



განათლების ხარისხის განვითარების ეროვნული ცენტრი  
NATIONAL CENTER FOR EDUCATIONAL QUALITY ENHANCEMENT

## **Higher Education Institution Authorisation Experts' Report**

**University of St. George**

### **Expert Panel Members**

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Tbilisi

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## Authorization Report Resume

### General information on the educational institution

University of St. George (hereafter „the college” or „the institution”) was established in 2018 as a Limited Liability Company (LLC) with the scope of „creating such educational space, which conducts education by international, the leading universities’ teaching and research models and which will enable the transformation of the university environment not only in Georgia, but in other countries too”.

The institution has submitted the first formal application to seek its authorisation by the National Centre for Educational Quality Enhancement (hereafter NCEQE) as a college.

The college plans to open its doors in the academic year 2019-2020, when it envisages to enrol 200 students in two bachelor programs of University of Buckingham, BSc program of Business and Management and BA program of Political Science, with whom the institution has a formal cooperation agreement.

### Brief overview of the authorization site visit

The site visit was conducted by the panel nominated by NCEQE. The site visit took place between 16-17 April 2019 in Tbilisi. The agenda of the site visit was drafted jointly by the college and NCEQE. During the site visit, the experts confirmed the information provided by the institution in the self-evaluation documentation and explored in meetings the perceptions of the internal and external stakeholders; based on these main aspects, the panel assessed the compliance of the college with NCEQE institutional authorization standards.

The evaluation faced a few significant obstacles, some of which have made the mission of the review panel more difficult:

Firstly, the institution has not fully cooperated with NCEQE and the panel in the arrangements that would support the panel in conducting a successful site-visit and producing a well-grounded report: the process of drafting the agenda of the site visit was very lengthy, considering that the institution did not initially respond to our insisting not to have the same interviewees in 5-6 sessions, added interviewees that were irrelevant to some particular respective sessions and refused to remove them, constantly changed the interviewees of some sessions that were supposed to be attended by people that formally occupy the respective positions (the Self-evaluation Team and the Quality Assurance Service). Also, the institution has not provided all the supplementary documents that the panel asked for, even if they were repeatedly solicited.

Secondly, the institution lacked the self-critical capacity, both in the submitted documentation, as well as in the meetings conducted during the site visit; this not only made it difficult for the panel to distinguish between objective information, facts unsupported by evidence and unsubstantiated judgements, but also made the panel wonder if the institution is generally self-aware of its current and upcoming challenges and has the ability to identify its risks and be honest about them (at least to itself) so that to address them accordingly. Generally, it is considered a significant shortcoming when an external quality assurance process identifies weaknesses that the institution has not already identified by itself and acknowledged in the self-evaluation documentation or during the site visit.

Thirdly, it seems that the institution is in a substantial confusion between business management and education management. Whilst some practices in the institutional management and administration might be accepted in other types of business, that doesn't necessarily guarantee their efficiency from the educational management perspective; also, the student is definitely not „a product”, as the institution refers to it. This distinction has to be made clear, especially to and by the people that are at the forefront of governance at institutional level and it should be accompanied by understanding the full weight that establishing a higher education institution implies.

Fourthly, the panel wishes to underline the tense and hostile environment the institution has created during the site visit; not only did the management behave in a very defensive manner, but that

transformed into an aggressive approach towards the panel and the NCEQE representative. In spite of this, the panel has managed to present an assertive behaviour throughout the site visit and welcomed its interviewees in a agreeable environment so as to create the proper context for sharing opinions and impressions.

## **Overview of the HEI's compliance with standards**

The mission statement of the college is as follows:

*„To introduce a modern, Western system of learning and research and by integrating it into the international educational field to take part in the development of the country. The system should ensure the creation and sharing of knowledge and should be recognised as being representative of educational and academic fields as well as ordinary citizens, private and public organisations and civil sector representatives.“*

It is evident from the text of the mission statement that the college aspires to align the institution to western standards and integrate it in the international educational field in order to contribute to the development of the Georgian society. The college mission statement defines the institutional role locally, but not internationally.

The mission statement takes into consideration the role the institution has in the knowledge creation and dissemination; however, the role of the college in developing active members of the society, as well as facilitating students' personal development and ensuring their competitiveness on the labour market is currently not underlined in the text of the mission. The mission statement reflects its focus on teaching as well as research, but it does not include the profiles it wishes to include in its work (profiles of its study programs).

The mission statement is shared by the community of the institution. However, the panel considers that the mission statement should be made publicly available on the institutional website.

The college has elaborated a Strategic Plan for the timeframe 2019-2025, which includes 6 strategic aims, as follows:

1. Institutional strengthening;
2. Organisational strengthening;
3. Research activity strengthening;
4. Improvement of learning quality;
5. Internationalisation of teaching and research;
6. Awareness raising and gaining authority.

The set goals, tasks and activities are generally in line with the institutional mission, vision and values. However, as the mission statement of the institution states that the main goal of the college establishment has been the societal development, the panel considers that the strategic plan should reflect specifically how is that planned to be achieved, which is not the case at the moment. The strategic plan is generally achievable; however, the specific point when the strategic goals, tasks and activities can be declared achieved cannot be determined by the panel considering that most of these are not measurable. Moreover, the panel is concerned about the capacity of the institution to use its strategic and action plans as sufficient support for decision making; when this aspect was addressed during the interviews conducted by the panel, the management of the institution did not seem to be aware that this is in fact the coherent use of strategic planning processes.

