-Assessment motivates the institution to develop further;

(iv)   the Self-Assessment creates confidence among learners, and among society, by demonstrating a focus on educational quality.

3.2   Purpose of Self-Assessment

The purpose of the Self-Assessment is to:

(i)   audit and certify the present situation and evaluate the quality of the institution using defined indicators;

(ii)   motivate continuous self-development;

(iii)   connect each sector of the institution in development plans.

3.3   The Self-Assessment Report

The Self-Assessment Report is based on the 7 areas of quality principles as follows (Cedefop, 2010, Voinea et al, 2010; National Council for Higher Education, 2015):

Quality Management;

(i) Management of Responsibilities;

(ii) Resource Management;

(iii) Design, development and revision of learning programme;

(iv) Teaching, training and learning;

(v) Assessment and certification of learning;

(vi) Evaluation and improvement of quality.

3.3.1 Quality Management

The management team of the training institution develops the mission, vision and values of the training institution. The team then develops the quality manual (the sum of all policies and procedures, strategic and operational plans and documentation regarding quality assurance) and monitors the implementation of the procedures.

It is crucial for a provider of education and training programme to have a commitment to quality and a system to translate the commitment into reality. Such a system will demonstrate that a provider understands what it means to deliver high quality programme and services in a regulated context and that the understanding is disseminated throughout the training institutions.

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The basic activities of a quality management system within a training provider will comprise:

(i)   Description of processes - i.e. documented policies and procedures;

(ii)   Monitoring of processes - i.e. regular checks on the effectiveness of policies and procedures. It is important that providers develop indicators/data which can be used to measure effectiveness;

(iii) Self-Evaluation - a process to collect information and data from a range of sources, including learners, staff, independent experts, employers and other providers which will contribute to a substantive and realistic evaluation of the process or programme being reviewed.

3.3.1.1   Policies and Procedures

Policies and procedures are generally the means by which an organisation communicates how it will operate a particular process or service. The distinction between them relates to the level of detail which they contain (Quality and Qualification Ireland, 2013).

A provider's policies and procedures should demonstrate that:

(i)   it has a clear understanding of its obligations, legislative and otherwise, in carrying out a particular process or service;

(ii)   the methodology it will follow in carrying out the process is clear and comprehensive with responsibilities assigned.

It is up to the providers to structure their policies and procedures in a form best suited to their own context and the needs and expectations of their learners.

(a)   Policies

A policy is a documented statement of a provider's principles and approach to a particular area of education/training. It should be consistent with the provider's overall Mission and should provide an underpinning rationale for staff working in that area particular. It is also a tool which a provider can use to inform current and prospective learners of what they can expect from that provider (Quality and Qualification Ireland, 2013).

Policies will not contain much detail regarding implementation methodologies but should demonstrate to the MQA and others that the provider has a full understanding of its obligations

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arising from legislation, particularly the Mauritius Qualifications Authority Act 2001 and related Regulations.

(b)   Procedures

Policy must be broken down into one or more clear and coherent procedures. These are statements of how the processes are to be carried out and their development will be informed by the relevant policy (Quality and Qualification Ireland, 2013).

A procedure covering any process should, at a minimum, specify the:

(i)   title - relates to the task(s) which it is designed to perform;

(ii)   method(s) - the action(s) used to fulfil the purpose of the procedure;

(iii)   responsibility - who carries out the action(s);

(iv)   indicative evidence - what can be checked by a monitor to confirm that the procedure is effective;

(v)   monitoring - by whom, how often, in what way, etc.

3.3.2 Management of Responsibilities

The management gets actively involved in quality assurance of learning programme. Partnerships with stakeholders are developed and maintained. Relevant information is collected, stored and analyzed regularly and communicated to stakeholders. There should be an effective financial management.

The training institution should demonstrate how management will exercise its responsibility to ensure effective resourcing and implementation of the quality system. There should be designated responsibility for specific role(s) with responsibility for quality management and should be identified in the organisation chart. In this section, training institutions are required to furnish details on the following items:

(i)   Governance

(a)   define ownership and governance structures;

(b)   manage in the best interests of the establishment;

(c)   anti-corruption policy.

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(ii) Mission and Vision

    (a) state its training activities within a written statement of the establishment's goals and objectives;

    (b) have performance indicators that will allow it to measure the achievement of its goals and objectives.

(iii) Ethical Standards

    (a) ensure that a copy of the code of practice is made available to each learner upon enrolment. This should cover the following aspects: educational standards, marketing, course information, recruitment, refund policy.

(iv) Financial Resources and Viability

    (a) A Business Plan where the financial projections would have to be clearly defined;

    (b) Evidence of necessary arrangements made for refund of course fees;

    (c) A well-defined refund policy in case learners withdraw from programme prior to and after the commencement date of a programme;

    (d) An audited account for the past 3 years as applicable.

3.3.3 Resources Management (Physical and Human)

The training institution provides learners with a safe and supportive environment. The learning spaces are properly equipped and meet the collective and individual needs of learners. The resources, teaching methods and the related premises allow the access and active participation of all learners. Staff is employed according to clear criteria (minimum standards regarding qualifications and experience) of recruitment and selection. Additionally, the organization defines job descriptions and the evaluation of staff performance is transparent. There is a staff policy that includes induction procedure and continuous training programme. The learning spaces are elaborated in the following sections.

3.3.3.1   Learning Environment

Training Institutions should provide conditions to facilitate a safe and sound learning environment. The learning environment shall include offices, safe classrooms, laboratories/workshops, common spaces, library and other facilities.

Training Institutions should ensure that they have at least one training room and one laboratory/workshop conducive for training.

