



# Establishing and development of Quality Assurance Centres at Azerbaijan Universities - EQAC 586351-EPP-1-2017-1-AZ-EPPKA2-CBHE-JP

#### ASSESSMENT OF NEEDS ANALYSIS PRESENTED BY "NAKHCHIVAN" UNIVERSITY

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This assessment provided by EKT is produced as part of the ERASMUS+ project "Establishment and Development of Quality Assurance Centres in Azerbaijani Universities" (EQAC) and has been undertaken in accordance with the guidelines for assessment provided by the Project Co-ordinator. Remarks and suggestions are presented with a view to providing a practical framework in which "NAKHCHIVAN" UNIVERSITY (herein after NU) could apply to improve its Internal Quality Assurance System.

The SER of the existing internal quality assurance system of NU was developed using ISO 9001:2015 as a point of reference. Yet, the guidelines for assessment (as determined by the Project Co-ordinator) require that external experts focus on how well partners institutions have adapted, or could adapt to integrate the Standards and Guidelines for Quality Assurance in European Higher Education Area 2015 (ESG). Consequently, the observations presented below in the table relates to the use of ISO 9001:2015. Nevertheless, in order to integrate ISO 9001:2015 and ESG requirements, it is provided comments as to how the weaknesses highlighted in the existing internal quality assurance system of NU could be improved in accordance of ESG 2015 standards.

At what extend internal quality assurance system of NU is based on the provisions of ESG 2015, it is necessary to find out during the meeting in October with NU community. Actions for the improvement presented in the table below can be supplemented afterwards.

Issue as identified by ISO 9001-2015	Conformity	Nonconformity	Actions for the improvement
	1.	Context of the organization	
1.1 Understand the organization and its context	"Nakhichevan" University determines the external and internal issues that are relevant to organization purpose.	The university doesn't monitor and review information about external and internal issues. It has the monitoring system; however, it only involves the attitudes, behavior and assessments of the students. Therefore, it is necessary to develop	Develop a methodology to understand the key internal and external factors that influence NU activities and performance by exploring the documents and tools like records of meetings where context is routinely discussed and monitored; PESTLE (Political, Economic, Social, Technological, Legal, Environmental) analysis tools for external issues; SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis tools for internal issues; other documented information describing organizational context etc.





Issue as identified by ISO 9001-2015	Conformity	Nonconformity	Actions for the improvement
		system.	
1.2 Understanding the needs and expectations of interested parties	NU determines the needs and expectations of interested parties that are relevant to the quality management system and review these on a regular basis.		Identify the requirements of the internal and external stakeholders of NU and capture their relevant expectations and needs relevant to the QAS. Monitor and review information about stakeholders and their relevant requirements by permanent review of all relevant legal requirements; by establishing feedback system; by recording surveys, networking, meeting face-to-face, attending conferences, workshops, other public events; by participating in benchmarking etc.
1.3 Determining the scope of the quality management system		Nakhichevan" University quality management system is available now but we must note that its documented information is not maintained fully yet. The organization identifies the boundaries and applicability of the quality management system. However, the scope of the organization is not established in quality management system	To verify that the scope of QAS of NU exists as documented information (which may be contained in the quality manual). Consider context (internal and external issues and the requirements of stakeholders) an its links to ESG 2015. State the types of products (e.g. research outputs) and services (e.g. education, training) covered by the QAS of NU.
1.4 Quality management systems and its processes	Generally, the quality management system is a set of policies, processes and procedures required for planning and development of the university. Quality management system in NU has been established including the process needed and their sequence and interaction. One person appointed as the head of this center. The strategy of the quality management system is defined by the university rector. It will be determined processes, their interaction, inputs and outputs. QMS takes actions to address risks and opportunities as a result of changes. Although this system is newly established in our university but step by step, we fulfil all requires of quality management system.  Documentation of QMS processes is maintained and controlled in our		Develop the internal QAS based on ESG 2015 by identification of the key and supporting processes; determinate the sequence and interaction of processes; controlling of outsourced processes.  Ensure that the documentation is created and maintained by NU to support the operation of QAS processes, such documentation might be in the form of quality assurance handbook, teaching staff handbook, student handbook, templates and forms for curriculum description of the courses, examination, other guidance material in physical samples (if relevant) as well as in IT systems (including intranet and internet).  Ensure that the information identification and retain comply with ESG standard 1.7 Information management and shows that the processes of QAS is carried as it is planned.