The institution has also developed an action plan for the time-frame 2020-2026 which extracts all goals, tasks and activities and narrows them down by allocating monthly assignments, responsible persons, performance indicators, operating goals and budget. Even if the Action Plan does provide Performance Indicators, most of them are not measurable either. Also, the action plan is budgeting the specific goals, tasks and activities. However, the funding is allocated for the tasks, but not divided for each of its actions. Moreover, the resource allocation only takes into consideration the finances, but it does not extrapolate the necessary material and human resources needed for their implementation.

The institution does not *de facto* have any financial resources in the accounts legally associated to the LLC University of St. George. As the funds are only available with the founding organisation, the

panel has difficulties assessing the LLC University of St. George capability of meeting its strategic goals is it does not literally own the capital to do so.

The institution has developed a Strategic Planning Methodology which does not respond to the needs it is expected to, as it is only a descriptive story of the steps that have led to the creation of the strategic plan.

No students and external stakeholders were present in the composition of the Strategy Planning Working group.

The strategic and action plans cover all aspects which are vital to the operation of an institution: institutional development, human and material resources, infrastructure, research, quality assurance, internationalisation, as well as planning and implementation of educational programmes. However, the student body planning and student services are not included in the strategic planning process.

The panel believes it is too early to assess the contribution of the college to the development of the society, so the panel can only evaluate what the institution plans to do in this regard; while this is claimed to be the main scope of the institution's establishment, the panel believes that the strategic plan fails to reflect specifically how will the institution contribute to Georgian society development. The strategic plan does not make reference to the areas included in the NCEQE standards, such as: social, cultural, economic, environmental and other programmes and events; activities facilitating lifelong learning; HEI's academic and scientific staff participates in the discussion of important social issues, offers expert and consultation services, and conducts research for different institutions.

Naturally, since the strategic plan is in its inception, the panel cannot assess the *de facto* monitoring and reporting on its implementation as well as adjustments made, but only the process the institution has planned in this regard. The college has developed a Strategy Monitoring and Evaluation Procedure, which provides the process for the monitoring the implementation of the strategy. However, it is not clear who will be responsible for this task; a monitoring group has not been appointed for this purpose by the time of the site visit. Also, it is confusing if the reporting on the monitoring the implementation of the strategy is to be done every semester or quarterly.

It is important to mention that, at the time of the visit, the university had no management, but a *projected* management that would come into effect should the institutional authorisation be approved. Whilst the respective person is the legal representative of the University of St. George as far as the LLC status is concerned, there is no document that would formalize the appointment of the „rector“ by the time of, and during the site visit.

Secondly, the panel was confused at the sight of the institutional organisation chart because it does not include units of the institutional structure, but individuals.

Generally, considering its legal status as LLC, there is quite a high autonomy in how the university is organizing its structure and organization chart.

According to the Statute of the institution, the Rector is appointed by the founder of University for a term of 7 years, which has the statutory responsibility to appoint and dismiss him, and supervise his activities. In other words, the rector is accountable to the founder; however, this accountability is not reflected within the institutional procedures considering that the founder of the institution is not included in the organisation chart.

According to Art. 8 of the Statute „the academic council is the highest representative body of the university“, whose responsibilities are also described in the Statute. However, the panel has identified several inconsistencies in its operations:

1. It is unclear if the Council has any responsibilities outside the academic area;
2. The number of Council members is unknown;
3. High number administrative units representatives as part of the Council (which are appointed, and not elected as declared in the Statute);
4. The founders are members of the Academic Council, even if this is not being formalised in the Statute of the institution.

Generally, the responsibilities of structural units of the institution are not clearly defined and divided to implement their functions effectively and in a coordinated manner, and the organizational structure of the college does not ensure the effective implementation of activities defined in its strategic plan. At the time of the site visit, there was no procedure for the election or appointment of the Rector, Dean, Academic Council, and others. Moreover, during the meetings it has conducted, the panel

learned that the institution is not able to describe the process that led to the appointment of the rector. Also, there is no evidence of formal provisions of predefined requirements or discussion of candidates' vision and plans. The same applies to the appointment of the deans and members of the Academic Council. The panel therefore concludes that the institution cannot ensure that the election/appointment to the management bodies of the institution takes place accordance to predefined requirements and based on the discussion of candidates' vision and plans; there is no procedure approved, transparent, equitable, and in line with legislation, nor were these principles identified in practice.

Considering that the institution has not started fully operating, the panel cannot assess whether the decisions of the institutional management related to academic, scientific and administrative issues, are made in timely and effective manner.

The institution has developed the *Rule of Procedure of the University of St. George*, which regulates document processing within the institution and these correspond to the established legislation.

The institution has assigned an individual responsible to report to NCEQE on the maintenance of the registry of educational institutions, within the chancellery office.

To ensure the business continuity of all major processes, the university has a Business Continuity Plan, which assesses the potential risks, probability, impact, measures of prevention, and process in case of an incident. However, the panel found that the institution has no risk assessment and alternative plans as far as finances are concerned.

The institution has developed an *Internationalisation policy*, which defines its purpose as following:

- Stage I - The University will become the leading higher education institution in Georgia by 2026, providing high quality of teaching and research and academic freedom;
- Stage II - The University will become one of the leading higher education institutions in Europe and Asia (among 1000 world universities) by 2033;
- Stage III - The University will become one of the best higher deduction institutions by 2040 (among 100 best universities of the world).

The panel observes that these purposes are very aspirational, but finds problematic that the institution does not know exactly how to get there.

Whilst there is no evidence of supporting the international mobility of students and staff, or participation into international research activities, as the institution has not started operating yet, there is a substantial prioritisation of the internationalisation area derived from the connection with the institutional mission, strategic plan, as well as the institutional cooperation with the foreign partner.