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Training Institutions should also ensure that the learning environment at all locations where courses and programme on offer addresses issues relating to environmental conditions including:

   (i)   Proper access;

   (ii)   Safety and Security;

   (iii) Adequate lighting and ventilation;

   (iv)   Proper housekeeping and cleanliness;

   (v)   Control over noise and other distractions.

3.3.3.2   Human Resources

Training Institutions should ensure that they employ adequate staff (academic and administrative) with the necessary knowledge and skills to support student learning and to improve institutional effectiveness, including:

   (i)   Transparent evaluation of staff performance;

   (ii)   Staff policy that includes induction procedure and continuous training programme.

3.3.3.3   Technological Resources

Technological resources are used to support students in their learning process and to improve institutional effectiveness. Training Institutions should therefore ensure that any technology support they provide is designed to meet the needs of learning, teaching, communication, research and operational systems.

3.3.3.4   Health and Safety

Training Institutions should determine, maintain and comply with health, safety and security norms including:

   (i)   appropriate procedures and training for all staff members to implement emergency and crisis plans and handle accident;

   (ii)   applicable statutory and regulatory requirements;

   (i)   provision for emergency situations covering both indoor and outdoor activities;

   (ii)   health policies for staff and students.

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3.3.3.5   Financial Resources

Training Institutions should ensure that they have sufficient financial resources to support student learning programme and services. Training Institutions need to show the institution's overall budget, ensures financial stability and whether institutional resources are sufficient to ensure financial insolvency.

3.3.4 Design, Development and Revision of Learning Programme

The Training Institution is permanently concerned with the improvement of learning programme, to meet the needs of learners and staff (internal stakeholders) and of employers as well as the community (external stakeholders). The learning programme are centered on learners.

The core function of a provider of education and training is the development and delivery of programme which meet the needs of their learners. It is important that the quality of these programme is managed to ensure the best learning experience for learners.

A provider's policy on Programme Design, Development, Delivery and Review should inform the work of those staff engaged in the design and delivery of programme, so that programme are constructed and delivered to allow learners to achieve the learning outcomes specified. The associated procedures should address the following areas:

(i)   Need Identification

Programme should be developed after a thorough research to meet an identified need and in fields of learning in which the provider has capacity and expertise. Evidence of such research should be available to any management/governance committee reviewing a proposal for new programme development.

(ii)   Programme Design

All programmes should be designed and documented so as to meet the requirements of programme validation. Programme structure, delivery and assessment methodologies should:
- facilitate learners to achieve specified award(s);
- adhere to the provider's policies on access, transfer and progression and assessment;
- reflect the mission of the provider;

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- facilitate opportunities for learners, where appropriate, to practice skills in a real work environment.

All programmes should have Capacity to Succeed statements i.e. a clear statement of what is required from a learner who can expect to successfully complete the programme. In programme which will be delivered online, at a distance or where a significant amount of training time is spent on placement or in the workplace, the statement should make clear to learners the implications of these arrangements.

(iii) Provision and maintenance of learning facilities/resources

Programme resources necessary for successful participation by learners should be identified, documented and presented for approval through governance processes. The resources specified should be adequate and sustainable.

(iv) Programme Approval

All programme designs and documentation should be checked and receive approval from management prior to being submitted to MQA for approval/accreditation.

(v) Programme Delivery

The provider is responsible for ensuring that the programme objectives are being achieved and it is essential that the conduct of programme delivery is monitored in an effective manner.

Reports on assessment outcomes and learner feedback should be regularly presented for management review.

3.3.5 Teaching, Training and Learning

The Training Institution provides equal access to learning programme and supports all learners, preventing any form of discrimination. Learners receive complete information about the training provision and benefit from effective counselling and career guidance. Learners' rights and responsibilities are clearly defined. Learner-centered teaching and training methods are mainly used. Learners are encouraged to assume responsibility for their own learning process.

The quality of the learning experience of learners should be monitored on an on-going basis by providers and there should be a policy in place to facilitate this. The policy should state the

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provider's commitment to monitoring and improving the quality of teaching and learning on its programme and it should have associated procedures which clarify how the policy will be implemented. The procedures should address the following areas:

3.3.5.1   Staff Feedback

Staff should be encouraged and facilitated to reflect constructively on their experience of programme and to use such reflection to make improvements as required. It is important that such feedback be collected and presented for consideration by management.

3.3.5.2   Learners' Feedback

The views of learners should be canvassed on a regular basis and the feedback used to make programme improvements as required. The procedure should cover not just how feedback is gathered, but how it is analysed and acted upon as appropriate.

Feedback should be sought on issues such as:

(i)   Programme content;

(ii)   Delivery modes;

(iii)   Teaching and learning;

(iv)   Learning resources;

(v)   Assessment;

(vi)   Information;

(vii)   Support services;

(viii)   Accommodation for diversity - for example, non-native English speakers, people with a disability.

3.3.5.3   Feedback from other sources

It is important that the views of external stakeholders on the efficacy of programme be collected when possible. Possible sources include:

- Employers;
- Companies cooperating in work-based training;
- Learners who have completed the programme previously.

The provider should clarify how it will communicate and use the feedback gathered from staff, learners and others. The culture of self-evaluation/reflection with a view to improvement is to be encouraged at all levels of the organisation.

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3.3.6 Assessment and Certification of Learning

The Training Institution develops and uses effective processes of assessment and monitoring of learning, in order to support learners' progress. Trainers participate regularly in activities of standardization of assessment. Assessment and certification meet national standards and legislation requirements.