Issue as identified by ISO 9001-2015	Conformity	Nonconformity	Actions for the improvement
	university. It supports that the		
	processes are being carried out as planned.		





		2. Leadership	
2.1 Leadership and Commitment	In NU top management - leaders are sufficiently competent in the planning, communication and management and also, they have been able to develop vision of the quality management system, how to implement them as well as made to ensure the participation of workers in their implementation. Management should be engaged in the processes with a model attitude and should be able to engage the whole organization actively in achieving objectives. Top management has ensured that the quality management system achieves its intended results and has taken responsibility for the effectiveness of the quality management system, they promote its improvement.	It must be noted that that is pity in our organization customer satisfaction is not maintained, the risks and opportunities that can affect conformity of products and services and the ability to enhance customer satisfaction are determined and addressed sometimes but not in every situation.	Top management of NU must ensure that the human and financial resources needed for implementing the QAS are available. The actions required of top management of NU must include:  1. Developing and supporting the QAS by defining and communicating policies;  2. Establishing organizational objectives related to QAS;  3. Ensuring appropriate resources for QAS are available.  4. Implementing and improving the QAS by encouraging employees to achieve requirements;  5. Reviewing QAS performance and ensuring resources are available to improve the QAS.  Top management of NU must ensure that a process exists to achieve the following:  1. Identifying customer (stakeholder) requirements (See 1.2 Understanding the needs and expectations of interested parties);  2. Meeting customer (stakeholder) requirements;  3. Enhancing customer (stakeholder) satisfaction.
2.2 Palicy	However, QAC newly established in NU but we have already created and implemented the quality policy Top management supports its strategic directions and provides a framework for setting quality objectives.	QAC has not been available and been maintained as documented information. After establishing QAC in NU now it has very limited work. It needs to be improved. Our rector and top management support fully this organization but it is not documented yet.	Top management of NU should establish the Quality Policy of NU in compliance with ESG 2015 standard 1.1. Policy for Quality Assurance and demonstrate that the quality policy is compatible with the strategic direction and context of NU, with stakeholders and their requirements. Quality Policy of NU should ascertain that processes of continual improvement are implied and known throughout the NU and it should be signed by the Rector of NU. Quality Policy of NU must be publicly available to any relevant stakeholder on the website of NU, for instance.
2.3 Roles, Responsibility & Authority	Top management has assigned, communicated and understood within the quality management system the responsibilities and authorities for relevant roles.	But International standards of the QA system are not implemented at the university. Because our university is private and it has own rules and disciplines. QAC is established in our university but it has some limitations.	Ensure that NU personnel have not only been advised of their responsibilities and authorities, but also that they understand these in the context of the overall purpose of the QAS.





		3.Planning	
3.1 Actions to Address Risks and Opportunities	No information provided about the actions to address risks and opportunities at NU in respect of QAS.	No information provided about the actions to address risks and opportunities at NU in respect of QAS.	Quality Assurance Centre should seek and record evidence that NU has taken a planned approach to addressing risks and accomplishing opportunities to the benefit of the QAS, education, and research. Objective evidence could be in the following various forms:  1. Meeting minutes; 2. SWOT analysis; 3. Reports on stakeholders' feedback; 4. Competitor analysis; 5. Planning, analysis and evaluation activities; 6. Strategic planning documents; 7. Design and development reviews of curricula of courses; 8. Management review minutes; 9. Risk determination or evaluation records.
3.2 Quality objectives and plans to achieve them	Quality policy of the university has high quality objectives planned to be established by the described below functions and ways. The appointed managers of quality management system are responsible to track the measure for quality objectives and present the results to the administration in order to be compared with the set objectives. The appointed quality objectives are aimed to be relevant to the problem of determining qualitative goals.	At present period quality objectives are being monitored in the university, but need an opportunity to be improved.	The quality objectives as the overall goals shall be reflected in the principles established in the Quality Policy. The appropriate level(s) of management personnel at NU should define the targets. Targets must be quantified where practicable and comply with ESG standard 1.7 Information management. The action plan must:  1. Address each objective and target; 2. Designate the personnel responsible for achieving targets at each relevant function / level of NU; 3. Establish a time-frame or a schedule for achieving each target.  To ensure the progress of the action plan and a coordinated effort, a target leader should be selected for each target. Communicate the expectations and responsibilities laid out in the action plans to those who need to know. QAC should seek and record evidence that effective planning was undertaken in support of NU quality objectives and their achievement.
3.3 Planning for change	Being a strong part of quality management system planning of changes should be focused constantly. The strategic plan of the University is discussed in Scientific Council of the University and responsible staff members undertake to fulfill an assignment. University is planning to determine the need for changes and improvements to the quality management system thanks to the project we joined.		NU should identify the risks and opportunities associated with changes. In order to realize the benefits associated with the identified risks and opportunities, subsequent changes to the management system may be needed. These changes could relate to any aspect of any process, such as inputs, resources, personnel, activities, measurements, and outputs.  Top management of NU should ensure that all personnel are made aware of any changes which affect their process, and that subsequent monitoring is undertaken to ensure that QAS and education as well as research changes are effectively implemented.