The institution has developed a Quality Assurance Guide, which regulates the principles, processes, mechanisms and instruments of the internal quality management system. The Quality Assurance System has been designed „to ensure that quality and inspection is carried out consistently and systematically“. For this purpose, the institution has included in its organisation chart the Quality Assurance Service. At the time of the site visit, the Service considers that it is equipped with the necessary human, information and material resources to conduct its assigned activities, but in the future this could be supplemented.

Considering that the Quality Assurance System has only now been designed and has not reached the implementation stages, the panel cannot assess whether other structural units at the institution accept a common ownership for quality values. In fact, the panel is concerned about the commitment for quality enhancement and quality values even within the QA Service itself. Moreover, at the moment, the level of development of the quality culture across the institution does not support the development of the college operations. The very idea of quality culture is not well defined, spread or promoted across the institution.

In terms of other units' involvement in quality processes, there is a very big gap and discrepancy between the plan and the actual capacity.

It is the impression of the panel that the institution does not seem to understand the notion of „evidence based decision making“, as it has resulted that the „rector conducts the work based on founders' demands“ and the QA Service is also accountable to the founders. As detailed under Standard 1.2., the institution does not follow a coherent Plan-Do-Check-Act (PDCA) cycle where the QA system has the role to provide data on the progress of the strategic and action plans, as well as to detect irregularities and provide potential causes and solutions for them.

According to the QA Guide, the Quality Assurance system instruments include surveys of students, employers, academic and non-academic personnel; Planned Group Interview; Assessing the quality of research; Peer Review; Self-assessment of academic staff; Self-assessment of researchers; External evaluation. However, it is not clear how are these used to ensure the continuous assessment and further development of the institution's activities. At this stage, the end-destination of these instruments implementation is the Academic Council (institutional or departmental level) which is assigned to decide on the measures to be taken for quality improvement.

The performance review system is planned to be conducted as follows:

1. For academic staff, the system will be based on: student surveys, academic and scientific production (conference participation, publication, etc), peer review, self-evaluation. According to the meetings conducted by the panel, the data collected from these instruments will be sent to the Academic Council; the Human Resources staff are not engaged in the performance review or any area of HR management for academic staff, including induction, professional development, etc.
2. For administrative staff, the performance review lies with the HR manager and will be based on line manager review, peer review and self-assessment, and will be conducted at the end of each year. There has been no reference of student and academic staff survey evaluating the performance of administrative staff.

When asked about how their performance will be evaluated, the academic and invited staff the panel has met during the site visit referred to evaluation forms from students and from the institution (but were not able to indicate specifically what individual or entity), as well as self-reflective form, to be conducted at the end of each semester.

There is no clarity across the institution about who does what, who produces survey templates, who conducts them, who merges and analyses the data, who has the development-led discussion with the academic/administrative staff, how is the data specifically used in the staff performance review (including decisions regarding termination of contract, promotion, incremental pay, etc) and who monitors improvement.

The panel can conclude that the quality assurance instruments are processes are not designed to successfully drive towards improvement as there is no clear understanding on how exactly the quality cycle will be closed.

The Quality Assurance system does not envisage the monitoring mechanisms for students' academic performance.

The institution has developed mechanisms for the evaluation and improvement of educational programmes in the form of an *Appraisal Procedure and Procedure of Educational Programs* (Chapter IV of the Quality Assurance Guide). However, the quality guide does not include any instrument engaging the (future) graduates in this process. Also, in terms of the program quality management procedures, there seems to be a contradiction of views between the college and University of Buckingham: the institution QA staff have declared during the site visit that their foreign partner will not be involved in the programme-level QA processes, whereas the Buckingham university representative is of a totally different opinion and believes it has a determining role in the quality monitoring of the programs, as well as in ensuring that the college addresses the concerning areas. There is no specific instrument destined for the periodical evaluation of the quality of the institutional services and resources. The administration and student services do not seem to be evaluated in depth and their assessment does not include all internal stakeholders that these services are formally destined to support. Therefore, the panel cannot assess the usage of the results for the further improvement of the services and resources.

The institution has developed a *Student body planning mechanism, methodology and benchmarks*, which takes account of human resources dedicated to students, as well as sets benchmarks for this purpose.

When asked how does the institution plan to integrate the students in the quality assurance processes, the college representatives the panel has met during the site visit were not familiar that this is even a possibility and could not refer to the kind of student engagement they can provide.

The institution has developed the Code of Ethics that determines the norms of ethics for students, academic and invited personnel at the University and which is made publicly available on the institutional website in Georgian language, but not available in English. According to the SER, general

rules of conduct for the employees are regulated by the internal regulations and other internal legal acts of the university.

The Code of Ethics goes beyond its purpose and provides rights and obligations unrelated to ethics, but rather academic in nature. The panel believes that it is not in the remit of the code of ethics to regulate academic performance and expectations.

The institution has not established an independent Ethics Committee responsible of safeguarding the provisions in the Code of Ethics but, in the case of the violation of the ethics rules, the Academic Council of the respective Department shall consider the disciplinary responsibility of the students, academic and invited personnel. Also, the organisation chart includes the Committee of Research Ethics and Funding in order to „establish ethicalness of the research project and decides whether to finance it or not“.

There appears to be no institutional unit in charge of the analysis and sanctioning of ethical breaches of administrative staff.

The Code clarifies what it considers as ethical breaches, and provides the possible sanctions for such situations. However, the Code does not define the institutional understanding of conflict of interest or incompatibility of positions, and it does not clarify the sanctions in case of conflict of interests.

The Code of Ethics defines the notion of plagiarism, but it does not lay down mechanisms for appropriate response in case of plagiarism.

The institution plans to acquire an anti-plagiarism software in order to safeguard and confirm the originality of academic and research products, as well as to introduce classes on this topic.