A provider must have adequate and appropriate processes for the assessment and certification of learner's achievement and for the approval of assessment results. It must be able to demonstrate that the assessment is fair and consistent; that it is in accordance with national standards and that learners are kept informed of expected outcomes and of their progress in achieving them.

The provider's Policy on Assessment of Learners should express its commitment to carry out assessment so as to be:

- Understood by staff and learners
- Fair to learners, in terms of access and process
- Internally verified as fair and consistent
- Externally authenticated as consistent with national standards
- Consistent with the Awarding Body assessment policy and guidelines.

The associated procedures should address areas as spelt out in the following sub-sections:

3.3.6.1   Information to Learners

All pertinent information relating to the assessment process should be available to learners' prior to assessment commencing. This information should include details of:

(i)   assessment methods and schedules;

(ii)   assessment calendar, including expected certification date;

(iii)   assessment briefs and grading criteria;

(iv)   appeals process;

(v)   policy on repeats;

(vi)   learner responsibilities in relation to assessment;

(vii) reasonable accommodation available.

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Learners must be made aware of the Certification award(s) to which the programme leads and of the assessment and grading requirements, so as to facilitate learners to maximise the value of their assessments across the programme.

3.3.6.2 Security of assessment related processes and material

Assessment procedures and systems should incorporate mechanisms for the secure recording, storage and access of learners' assessment records; in particular it should ensure that the security and integrity of:

(i)   assessment materials i.e. test/assignment briefs, exams etc;

(ii) assessment processes i.e. supervision of tests, verification of authorship etc;

(iii) learners' work i.e. assignments, practical tests, examination scripts, project work etc;

(iv) records of learners' assessment.

3.3.6.3 Consistency of marking between assessors

The grading of learners' assessments should be performed in a fair and consistent manner. This will involve comparison of results achieved across a range of learners and assessors to ensure consistency of marking. This may be done in a variety of ways depending on the centre's context. For example: programme team meetings, cross moderation or sampling by an internal verifier.

3.3.6.4 Workplace Assessment

Assessment carried out by workplace supervisors and/or employers should be verified, to be fair and consistent with the learning outcomes of the specified award(s). It is crucial that such assessment be planned and workplace assessors have sufficient briefing, information and materials to conduct valid assessment.

3.3.6.5 Assessment of Distance/e-learning based programme

Providers who plan to offer programme on a distance/e-learning basis must demonstrate capacity to ensure the validity and consistency of assessment when carried out on this basis. It is particularly important that a provider, who intends to offer programme where much of the skills assessment is done on work placement, sets out clear procedure(s) addressing:

(i)   approval of assessment arrangements - assessor capacity and training / assessment resources;

(ii) verification of ownership of learner work.

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3.3.6.6 Internal Verification

It is crucial that providers ensure that all assessment processes have been applied consistently and that the accuracy of assessment outcomes and records is verified. This systematic checking of assessment processes by a provider is referred to as Internal Verification (IV). Practice has shown that many errors occur between the carrying out of an assessment and its subsequent submission for certification. These errors can be picked up and corrected by systematic IV procedures. Examples of checks to be carried out during IV include:

(i)   missing or inappropriate evidence;

(ii)   missing or inappropriate assessment briefs;

(iii)   data omission, transcription/calculation errors;

(iv)   learner ID conflict;

(v)   inaccurate data entry - award codes, name spelling, results etc;

(vi)   grading inconsistency between assessors.

3.3.6.7 External Authentication

Once Internal Verification is completed, providers must ensure there is objective and authoritative confirmation of fair and consistent assessment of learners in accordance with national standards. This confirmation is to be carried out by an external authenticator appointed by the provider. Providers should have a policy on appointment of authenticators to ensure that anyone appointed to the role has relevant subject matter expertise and can give independent feedback on the standard of learners' work and of the assessment process as carried out by the provider.

The authenticator will have access to reports arising from the internal verification process. S/he will produce a report and may recommend that grades be changed and / or that assessment procedures require to be amended.

3.3.6.8 Results Approval

Providers have responsibility for assessment and must formally approve the outcomes for certification. A Results Approval Panel should be included as part of provider governance which will be representative of management and programme staff.

After each assessment period, the Panel should review learner outcomes in light of input from programme staff, internal verification report(s) and external authenticators' report(s). Part of the review should include comparative grade analysis.

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3.3.6.9   Feedback to Learners

Individual learners should provide timely and constructive feedback on their assessments which informs their participation on the programme. The feedback should be appropriate to the nature of the assessment i.e. formative or summative.

3.3.6.10   Learner's Appeal

Providers should have an appeal procedure to be used by learners to plead an assessment result which they consider to be unfair. This procedure should be communicated to learners as part of their programme information.

3.3.7 Evaluation and Improvement of Quality

The performance of the training institution is evaluated and monitored. Following the identification of weaknesses through the evaluation process, improvement measures are developed. These are implemented and monitored, as part of a new cycle of quality assurance.

Evaluation is a fundamental part of quality assurance system. It is a way of developing through constructive questioning leading to positive recommendations and improvement planning. It should be viewed as a process primarily for the benefit of current and future learners and the provider staff.

Evaluation is a structured and systematic process to explore, reflect and report on the effectiveness of an activity. It aims to capture, interpret and disseminate learning from any action undertaken. It seeks to identify good practice and to use the findings to inform future policy and practices.

Evaluations will seek to:
- Engage stakeholders
- Gather credible evidence from a range of sources
- Draw and justify conclusions
- Make recommendations for improvement
- Ensure the use and sharing of lessons learned.