	4.Support			
4.1 Resources	Aiming to improve and implement the quality management system at the university, administration monitors the situation and provides the university with the needed facilities and creates all kinds of opportunities for employees	NU should ensure that it has determined and provided the resources needed for the establishment, implementation, maintenance and continual improvement of the QAS. It is necessary to check that NU has identified which resources (infrastructure, finance, personnel and IT etc.) it needs to make available in order to ensure the effective operation of the QAS and higher education and research processes.  It is necessary to describe how NU allocates its staff in order to achieve the required outcome. The senior management need to determine the resource needed and maintain this. It should be recorded evidence to confirm that NU has provided the staff necessary for the effective implementation of the QAS and higher education and research processes.		
		It is necessary to observe and record evidence to confirm that NU has provided the infrastructure and a work and study environment necessary for the achievement of effective implementation of the QAS and higher education and research processes in compliance with ESG 2015 standard 1.6 Learning resources and student support.  NU should verify that those monitoring and measuring resources used by NU are suitable and comply with ESG 2015 standard 1.7 Information management and standard 1.9 On-going monitoring and periodic review of programmers.		





4.2 Competence	The members of the quality management system are competent for the position they occupy and feel great responsibility for this. The University administration ensured that every member is intelligent and respected employee. Vice-rector, deans, heads of departments have appropriate education to hold the position. Along with this the members of Quality Assurance Group need to pass special courses for improvement qualification.  Teachers go abroad to improve their qualifications, to attend conferences, and to improve their knowledge of the methods of teaching.	NU should establish a process of assessing and competency-based training of existing staff and students' competencies against changing education and research needs and prevailing trends. NU should ensure that all staff and students of NU are competent in accordance with ESG 2015 standard 1.4 Student admission, progression, recognition and certification and standard 1.5 Teaching staff.
4.3 Awareness	Persons working under the university's supervision are aware of their duties and objectives. Quality policy is also very important point about which the responsible persons should be aware. Along with the quality policy members should have new, creative ideas for forming the quality policy by themselves. The university administration ensured that the chosen members were able to fulfill that mission.	NU should ensure that the all community is made aware of:  1. The quality policy;  2. Relevant quality objectives;  3. Their contribution to the effectiveness of the QAS;  4. Benefits of improved performance;  5. The implications of not conforming to QAS requirements.  The implementation of awareness should comply with ESG 2015 standard 1.1 Policy for quality assurance and standard 1.8 Public information.
4.4 Communication	The University is planning to determine the internal communications relevant to the quality management system.  The system will be always available for communication, therefore it hasn't time-table.	NU should identify and expand the necessary internal and external communications (what, when, with whom and how) that are required for the operation of QAS and higher education and research processes. The communication should comply with ESG 2015 standard 1.7 Information management and standard 1.8 Public information. The current ways of communication could be supplemented by:  1. Newsletters;





	People may connect with each other any time. So, colleagues will feel free to ask their question and get advice from quality management system representatives.		Suggestion box.     Annual reports or newsletters of performance sent to external stakeholders;     Availability of results of external evaluations / accreditations;     Policies published in the media and press releases.
4.5 Documented Information	All documentation related to academic process (syllabuses, curriculums) and the reports given for this documentation are retained in dean offices, departments and strategic planning department. In order to save data from loss, b deletion or corruption it is also stored in Google disk and printed copy.	The organization's quality management system doesn't include all documented information required by the International Standard.	NU should determine the level of documented information, its creation and renewal necessary for the effective implementation of the QAS and higher education and research processes in accordance with national legislation (e.g. data protection) and ESG 2015 standard 1.7 Information management and standard 1.9 Ongoing monitoring and periodic review of programmers.