The Statute of the institution promotes the principle of academic freedom; however, it is too early for the panel to assess to what extent this principle is being enforced across the academic community.

The institution has developed a document for *Planning Designing and Development of Educational Programs*, which is a part of the *Quality Assurance Guide*. According to the interviews and the self-evaluation report, both bachelor degree programs are taken from Buckingham University. However, the interviews and presented documents include contradictory information regarding the college role in adjusting and amending the study programmes; the presented programs have not been amended according to the Georgian laws and regulations so far.

The processes for program planning, designing and development has not been so far a participatory process considering that the programs were basically copied and pasted from the partner university; secondly, the Quality Assurance Guide does not envisage satisfaction survey for graduates, which should be a stakeholder the college should be consulting.

The Quality Assurance Guide provide the description of the procedure for amendment and annulment, where the same reasons are listed for both procedures: students' low academic performance and assessment/self-assessment of academic personnel. The panel considers that annulling a study program because of student low performance is not adequate.

In case of amending/annulling the program as a result of the decision of NCEQE, the management of the college mentioned that the institution will move students to Japanese University Massey, or Buckingham University, where they can resume their studies. The panel considers this as very unrealistic, unsuitable and not supported by evidence.

At the time of the site visit, the college had 10 academics and 9 invited personnel for the implementation the programs. Their qualification is fully compatible with program objectives.

The institution is planning to start its academic activities with the launching of two first circle programmes: Business and Management (NQF code 02), qualification awarded Bachelor of Business Administration, and Political Science (NQF code 0702), qualification awarded Bachelor of Arts in Political Science. The Business and Management program is not fully compliant with the qualification to be granted, according to the National Higher Education Qualifications Framework of Georgia. The learning outcomes of the programmes are not in full compliance with the National Higher Education Qualifications Framework of Georgia, and they are based on field characteristics, but are not completed.

The module dedicated to dissertation does not provide any teaching material; however, some topics are mentioned and there is also a specification that three research workshops are necessary.

The college follows the European Credit Transfer and Accumulation System ECTS guidelines; however, there are some discrepancies regarding the calculation of credits for dissertation thesis in

Political Science (engagement hours are 400, which means that the credit calculated will be 16, not 20).

The program structure and content ensure a logical connection between all of its components and the achievement of given learning outcomes. Students have the opportunity to elect non-compulsory components of the educational program; the number of elective disciplines offer student an appropriate level of flexibility and autonomy in influencing their own learning path.

The volume of the programs is reasonable according to the content and specifics of the field, and consists of 240 credits. However, the panel observed that programs provided by Buckingham University are originally designed to be implemented in three years, whereas the college plans to implement them in four years. Considering that no amendments and adjustments have operated in the content of the programs, the panel is unsure of what does the college plan to do with the students during the fourth year.

The curriculum of Political Science does not include any course of research methods/skills; a module for the preparation of the dissertation is in place, but the college has not yet developed the guidelines for the drafting of the dissertation paper itself.

Information about programs is given on the website of the institution in Georgian and English languages. The college has not developed a detailed programme catalogue yet.

All students have the right to submit a complaint and participate in focus groups enquiries each semester.

The learning outcomes assessment is described in the SER. However, the assessment strategies and methods in the syllabi and program descriptions are not completed. Typically each assessment should include the respective component/components of the assessment method that is measured by criteria, but this is not the case in the college.

The *Students Assessment Criteria* describes the assessment of dissertation/research paper/presentations. The *Exam Regulations* describes the exam procedures, but it does not mention that final exams will be checked by Buckingham University professors. Assessment components are not presented in detail, and the assessment does not include margin of minimum competency.

When asked about who is responsible to monitor the fitness of the assessment methods and their suitability to the achievement of the intended learning outcomes, the representatives of the college management had no clear answer. The panel found this approach very worrying and is very concerned about the task division between different organisational units of the college, between the college and its foreign partner, as well the preparedness of the LLC University of St. George to conduct educational activities.

The institution has developed a *Staff management policy*, which includes general principles and rules on academic and non-academic staff management. The institution has defined the qualification requirements for academic, scientific, invited, administrative and support staff, considering their job descriptions, functions and existing legislation. The panel has observed that these are in line with HEI qualifications requirements and with their job descriptions.

Even though during the meeting with the HR representative the panel did learn about the general principles of remuneration and encouragement, the panel was not provided with documents which prove consideration of employees performance evaluation results in that process.

The college has developed an on-boarding procedure ensuring the integration of new non-academic staff members into work environment and their efficient involvement into the working process. However, no similar process is being organised for the academic staff and, according to the interviews conducted by the panel, there is no clear view who is responsible for it.

The college developed a *Staff development policy and procedure*; however, the policy does not clarify what are the procedures for identifying training needs for academic and non-academic staff and the budget allocated for this purpose.

Even though the panel did learn about the formal procedures for hiring (electing/appointing) academic, scientific, invited, administrative and support staff, the panel was not provided with documents which prove the hiring of the academic and non-academic staff via a contest (e.g. interviewing).

The college has developed an affiliation policy. Affiliation terms and conditions are written out in a formal agreement between the academic staff and the college.



Considering that the institution is not yet fully operational and no satisfaction surveys were conducted yet, the panel cannot yet assess how is the institution utilizing staff evaluation and satisfaction survey results in the process of staff management. Moreover, when asked if the instruments that are planned to be used for staff evaluation have already been drafted, the HR representatives stated that she planned to use the ones she had with her previous employer, with minor adjustments.