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3.3.7.1   Statistics

With an aim to quality assure procedures, all Training Institutions shall have to maintain and submit statistical records, targets to be achieved and standards for results obtained and indicators that may be used to measure performance. This shall include clearly defining and keeping appropriate records of the following:

     (i)   Programme aims and learning outcomes ;

     (ii)   Curriculum design and delivery;

     (iii)   Number of students enrolled per programme;

     (iv)   Assessment Details;

     (v)   Academic staff;

     (vi)   Educational resources;

     (vii)   Internal programme monitoring and review;

     (viii) Governance and administration; and

     (ix)   Continual quality improvement.

3.4   Process of Self-Assessment

The Self-Assessment is an important tool to measure quality and must be implemented effectively, in order to be accepted by stakeholders.

In order to conduct the Self-Assessment successfully, the evaluation follows three steps:

     (i)   Before annual self-assessment

         •   Make the annual plan

         •   Set up self-assessment committee

         •   Collect Data

     (ii)   During Self-Assessment

         •   Prepare documents and data based on standards

     (iii)   After annual Self-Assessment.

         •   In cases in which an institution does not have a quality assurance system in place, a preparatory step will first need to be implemented.

         •   Complete self-assessment report and an audit portfolio to send to the MQA

3.5   Internal Monitoring

Internal monitoring should act as an early warning system and identify areas of provision that are delivering quality and those that are not. To be able to do this, a provider will need to

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identify a measure of quality appropriate to the area and which can be checked during monitoring.

For example: learner satisfaction ratings, certification rates, relevance of outcomes to the market place, error levels etc. Where the measure indicates that quality is lacking, then remedial action needs to be identified and taken.

Training institutions should set up a panel to conduct the internal monitoring based on the self-assessment report and make recommendations if any.

4.0   Performance Indicators

A list of indicators has been developed to assess the quality of TVET systems as follows:

(i)   Relevance of quality assurance systems for TVET (Technical and Vocational Education and Training) providers

(ii)   Investment in training of teachers and trainers

(iii)   Participation rate in TVET programme

(iv)   Completion rate in TVET programme

(v)   Placement rate in TVET programme

- Proportion of TVET programme completers who are placed either in the labour market or further education and training within 12-36 months after the end of programme. A large period of transition to the world of work is required to measure the external effectiveness of education, especially in high level training;

- Percentage of TVET programme completers who are employed after the end of training.

(vi)   Utilisation of acquired skills at the workplace

(vii)   Unemployment rate

(viii)   Prevalence of vulnerable group

(ix)   Mechanisms to identify training needs in the labour market

- The indicator shows information on Mechanisms set up to identify changing demands at different levels and how the Mechanisms are effective.

(x)   Schemes used to promote better access to TVET

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5.0 Institutional Audit: External assessment

The Institutional Audit is concerned with the quality assurance systems developed by institutions, based on their own diagnosis, assumptions and interests. The audit focuses on the quality assurance procedures, policies, systems, strategies and resources for the management of the quality of the core functions of teaching and learning, research and community engagement, as well as academic support services. More specifically, institutional audit seeks to assess an institution's capacity for quality management of its academic activities in a manner that meets its specified mission, goals and objectives, and engages appropriately with and responds to the expectations as well as needs of various internal along with external constituencies. The Audit exercise will be carried out against an audit fee.

5.1 Areas to be Quality Assured

Areas	Issues
Quality Management	Management Responsibility Designated Responsibility Information Management
Staff Recruitment and Development	Staff Recruitment Communication with Staff Staff Development
Teaching and Learning	Staff Feedback Learner Feedback Trainer Feedback Learning Resources
Programme Development, Delivery and Review	Programme Development & Approval Programme Delivery Learner Records Programme Review
Fair and Consistent Assessment of Learners	Planning Information to Learners Security Distance/e-learning assessment Feedback to Learners Internal Verification External Authentication Results Approval Learner Appeal
Protection of Enrolled Learners	Protection of Enrolled Learners
Self-Evaluation and Improvement of Programme and Services	Assignment of Responsibility Frequency Learner Involvement Reporting

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5.2   Audit Process

5.2.1 Composition of the Audit Panel

The Audit Panel shall constitute MQA Officers and subject specialist/s.

5.2.2 Pre-audit preparation by Audit Panel

Audit panels will have appropriate pre-audit preparation activities, including an audit portfolio meeting, to ensure that members are familiar with the contents of the audit portfolio, to establish strategies and procedures to be followed during the audit, and to clarify their respective roles and responsibilities for the audit. The portfolio meeting will also enable the audit panel to identify particular focus areas for evaluation, given the mission, goals and level of development of the institution to be audited. Pre-audit preparation also serves to finalise the programme for the visit and to identify any additional information that the panel may wish to request from the institution.

5.2.3 Audit Visit

Audit visit will be scheduled in year two of the registration period in order to validate statements and claims made in the audit portfolio, the audit panel will conduct interviews with staff, students and other role-players; scrutinise documentation that is made available on-site.

5.2.4 Audit report

On the basis of the quantitative and qualitative evidence gathered during the audit, the audit report will be developed by the MQA. The report will provide an assessment of the adequacy and effectiveness of the internal quality arrangements of the institution, as well as commendations and recommendations in the various target areas of the audit. Before finalisation, a draft report will be presented to the institution for comment on factual errors, discrepancies and omissions. The final audit report will thereafter be presented to the institution. A summary of the report will be published on the MQA website.

5.2.5 Outcome of the Audit

Training institutions may be requested to:
   (i)   Bring no amendments to their systems;
   (ii)   Bring amendments within a set deadline.