## 5. Operation





.1 Operational Planning and Control	No information provided about the operational planning and control at NU in respect of QAS and higher education and research processes	There are also problems with implementation of the strategic plans in different structural units due to weak relationships among them and should be considered as area of improvement. Another improvement area is not existence of quality indicators and realization, monitoring of strategic plan's expectations.	NU should ensure that the implemented processes are controlled as planned and that there is evidence that NU has evaluated the effectiveness of actions taken when addressing risks and opportunities. Planning and control at NU should comply with ESG 2015 standard 1.2 Design and approval of programmers.
5.2 Requirements for Products and Services	No information provided about the communication with stakeholders, the determination as well as review and changes of requirements for higher education and research products and services to be offered for stakeholders by NU	No information provided about the communication with stakeholders, the determination as well as review and changes of requirements for higher education and research products and services to be offered for stakeholders by NU	NU should ensure that it has the ability and capacity to meet the requirements for higher education and research in accordance with national legislation and ESG 2015 standard 1.4 Student admission, progression, recognition and certification; standard 1.5 Teaching staff; and standard 1.6 Learning resources and student support.
5.3 Design and development of products and services	No information provided about established, implemented and maintained design and development process of higher education and research products and services at NU.	No information provided about established, implemented and maintained design and development process of higher education and research products and services at NU.	NU should define its arrangements for establishing, implementing and maintaining a design and development process of higher education and research including planning, inputs, controls, outputs and changes in accordance with national legislation and ESG 2015 standard 1.2 Design and approval of programs.
5.4 Control of externally provided products and services	No information provided how NU ensure that externally provided processes, products and services conform to requirements	No information provided how NU ensure that externally provided processes, products and services conform to requirements	NU need to identify which materials and services it purchases affect the quality of higher education and research products and services the most. Based upon this information, establish criteria for selection and monitoring of the suppliers.
5.5 Product and Service Provision	No information provided how NU ensure quality of implemented higher education and research products and services		NU should ensure that the conditions by which higher education and research products and services are provided are under control and in compliance with ESG 2015 standard 1.3 Student-centered learning, teaching and assessment.
5.6 Release of Products and Services	No information provided how NU implements planned arrangements, at appropriate stages, to verify that higher education and research products and services requirements have been met.	No information provided how NU implements planned arrangements, at appropriate stages, to verify that higher education and research products and services requirements have been met.	NU must show evidence that a process (method, techniques, formats, etc.) is in place to monitor and measure the characteristics of higher education and research products and services to verify that requirements are being met. This must be accomplished at appropriate stages of the design and development process in in accordance with national legislation and ESG 2015 standard 1.2 Design and approval of programs.
5.7 Non-conforming Outputs	No information provided how NU ensure that outputs of higher education and research products and services that do not conform to their requirements are identified, controlled and corrected.	No information provided how NU ensure that outputs of higher education and research products and services that do not conform to their requirements are identified, controlled and corrected.	NU should ensure that outputs of higher education and research products and services that do not conform to their requirements are identified, controlled and corrected in accordance with ESG 2015 standard 1.9 On-going monitoring and periodic review of programs.









### 6. Performance Evaluation





6.1 Monitoring, Measurement, Analysis and Evaluation	All bodies of the university compile their results into reports. It is within these reports that head of the departments identify whether activities and plans have been effective, and recommend changes where appropriate. These reports then go through a comprehensive standard review process in the Scientific Council in order to ensure they are scientifically credible, accurate, and beneficial to university	For quality assurance development we need to plan on monitoring the quality of administrative and support services for students and teachers. The aim is to establish a comprehensive quality monitoring and quality management system, which will provide regular activities of the management and administration.  For student's satisfaction Education department and IT department of the university were held surveys for improvement of the service from time to time. But expectations haven't been fulfilled in a normal range. University has to determine the methods for obtaining and monitoring of information.	NU should verify that those monitoring, measuring, analysis and evaluation procedures are suitable and comply with ESG 2015 standard 1.7 Information management, standard 1.9 On-going monitoring and periodic review of programs, and standard 1.10 Cyclical external quality assurance
6.2 Internal Audit	Internal audit provides the University's Council and Rector and other senior managers with assurance on the adequacy and effectiveness of the University's arrangements for risk management, control and governance.  The internal audit function provides a judgement on reasonable assurance, the responsibilities for control, risk management and governance in the University lie with the University's management. Internal Audit is simply to review the arrangements that the University has put in place to provide the necessary assurance, the internal auditors do have a role in assisting management.		NU should establish an internal audit programme to cover all requirements of the standards. In addition, it should comply with ESG 2015 standard 1.9 On-going monitoring and periodic review of programs.