The institution has developed the *Methodology of the elaboration Scheme of the Academic/Scientific and Invited Staff Workload*. The scheme is divided into the academic and scientific directions, where for each is defined the teaching and research component, which is determined by the deans and professors of the departments every semester. The number and workload of the academic and scientific staff ensure the implementation of educational programs and proper fulfilment of research activities and duties assigned to them for the first academic year. To ensure programme sustainability, while planning the number of academic, scientific and invited staff, the institution considers the number of existing and future students on each programme. In this sense, the institution has developed a *Student Body Planning Methodology*.

The institution has not set any benchmarks for their staff in order to effectively carry out its educational, research, creative, performing activities.

Since this is the initial authorisation application of the college, the institution has not yet enrolled any students and, therefore, the panel has not met any students during the site visit.

*The Rules for Regulating the Learning Process* developed by the college are providing in full the procedures for obtaining and changing student status and the protection of student rights. The information concerning these matters is made public only in Georgian language and is therefore accessible only to Georgian-speaking students and stakeholders; as detailed under Standard 7.3., the official website of the college is at present incomplete.

The college has also developed set of admission procedures for Georgian and foreign students and there are defined requirements for enrolment at the college. The contract with the college protects students' rights and lawful interests.

The college plans to provide opportunities for the participation of students in various projects, as well as to fund their ideas.

There is a Career Development Centre responsible for providing professional orientation and other information regarding labour market, employment and career development. The college has integrated in its QA system surveys for its students regarding their personal, professional and academic development. However, no such instrument is yet planned for graduates.

The college is also planning to incentivise students access by partially reducing their tuition fee; However, the college doesn't take into consideration students' socio-economic status and background when making such flexible fee-payment arrangements, but only academic performance. The college plans to create opportunities for students' international mobility (Erasmus+) and participation in various projects, ensures students awareness on various international projects and events carried out outside of the college.

There are student services at the college which aim to support and help students' development.

According to the SER, the institution is a research-oriented educational organization, which is also confirmed in the mission statement and in the strategic plan. However, at the moment, the institution does not conduct research activities.

The institution has developed a *Research Strategy*. At the initial stage, the research activity at the institution starts in two areas - economics and politics. The institution is planning to open two research centres with 2 researchers, as of September 2019. However, the panel has observed during the tour of facilities that no distinct spaces are dedicated to research activities.

The budget includes the salaries for research staff, which is increasing year by year. The budget also includes funding travel grants for conferences, but separate funding for conducting research is not allocated. The Action plan of the college reflects the budget allocated for research for the 2019-2020 academic year under the aim of „Encouraging research activities“, but it does not clarify to which of the 5 specific actions will the funds go.

According to the Research Strategy, each program will have a module through which students are taught how to identify research problems and carry out research. However, the curriculum of the Political Science programme does not include any course regarding research methods; the Business and Management curriculum includes *Research Skills for Business*. In the Dissertation Module

Specification of Political Science programme, it is only mentioned that three research workshops will be conducted to discuss different methods, however there is no any syllabi or teaching literature.

The *Research Strategy* mentions that the institution will evaluate the impact of each research result; however, no methodology has been developed so far in this regard. It is the plan of the institution that the results of these researches will be reviewed by the Academic Council and then integrated in teaching curriculum.

The college does not operate PhD programs, so the panel cannot evaluate at this stage the effectiveness of doctoral research supervision or procedures for the assessment and defence of dissertations.

The institution does not yet have a clear vision of being an implementer of research and development activities; whilst it does plan to implement complex research and development activities and has a very aspirational view in this regards, the panel believe that the institution is not clear exactly how to reach there, nor does it have a systemic process of determining its research priorities.

In order to support its research priorities, the institution has a *Research Strategy* and the *Regulations for Breach of Ethics and Behaviour*, which also includes the evaluation framework for research. In order to regulate research related issues and support scientific/research work at the college, the Committee of Research Ethics and Funding will be established. The funding of research will be based on a grading system which is planned to ease the decision making.

There is no formal strategy for attracting new staff in research; when the panel addressed this concern it has learned that high salaries is the only strategy the institution has in place.

The college includes information about the internationalization of research in the *Policy of Internationalization and International Cooperation*, and *Internationalization Mechanisms*. The same information is provided in the *Strategic Plan*.

The panel believes that plan regarding internationalization is very ambitious; however, the panel cannot evaluate its feasibility at this stage.

The institution has developed the *Policy for evaluation of research activities*. The mechanisms for the evaluation of effectiveness of future research centres, as well as evaluation of research impact assessment are not included. Research evaluation framework is mainly based on a 1-5 grading system. Scientific productivity of staff will be evaluated by the QA Service, which is currently drafting its instruments to be used.

At the time of the site visit, the institution was not able to demonstrate the lawful possession of the building dedicated for the college activities, for which there is a rental agreement with the founding organisation, LLC Unique Learning, which is also reflected as the owner of the building, as per the extract from the Public Registry.

As for the liquid assets, according to the receipt and invoice of computers, digital technology, and other liquid assets, the LLC English book has acquired liquid assets for St. George University. However, there is no written evidence (written agreement, acceptance act, account invoice, long term balance, etc) to attest the respective ownership at least for the authorization period; this was also applicable during the site visit.

During its visit of the infrastructure, the panel has observed that the college building is equipped with foyer, recreation spaces, teaching classrooms, administrative offices, space for group work, sanitary/hygienic units, library, archive. Generally, the distribution of various units supports the effective implementation of educational and administrative process. However, if the institution wants its two research centres to be fully functional at the beginning of the academic year, suitable infrastructure and facilities should be dedicated for this purpose. Also, the panel has learned during the tour of the facilities that only one administrative office will be dedicated to secretarial relations with the students, which we believe is not suitable for the prospect of 200 students in the first academic year. The institution should therefore consider this resource allocation.

The panel considers that the university has an appropriate inventory for the implementation of its activities. However, considering its institutional aspirations towards research, infrastructure and facilities in this areas should be added.