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In case training institutions fail to comply with the instructions given, the MQA shall take any action which may be deemed necessary.

6.0 Registration of Training Institution

(i) It is mandatory that Training Institutions should have at least ONE training room and/or ONE laboratory/workshop with all amenities, ONE full time trainer and ONE full-time non-academic staff.

(ii) The building should be structurally sound and conducive for training.

6.1 Requirements for Registration of Training Institution

6.1.1 Documents to be submitted

Any organisation willing to provide training is required to be duly registered with the MQA and should submit the following:

(i) Complete application/s on MQA's prescribed form/s for:

    (a) Training Institution

    (b) Accreditation of Programme/s

(ii) Processing fees as per schedule of fees

(iii) List of Trainers

    Trainers should be appropriately qualified staff for each course.

(iv) List of non-training staff

    Support staff present for the day to day operation of the training institution, wherever applicable

(v) A List of Programme/s to be dispensed.

    Note: Award programme will be accredited subject to satisfying criteria for programme accreditation.

(vi) Organisation's legal document/s

    Note: Organisations should exist as a legal entity and copy of registration as a company/association should be submitted.

(vii) List of Owners/Shareholders/Directors

(viii) Business Registration Certificate (where applicable)

    Nature of business should be specific to technical, vocational and professional training

(ix) Fire Clearance Certificate

    The Fire Clearance Certificate mentioning 'training' as intended use to be submitted.

(x) Site plan/s

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Site plan should indicate the exact geographical location/s of the organisation

(xi)   Layout of premises

(xii)   A refund policy

Evidence of system in place for refund to trainees

(xiii) An Insurance Cover

Public Liability Insurance Cover against accidents/hazards occurring within the premises of the training institution.

(xiv)   Self-Assessment Report

6.1.2 Manager

A person can act as Manager for only one (1) training institution at a time.

6.1.2.1   Requirements for Manager

The training institution should ensure that the Manager:

(i)   is resident in Mauritius;

(ii)   is of good character (A Certificate of Character to be produced at time of every application);

(iii)   has five years training/teaching/managerial experience;

(iv)   has appropriate qualifications;

(v)   is medically fit (Medical Certificate).

Note: The Certificate of Character is waived for Mauritian applicants employed by Governmental/Parastatal training institutions, private training institutions delivering internal training only and foreign applicants having resident permit or having worked for international institutions (e.g. UN, Embassy).

6.1.3 Programme Officer

A person can act as Programme Officer for only one (1) training institution at a time

6.1.3.1   Requirements for Programme Officer

The training Institution should ensure that the Programme Officer:

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(i)   is resident in Mauritius;

(ii)   is of good character (A Certificate of Character to be produced at time of every application);

(iii)   has two years training/teaching experience;

(iv)   has appropriate qualifications;

(v)   is medically fit (Medical Certificate).

Note: The Certificate of Character is waived for Mauritian applicants employed by Governmental/Parastatal training institutions, private training institutions delivering internal training only and foreign applicants having resident permit having worked for international institutions (e.g. UN, Embassy).

6.1.4 Trainer

The Training Institution should ensure that the Trainer:

(i)   is resident in Mauritius
(ii)   is good character
(iii)   is medically fit (Medical Certificate)
(iv)   provides copies of qualifications (originals will be verified)
(v)   has evidence of working experience

6.2 Process for Registration of Training Institution

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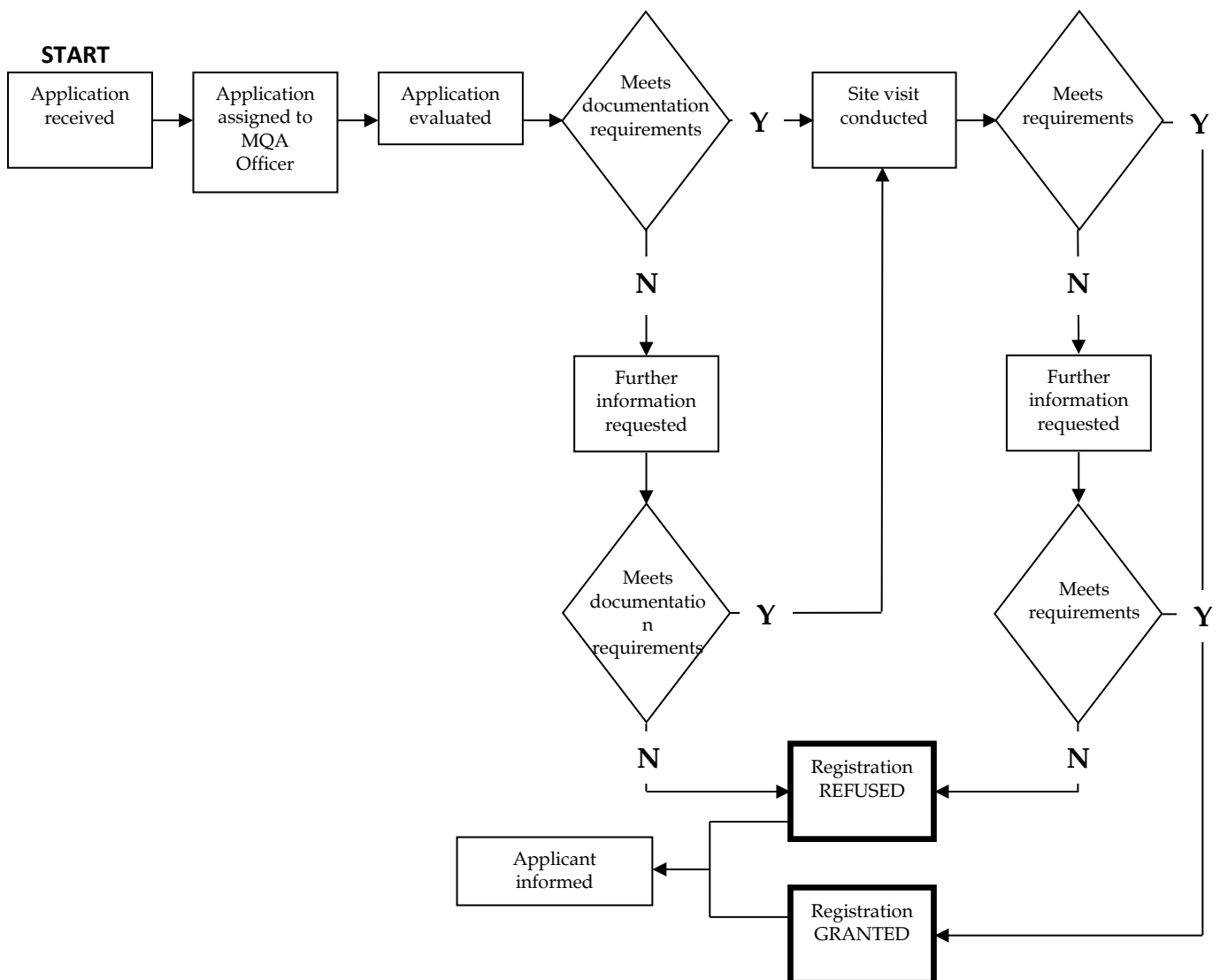
6.3 Training Institution Registration Decision