	In addition, the internal audit function also has a role in the required assurance in the specific area- the University's 'value for money' arrangements		
6.3 Management Review	Management reviews of the education system are not conducted and presented in a documented form in a planned manner. However, top management and department heads prepare a report on the work done, submit it to the supreme body of the university and rector. Royal institute of British Architects have visited our University 3 times and took into consideration the status of actions from previous management reviews notes that we have constantly improved situation at the faculty.	However, there is no information how frequently management review is carried out, how continuing suitability, adequacy, effectiveness and alignment with strategic direction of NU is ensured.	Top management of NU must periodically review the management system to ensure its continuing suitability, adequacy, and effectiveness. The frequency or intervals of the top management's formal review must be defined. The management review must address the possible need for changes to policy, objectives, targets, and other elements of the QAS and products and services of higher education and research. The management review process must ensure that the necessary information is collected ahead of time to allow management to effectively carry out this evaluation. Information that must be reviewed includes:  1. Minutes from previous management reviews; 2. The policies, objectives and targets; 3. Results of QAS and process audits; 4. The extent to which objectives and quantitative and qualitative targets were met.





	7. lm	nprovement	
7.1 Non-Conformity and Corrective Action	When a nonconformity occurs, including any arising from complaints, the University reacts to the nonconformity, takes action to control and corrects it. University rector appoints responsible persons-Ombudsman to cope with nonconformity and its consequences	NU is required to:  1. Take whatever action is necessary to control and correct the nonconformity, and to deal with any resultant environmental impact;  2. Determine what caused the non-conformity and then to consider whether the potential for a similar problem remains;  3. Consider whether any further action is required to prevent a similar nonconformity recurring at the same place or occurring somewhere else, at some point in the future;  4. Determine if similar non-conformity has occurred elsewhere and consequently whether it needs to take similar corrective action.  NU should first contain the problem and then determine its root cause in order to take appropriate corrective action to prevent the problem's recurrence in accordance with ESG 2015 standard 1.2 Design and approval of programs, standard 1.9 On-going monitoring and periodic review of programs, and standard 1.10 Cyclical external quality assurance.	
7.2 Continual Improvement	Nakhchivan university apply continual improvement principles and practices to both academic services and administrative processes. To increase the competitiveness, find out effective way to address new demands and university organize trainings for academic and administrative staff have a cohesive approach to improvement across the department or faculty level.	NU must be able to demonstrate continual improvement. NU should select the appropriate tools and techniques to investigate the causes and thereby establishing and implementing a process for continual improvement in accordance with ESG 2015 standard 1.2 Design and approval of programs, standard 1.9 On-going monitoring and periodic review of programs, and standard 1.10 Cyclical external quality assurance.	





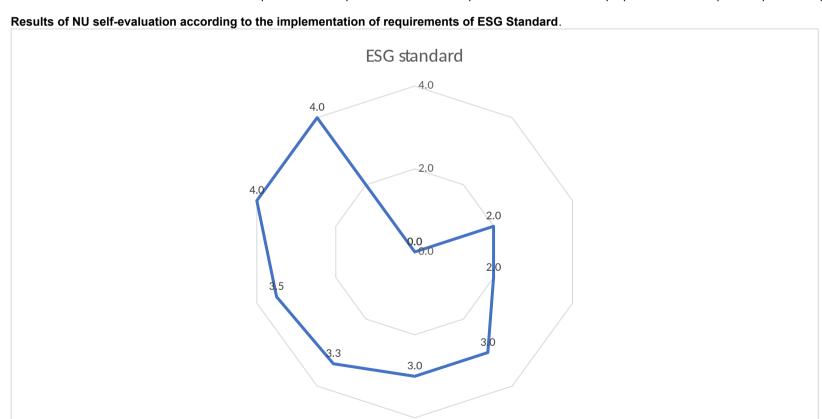
During the meeting with the NU QAC team were agreed to use three additional instruments in order to get more information about the conforming NU QMS with the requirements of ESG:

- 1. NU self-evaluation according to requirements of ESG Standard;
- 2. NU self-evaluation according to requirements of ESG Guidelines;
- 3. NU self-evaluation according to criteria of good practice of QAC development.