The building is equipped with a central heating system and an uninterruptible power supply system. All classrooms have artificial light possibilities, but not all educational spaces have natural light. During the visit of the facilities, the panel observed that the building is not equipped with fire extinguishers on every floor. Detailed instructions on the use of fire prevention equipment is present

on all grounds and the evacuation plans are approved by the competent authorities. However, the respective instructions are provided only in Georgian language.

The interview with the administration revealed that the institution has medical staff in place. During the tour of the facilities, the panel was presented with a „medical cabinet“; however, we found that it was merely a room that had a first aid kit on its desk. The room is completely unsuitable to serve as a cabinet: it does not have natural ventilation, natural lights, constant supply of hot water and the „medical bed“ is actually a regular couch.

Order is maintained throughout the perimeter of the institution; the institution allocate security staff to timely and effectively respond to violation of order, and protect material values of the institution. In order to maintain order, the institution has security video recording and storing facilities installed both inside and outside of the building, throughout the premises.

People with special needs are able to freely navigate and move around the building which is equipped with ramps, elevators, etc. At the time of the site visit, the library was not equipped with learning resources dedicated to students with special needs (Braille, audio-reading software, etc). As far as adapting teaching methods and plans, the panel is not yet able to assess if these will be adapted to students with special learning needs.

The library spaces include: reading hall, library staff office space, meeting and group workspace, IT equipment space. The institution has developed regulations for the usage of the library. The reading hall is equipped with appropriate inventory, including computers connected to internet. However, the panel has observed during the visit that the library is not equipped with printer, copy machines, and scanners and it is not connected to Wi-Fi. There are 440 books in the library dedicated for the implementing of two programs, all purchased by the founder organization. The main literature mentioned in the syllabus is available at the library.

The panel noted that the librarian has the appropriate competence in the library, but it does not have the language competencies to accommodate international students and staff. The library is available for students and staff six day per week. Students can use the library's electronic search system and an electronic library catalogue and have the possibility of home loans.

The college has developed a *Regulation for Management Information Technologies*, which regulates the issues related to information technologies management, data protection and electronic services. The IT infrastructure (computer equipment, software provision, internet) is constantly accessible to the academic community; the panel must note however that the wi-fi has not always been functional during the site visit.

The college uses a set of electronic services and management systems (e-document platform, e-mail, etc), but these are not integrated with each other so as to facilitate the information flow across the institution. The information systems are used for academic and administrative registration processes, regulation of student status and registering academic evaluation data.

The official website of the college serves the communication and information functions, contains contact and other useful information in Georgian language including: strategic plan, organizational structure, procedures of teaching, learning and assessment, staff, annual reports, research strategy and research evaluation framework, employment opportunities and other available services. However, most of these documents are only provided in Georgian language, but their English version is missing.

The main funding source of the college is the founder "English Book" LTD. According to the income statement, balance sheet and solvency ratio of founder organization, the founder organization has enough financial resources to invest in the college.

The funding resources of the college are not diversified, nor is there a sustainable plan to diversify them in the near future so as to ensure adequate and effective risk management. When addressing the concerns related to the risk assessment and management at the college, the panel has learnt that there are no such projections, as the institution is counting that its founder can intervene and rescue.

In regards to the financial position of the LLC University of St. George, the institution provided the panel a pro forma (forecast) budget in which only payroll expenditure is given and it does not include other operating costs such as travel expenses, utility costs, stationery costs, insurance costs, cost savings, etc. There are no other operational expenses and the projection revenue flows by years is not substantiated by concrete facts. It is therefore difficult to assess the financial sustainability by

years. In addition, there is also an unclear connection between the budget and the action plan, as detailed under Standard 1.2.

LLC University of St. George has formal rules of financial management and control system, which ensures lawful, transparent, economical, efficient, and productive use of resources for the achievement of institutional goals. However, at the time of the site visit there were no financial reports or relevant financial statements for LLC University St. George.

## **Summary of Recommendations**

- Ensure that the mission statement defines the institution's role internationally, which are in fact the college's aspirations;
- Revisit the text of the mission statement so as to take into consideration the role of higher education in facilitating students' personal development and ensuring their competitiveness on the labour market;
- Ensure that the mission statement defines the characteristics of the institution based on its type and main directions of its work (profile);
- Ensure that the strategic planning is a participatory process by actively involving students, employers and other stakeholders;
- Align the strategic goals to the institutional mission by adding the societal development component;
- Ensure that the institutional goals are measurable by adding specific KPIs to the strategic plan;
- Revisit the performance criteria in the action plan so that they become measurable;
- Complete the resource allocation in the action plan by setting all the necessary resources (material, financial, human) needed for the implementation of the activities;
- Ensure that the LLC University of St. George possesses in its own accounts the necessary capital for the achievement of its strategic goals;
- Revise the strategic planning methodology so that to support the institution through all the steps of the process;
- Ensure that the strategic and action plans also cover aspects such as student body planning and student services;
- When referring to society contribution, ensure that the strategic planning also includes social, cultural, economic, environmental and other programmes and events; activities facilitating lifelong learning; HEI's academic and scientific staff participates in the discussion of important social issues, offers expert and consultation services, and conducts research for different institutions;
- Clarify the provisions of the Strategy Monitoring and Evaluation Procedure in terms of regularity of reporting and task division for this purpose;
- Ensure that the organisation chart reflects the institutional units, not individual staff members;
- Integrate the founder as a stand-alone organisational structure so that to ensure that its accountability relation with the rector materialises within the institutional framework, not outside of it;
- Develop a formal and coherent reporting system between the rector and the founders so that to increase his accountability towards meeting the organisational goals;
- Clarify and revise the scope of the Academic Council in terms of strategic planning and financial remit;
- Reconsider the composition of the Academic Council and ensure that its members are drawn from the academic area of the college so that to meet its scope;
- Ensure that the responsibilities of structural units of the institution are clearly defined to implement their functions effectively and in a coordinated manner;
- Ensure that the organizational structure of the college ensures the effective implementation of activities defined in its strategic plan;
- Revisit the task division across the institution so that to allow the effective use of data in the strategic and operations management, as well as successfully closing of the quality cycle;