Registration of training institution may be

- granted for a period valid up to three **(3) years** subject to continued compliance with conditions and regulations, or

- refused

6.4 Cessation of training activities

Registered training institutions wishing to cease operation should inform the Authority in writing preferably three (3) months prior to the date of closure and should ensure that all trainees have completed their course/programme or should make alternative arrangement acceptable to the Authority.

6.5 Renewal of Registration as Training Institution

Applications for renewal of registration as training institutions should be submitted at least 3 months before expiry of the registration period together with the following:

(i) Complete application/s on MQA's prescribed form/s for:

(a) Training Institution

(b) Accreditation of Programme/s

(ii) Processing fees as per schedule of fees

(iii) An updated list of Trainers

Trainers should be appropriately qualified staff for each course.

(iv) An updated list of non-training staff

Support staff present for the day to day operation of the training institution, wherever applicable

(v) A list of Programme/s to be dispensed.

Note: Award programme will be accredited subject to satisfying criteria for programme accreditation.

(vi) List of Owners/Shareholders/Directors if amended

(vii) Fire Clearance Certificate

An updated Fire Clearance Certificate mentioning 'training' as intended use to be submitted, if any.

(viii) An updated Insurance Cover

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Public Liability Insurance Cover against accidents/hazards occurring within the premises of the training institution

(ix)   Self-Assessment Report.

6.6   Appeal

Any appeal should be made as per provisions made under the MQA Regulations within 21 days of the decision of the Authority.

7.0   Accreditation of Programme

Accreditation is the process by which the Authority evaluates the quality of an education institution as a whole or of a specific educational programme in order to formally recognize it as having met certain predetermined minimal criteria or standards. The result of this process is usually the awarding of a status (a yes/no decision), of recognition, and sometimes of an authorisation to offer a programme within limited period of time. The process can imply initial and periodic self-study and evaluation by external peers. The accreditation process generally involves three specific steps:

(i)   a self-evaluation process conducted by the faculty, the administrators, and the staff of the institution or academic programme, resulting in a report that takes as its reference the set of standards and criteria of the accrediting body;

(ii)   a study visit, conducted by a team of peers, selected by the accrediting organization, which reviews the evidence, visits the premises, and interviews the academic and administrative staff, resulting in an assessment report, including a recommendation,

(iii)   an examination of the evidence and recommendation on the basis of the given set of criteria concerning quality and resulting in a final judgment and the communication of the formal decision to the institution and other constituencies, if appropriate.

Accreditation is intended to protect the interests of students, benefit the public, and improve the quality of teaching, learning, research, and professional practice. Through its domains and standards, the accrediting body is expected to encourage institutional freedom, ongoing improvement of educational institutions and training programmes, sound educational experimentation, and constructive innovation.

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The accreditation process involves judging the degree to which a programme has achieved the goals and objectives of its stated training model. That is, an accreditation body should not explicitly prescribe a programme's educational goals or the processes by which they should be reached; rather, it should judge the degree to which a programme achieves outcomes and goals that are consistent with its stated training model and with the guiding principles contained in this document. If a programme's goals and model of training are clearly and accurately described, the different target groups served by this programme should be able to make intelligent and informed decisions about the quality of the programme and the students it trains.

7.1 Requirements for accreditation of programme run through collaborative arrangement

All registered training institutions willing to offer award courses should submit their application for accreditation as prescribed by MQA and should submit the following:

(i)   Need for the programme in Mauritius;

(ii)   Evidence of recognition of qualification in the country of origin;

(iii)   Agreement with awarding body;

(iv)   Agreement with the examining body, if applicable;

(v)   Detailed procedures and scheme of assessment;

(vi)   Detailed procedures for the moderation of the programme, both internal and external;

(vii) Copy of sample certificate for the programme applied for;

(viii) Evidence of arrangement made for placement of trainees, if any;

(ix)   An audited account for the past 3 years;

(x)   A well-defined refund policy in case learners withdraw from programme prior to and after the commencement date of a programme;

(xi)   Signed agreement with trainers;

(xii) Evidence of necessary arrangements made for refund of course fees;

(xiii) Collaborative Arrangement Requirements;

(xiv) A course calendar together with a detailed time-table specifying venue, time and name of trainer.