The same scale for evaluation was used in all three instruments:

0 - not implemented; 1 - implemented with major(great) inconformity; 2 - implemented with minor(less) inconformity; 3 - implemented; 4 - implemented and has an opportunity to be improved; 5 - implemented with continuous improvement

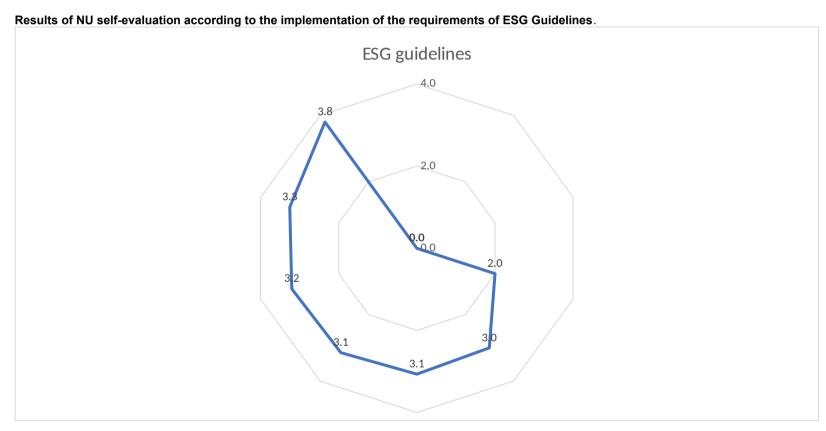
Results of this additional self-evaluation will help to focus on important areas of development of QMS in NU and prepare more useful plans of process improvement.







- 9 On-going monitoring and periodic review of programs not rated.
- **6 Learning resources and student support Standard:** "Institution should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided".
- 7 Information management Standard: "Institution should ensure that they collect, analyze and use relevant information for the effective management of their programs and other activities. Reliable data crucial for informed decision-making and self-knowledge".
- **3 Student-centered learning, teaching and assessment Standard:** "Institutions should ensure that the programs are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach, stimulate motivation, self-reflection and engagement".
- 10 Cyclical external quality assurance Standard: "Institution should undergo external quality assurance in line with the ESG on a cyclical basis".



- 8 Public information not rated.
- 9 On-going monitoring and periodic review of programs not rated.



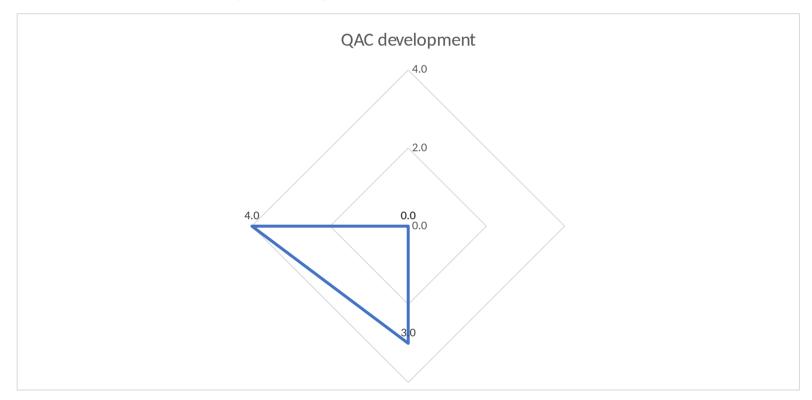


#### 10 Cyclical external quality assurance - not rated.

1 Policy for quality assurance – Guideline: "All departments, schools, faculties and other organizational units as well as those of institutional leadership, individual staff members and students to take on their responsibilities in quality assurance". NU comment: QAC has not been available and been maintained as documented information. After establishing QAC in NU now it has very limited work. It needs to be improved. Our rector and top management support fully this organization but it is not documented yet).

7 Information management – Guideline: "Effective processes to collect and analyze information about study programs and other activities feed into the internal quality assurance system: especially - students' satisfaction with their programs". NU comment: For student's satisfaction Education department and IT department of the university were held surveys for improvement of the service from time to time. But expectations haven't been fulfilled in a normal range. University has to determine the methods for obtaining and monitoring of information.

Results of NU self-evaluation according to criteria of good practice of QAC development.



Ensuring the QMS performance - not rated.

Ensuring the QMS improvement - not rated.





Ensuring the QMS development - Criteria: "Quality system documentation (rules and procedures); risk management model and system implementation".

**NU comment:** International standards of the QA system are not implemented at the university. Because our university is private and it has own rules and disciplines. QAC is established in our university but it has some limitations).