- Ensure that the task division between different organisational units is formalized, transparent and predictable;
- Draft and adopt a procedure for election or appointment of the rector, deans and Academic Councils that is transparent, equitable, and in line with legislation;
- Ensure that the election or appointment to the management positions bodies takes place accordance to predefined requirements based on the discussion of candidates' vision and plans;
- Revisit the Business Continuity Plan so that it covers the assessment and management of financial risks;
- Ensure a realistic plan for diversification of funding sources that is in line with institutional capacity;
- Ensure the resources allocated to the QA Service resources keeps up with the tasks entrusted to this unit;
- Encourage and support all units of the institution to be effectively involved in the implementation of internal quality assurance mechanisms;
- Revisit the understanding of „quality management“ so that it is driven by internal preoccupations for quality enhancement rather than external processes;
- Support the development of quality culture across the institution;
- Clarify the task division between the college and its foreign partner in regards to the quality monitoring and management in the study programmes;
- Ensure that all individuals and units engaged in the management of quality across the institution are equipped with the necessary competencies to serve their role;
- Ensure a coherent and integrated interaction/link between the strategic and operations management and the quality assurance system, where the latter supports the decisions of the former;
- Revisit the scope of the QA system so that it clarifies its role in the monitoring and reporting on the achievement of the strategic and action plans progress;
- Ensure the implementation of a consistent PDCA cycle in the quality assurance system so that it develops the capacity to detect irregularities and provide potential causes and solutions for them;
- Improve the entire organization of Human Resources management so that it follows a clear task division and logical flow of all related processes: induction, professional development, performance review;
- Ensure that the QA system includes instruments designed to evaluate the perception of graduates; evaluate the quality of administration and services and resources; monitoring mechanisms for students' academic performance;
- Ensure that the Code of Ethics is a generally applicable document for the entire college community – academic staff, students, administrative staff – that includes only provisions related to ethical expectations and behavioural norms, while the academic performance and expectations are regulated through different instruments;
- Revise the organisational chart in order to ensure a more coherent task division in terms of Code of Ethics implementation, including for administrative staff;
- Revisit the Code of Ethics so as to provide the definitions and sanctions for conflict of interest, incompatibility and plagiarism so that these are not spread across other internal documents;
- Increase the dissemination of provisions in terms of conflict of interest and incompatibility, so that all staff know what is expected of them in this regard;
- Pursue with the initial plans of acquiring an anti-plagiarism software as well as delivery of classes for this purpose;
- Ensure that the principle of academic freedom is promoted across the entire academic community;
- Ensure that the programs are aligned to the national context and needs;
- Ensure that the program development is a participatory process that engages the internal and external stakeholders;
- Elaborate and integrate amongst the mechanisms for QA a satisfaction survey for graduates;
- Follow the formal process described in the policy document regarding Program Development;
- Ensure that the Academic Council is revising the programs and formally approves them;

- Revise the reasons for program annulment;
- Revise the program development monitoring aspects so that they are fit for purpose;
- Provide satisfactory arrangements for students to smoothly complete their education in cases of annulling of programmes;
- Ensure that the qualifications awarded and learning outcomes are adjusted with National Higher Education Qualifications Framework of Georgia;
- Revise the calculation of ECTS credit for dissertation and overall across the syllabi;
- Revise the syllabi for both programs so that to meet the NCEQE requirements related to the structure and content of the educational programmes;
- Develop a program catalogue and make it publicly available for all interested parties;
- Ensure that each assessment component includes the minimum margin of competency;
- Develop guidelines for dissertation;
- Clarify the task division between the college and its foreign partner in regards to the final assessment; ensure the internal regulations are formally adjusted accordingly;
- Revise the learning assessment components so that they reflect the precise scoring for each grade;
- Design and implement a clear process to ensure the fitness of the assessment methods in measuring the achievement of the learning outcomes;
- Revise the appeals system so that it is more clear, precise and transparent;
- Ensure that the procedures for hiring academic, scientific, invited, administrative, and support staff are transparent and objective, and followed consistently in practice;
- Clarify the task division between the HR and QA services in terms of the performance review system for all staff;
- Revisit and improve the overall management of the performance review system for all staff – assigned responsables, design and conduct instruments, data collection, data aggregation and analysis, decision making, monitoring – in a transparent and predictable manner;
- Clarify how are the staff performance review evaluation results impact the system for remuneration and encouragement;
- Clarify and implement accordingly the onboarding program for academic staff;
- Revisit and improve the overall management of the staff development system for all staff – assigned responsables, identify training needs, budget allocated, training provided, impact assessed, monitoring – in a transparent manner;
- Ensure that all instruments used for staff evaluation and performance review are fit for purpose and provide sufficient detail to serve as a basis for improvement;
- Provide benchmarks for all staff and the work completed by them in order to effectively manage the institution's activities;
- Provide benchmarks for all staff in order to effectively carry out their educational, research, and administrative activities;
- Ensure that the official website of the college, as well as all documents available there are also available in English language;
- Provide a clear Guidebook to help students understand the structure and hierarchy as well as responsibilities of each structural unit of the college;
- Conduct satisfaction surveys amongst college graduates regarding their personal, professional and academic development;
- Revisit the typology and criteria for fee waivers so as to separate the two scopes and provide a better support to low SES students;
- Ensure that the institutional budget includes funding for research, so as to support institutional objectives;
- Develop a coherent strategy of determining research priorities;
- Revisit the infrastructure and resources allocation so that suitable spaces are also dedicated to research, especially in the light of the Research Centres being planned to open soon;
- Provide a more specific resource allocation in the research area of the Action Plan;
- Strengthen the research component in the programmes curriculum;
- Develop methodology to measure the impact of research results;
- Develop a clear vision of being an implementer of research and development activities;