(xv) Course Details Requirements Report where providers have to ensure the following:

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The programme:	a) Is based on the needs of learners and other stakeholders;
	b) Has appropriate content, teaching and learning strategies, resources and assessment activities;
	c) Compromises any off-site practical or workplace components;
Learning outcomes:	a) Are specified and also the expected standards of achievement;
	b) Are achievable within the timeframe of the programme.

(xvi) Course Delivery Requirements Report where the following factors and must be elaborated based on the details below:

Factors	Details
Staff	a) Evidence that training staffs are fully qualified in the relevant field. Agreement between trainer/s and the provider valid for the programme being run (evidence required)
Facilities	a) Training premises are adequate for training purposes and comply with the applicable laws relating to the occupational health and safety of persons on the premises and have licenses as issued by the relevant authorities including insurance cover.
	b) The environment is conducive to teaching and learning is easily accessible to trainees and provision has been made for accessibility for disabled people.
	c) Evidence of licensing agreement between the training institution and the licensor wherever applicable.
	d) Photocopying facilities and teaching aids such as overhead projector, board, multimedia computer, projector, video & audio equipment, and laboratory are available as applicable.
	e) Resource centre consisting of up to date books, magazines, CDs etc... relevant to the courses being delivered.

Course delivered at different Sites	The course provider should ensure that: a) all sites are integrated into a single coherent quality management system; b) all sites are accountable to a single management body; c) there is a clearly designated head office; d) there are clearly identified lines of reporting and accountability between the sites and head office; e) the name of the organisation is clearly displayed and used at each; f) records are accessible at the central management body; g) students at each site know they are enrolled as part of a multi-site establishment; h) students and others know where and how to contact the head office and there are no unreasonable barriers to this; i) all advertising and documentation, including letterhead page, indicate the multi-site nature of the establishment.
Face to Face contact	The provider should ensure that: a) For programme delivered on a part time basis, students should spend at least 12 hours per week at the training institution (evidence required); *b)* For programme delivered on a full time basis, students should spend at least 25 hours per week at the training institution (evidence required).
Distance mode	The provider should ensure that: a) programme development and review processes that take cognizance of the mode of delivery; b) learning resources that are appropriate for the particular mode of delivery; c) learner information and support systems that ensure learners working in isolation receive the necessary level of support and guidance; d) recruitment and selection of staff with experience in distance learning; e) systems for monitoring student satisfaction that are appropriate for the needs of distance learners; f) systems for recording student progress and final achievement that are appropriate.
E-learning	In addition to the above, in case courses are being delivered through e-learning, there should be in place the minimum requirements that include: a) PCs; b) CDs, DVDs, TV, Video, Telephone etc (as applicable); c) Main Server, Network set-up (as applicable);

	d) Relevant Software & its corresponding licence; e) Facilitator.
Online mode	In addition to the requirements of distance learning and e-learning, in case courses are being delivered through online mode, there should be in place the minimum requirements that include: a) High speed Internet with most recent browser (if applicable); b) Trainer (facilitator).

(xvii) Course Evaluation Report

The provider should submit a report where the followings criteria are taken into consideration:

a) feedback is regularly obtained from learners, employers, moderators and auditors, and analysed and acted upon as appropriate (evidence required);

b) procedures are present for systematically monitoring and evaluating all programme to sustain relevancy and using results to improve learning outcomes and achievement;

c) have processes for monitoring learner and stakeholders satisfaction with the quality of education and training provided;

d) have procedures for keeping qualifications and programme content current with needs of the workplace;

e) submit an evaluation report after course completion.

(xviii) Institutional Requirements Report

The Training Institution should:

a) ensure that learners fully understand what is required from them in their course of study;

b) identify learners' specific learning needs and plan how to address those needs to ensure they have a reasonable chance of success;

c) deal with learners fairly and equitably;

d) provide access to guidance, support systems and welfare services that, inter alia:

- protect students and the public from any physical, cultural, psychological, moral or emotional harm that may result from the teaching programme or related activities;

- respond appropriately to identified skill gaps or lack of learner achievement;

- provide support and guidance appropriate to the method of delivery for each particular course of study so learners can plan their learning programme to achieve their goal;

- inform students of guidance, support, welfare services and health and safety procedures;

- keep students' records.

(xix)   Quality Assurance Requirements

The provider must apply rigorous quality assurance mechanisms which must include:

a)   systems and procedures for ensuring that assessment has been carried out systematically and validly;

b)   systems and procedures for the appointment, training, registration, deployment and monitoring of external verifiers, external moderator/mode of assessment/examiner to oversee assessment and awarding arrangements;

c)   systems and procedures that would provide written guidance to examiners, external verifiers, moderators etc. to support the implementation of its quality assurance mechanisms.

(xx)   Student assessment policies and procedures

The different modes of delivery of the programme have appropriate policies and procedures for internal assessment; internal and external moderation; monitoring of student progress; explicitness, validity and reliability of assessment practices; recording of assessment results; settling of disputes; the rigour and security of the assessment system. The provider should submit a comprehensive assessment policy and the capacity and procedures to conduct assessments.

The provider should have appropriate policies and procedures in all modes of delivery and should include the following:

a)   Proper definition of policies and procedures to ensure assessment:

b)   Internal assessment of student learning achievements by academic staff responsible for teaching a course/module of the programme in a system that includes internal moderation;

c) External moderation of students' learning achievements by appropriately qualified personnel. Moderators are appointed in terms of clear criteria and procedures and conduct their responsibilities in terms of clear guidelines;

d) Monitoring student progress in the course of the programme;

e) Ensuring the validity and reliability of assessment practices;

f) Secure and reliable recording of assessment results;

g) Settling of student disputes regarding assessment results;

h) Ensuring the security of the assessment system, especially with regard to plagiarism and other misdemeanours;

i) Development of staff competence in assessment.

(xxi)　　　Collaborative Arrangement Requirements Report

The training institution

a) should ensure that the collaboration is legally binding through a formal agreement;

b) should ensure that the awarding body is recognised in its country of origin or internationally;

c) should ensure that learners benefit from the same standard of resources as the regular students of the awarding institution;

d) should ensure that learners are fully informed of the nature of the collaboration between the institutions/organisations concerned;

e) should ensure that the awarding institution undertakes the responsibility to assure the quality of the educational provision under the collaboration;

f) should undertake the responsibility to assure the quality of the training provision under the collaboration;

g) should guarantee and provide evidence that any franchised or licensed organisation offering its programme will comply with the regulatory criteria and the applicant's submission; such arrangements must be authorised by the MQA;

h) should ensure that the procedures must require partners or other stakeholders to report to the applicant of any suspected malpractice, and must make clear that failure to cooperate can lead to certificates not being issued and future entries and/or registrations not being accepted;

i) should ensure that it is recognised by the awarding body.

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Note:

(1) For programme delivered on a part time basis and full -time basis, students should spend at least 12 hours per week and 25 hours per week at the Training Institution respectively.

(2) The ratio of trainer to trainees for TVET courses could be 1:20 for theory component and 1:12 for practical components depending on the nature of training.

7.2 Application for Accreditation of Additional Programme

In the event that an institution already accredited intends to run a new programme or new programme, application for the accreditation of the new programme(s) should be made at least 3 months before the launch date together with the processing fee. In such cases, details only pertaining to the new programme(s) need to be submitted as per the criteria for Accreditation.

7.2.1 Programme Accreditation Process

7.2.1.1 Steps of the Accreditation Process

The MQA has formulated a three stage process which comprises the following:

(i) application for accreditation by the Training Institution based on criteria defined by the MQA;

(ii) processing of the application and conduct of site visit; and

(iii) accreditation decision by the MQA.

7.2.1.2 Visit to the Institution

On receiving the application for accreditation, the MQA will constitute a Team comprising MQA Officers and a resource person, if applicable. Before commencement of the visit, the Team will meet beforehand to discuss their observations based on the application submitted.

During the visit to the institution, the Team will look for evidences as submitted in the application.

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From information gathered during the visit, the Team produces a written report to which the institution may respond. Both the team report and institution response, if any, together with the application and other documents are then considered by the MQA.

7.2.1.3   Programme Accreditation Decision

       (i)   The programme is given **Provisional Accreditation** for the first cohort provided the training institution maintains its registration and is subject to quality control as undertaken by the MQA. The MQA may grant Accreditation of the programme for a maximum period of **three(3) years** provided the training institution maintains its registration.

       (ii)   The MQA can refuse to grant Accreditation of Programme.

The MQA may conduct periodical auditing to ensure continued compliance with the criteria and may require evidence of compliance, progress report and/or a visit from the institution.

7.3   Cancellation of Accreditation of Programme

The Authority may cancel the accreditation if the training institution has been found to have contravened the Mauritius Qualifications Authority Act or any regulation made under the Act or has failed to continuously comply with the criteria and conditions as prescribed by the MQA.

7.4   Appeal

An institution can make an appeal to the decision if

    (i)   that has not been granted Programme Accreditation / provisional programme accreditation.

    (ii)   its Programme Accreditation / provisional programme accreditation has been cancelled.

Any appeal should be made within 21 days of the decision of the Authority together with payment of appropriate processing fees as prescribed in the schedule of fees.

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In the advent the appeal is rejected or if the MQA maintains its decision of refusal or cancellation, the institution may re-apply in 12 months in light of any significant development in relation to the programme.

7.5   Re-Accreditation

Application for Re-Accreditation should be made in the prescribed application form at least 2 months before the expiry of the current period. The updated self-evaluation report should also be submitted. Upon receipt of the application and the self-evaluation report, the MQA will proceed with the Re-Accreditation. The Re-Accreditation will follow the same steps as the Accreditation process.

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8.0   Authorisation of Change

The authorisation of the Authority should be sought by any training institution prior to make any changes in the registration, accreditation and approval granted. Training Institutions should apply on the prescribed application form for Authorisation of Change together with the necessary processing fee. The changes could be but not limited to the following:

    (i)   Change in ownership;

    (ii)   Change in Legal status;

    (iii)   Change in name of training institution;

    (iv)   Change in training facilities;

    (v)   Change in course title;

    (vi)   Change in trainers;

    (vii)   Change in course fees;

    (viii)   Change in existing partnership, licensing or franchising arrangements;

    (ix)   Change in site of delivery;

    (x)   Changes in entry requirements;

    (xi)   Change in location;

    (xii)   Change in Manager/Programme Officer;

    (xiii)   Change in course structure;

    (xiv)   Change in delivery mode;

    (xv)   Any other significant changes.

Note:

    (1)   The Authority may consult relevant stakeholders and effect a visit.

    (2)   The Authority reserves the right to accept/reject any changes.

9.0   General Notes

    (i)   The Quality Assurance Framework of August 2019 replaces the Quality Assurance Framework of July 2018.

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