- Ensure that the dynamic of funding allocated for research is reflected in the budget;
- Develop a clear strategy for attracting new researchers;
- Clarify the mechanisms for the evaluation of effectiveness of future research centres, as well as evaluation of research impact assessment;
- Ensure that the lawful possession of fixed assets is based on written agreements and registration of such rights into the Public Registry, at least a period of authorization to be granted;
- Ensure the lawful possession of liquid assets, supported by written evidence, at least a period of authorization to be granted;
- Align the infrastructure to the institutional goals by allocating suitable spaces dedicated to research;
- Finalise the sanitary/hygienic units;
- Ensure that fire equipment is located on each floor of the building, in a visible area;
- Instructions relating to health and safety should be made available in English as well;
- Reconsider the space destined as a medical cabinet, which should be equipped with a proper medical bed, natural lights, natural ventilation, and constant supply of hot water;
- Ensure that all spaces destined as teaching classrooms have natural light possibilities;
- Ensure that the library is equipped with learning resources dedicated to students with special needs;
- Ensure that the library offers possibilities for using printer, copy machines, and scanners;
- Expand the Wi-Fi network so as to include the library;
- Ensure that the library services are available to all future students, including international, by aligning the language capabilities of the library staff, as well as providing the Library regulations in English;
- Allocate suitable infrastructure and facilities to research activities, considering the institutional aspirations in this regard;
- Revisit the arrangements that gives the college access to the electronic library network through the Georgian Association of Libraries, and not only to the founding organisation;
- Reconsider the office space dedicated to secretarial relations with the student so that it is suitable for the projected enrolment numbers;
- Substantially improve the English translation of the institutional website so that to ensure it provides all the information required by NCEQE standards; amend the Georgian version as well so that it covers the missing elements, such as mission statement;
- Ensure that the Wi-Fi connection is constantly and continuously accessible to students and staff.

## Summary of Suggestions

- Revisit the wording of the mission statement so as to clarify what does „integrating it into the international educational field” means;
- Reword the mission statement so as to reflect the uniqueness of the institution;
- Consider a wider societal consultation when making such a big decision as establishing a college, responding to the visionary questions relating to the college’s role and work in society;
- Develop realistic agreements with local universities with the same educational programs to support students transfer in case of program closure;
- Determine the margins for low academic performance;
- Adjust the assessment approach so that it is formative rather than summative; for the achievement of the learning outcomes it is preferable if the assessment is divided into more than 2 components;
- Ensure partnership agreements with organisations and institutions specifically compatible with the profile of the students and graduates;
- Ensure that the institutional website includes the link to the library;
- Provide an integrated information/management system accessible for and by all areas of the institution;
- Increase the institutional effort to diversify the funding sources;
- Improve institutional mechanisms for financial risk assessment and management;

- Ensure that the pro-forma budget, includes operational expenses and the projection revenue flows;
- Improve the connection between the strategic planning process and financial management.

## **Summary of the Best Practices**

- Programs content developed by European University with good practice in Teaching Excellence;
- Intended training of local academic personnel by Buckingham University trainers;
- The planned system of tutorials for students;
- The blind assessment system by Buckingham University.



## Summary Table

	Standard	Complies with Requirements	Substantially complies with requirements	Partially Complies with Requirements	Does not Comply with Requirements
1.	<b>Mission and strategic development of HEI</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.1	Mission of HEI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2	Strategic development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.	<b>Organizational structure and management of HEI</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1	Organizational structure and management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2	Internal quality assurance mechanisms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.3	Observing principles of ethics and integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	<b>Educational Programmes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1	Design and development of educational programmes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.2	Structure and content of educational programmes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.3	Assessment of learning outcomes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4	<b>Staff of the HEI</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1	Staff management	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.2	Academic/Scientific and invited Staff workload	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<b>Students and their support services</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1	The Rule for obtaining and changing student status, the recognition of education, and student rights	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2	Student support services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<b>Research, development and/or other creative work</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.1	Research activities	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.2	Research support and internationalization	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.3	Evaluation of research activities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	<b>Material, information and financial resources</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.1	Material resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7.2	Library resources	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.3	Information resources	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.4	Financial resources	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## Signature of expert panel members

1. Anca Prisacariu (Chair)
2. Davit Sikharulidze (Member)
3. Natia Tchigvaria (Member)
4. Maka Gvelesiani (Member)
5. Ana Mikhelidze (Member)

# Compliance of the Authorization Applicant HEI with the Authorization Standard Components

## 1. Mission and strategic development of HEI

Mission statement of a HEI defines its role and place within higher education area and broader society. Strategic development plan of HEI corresponds with the mission of an institution, is based on the goals of the institution and describe means for achieving these goals.

### 1.1 Mission of HEI

Mission Statement of the HEI corresponds to Georgia's and European higher education goals, defines its role and place within higher education area and society, both locally and internationally.

#### **Descriptive summary and analysis of compliance with the standard component requirements**

According to the self-evaluation documents submitted by the institution (Annex 1.2. of the SER), the mission statement of the college is as follows:

*„To introduce a modern, Western system of learning and research and by integrating it into the international educational field to take part in the development of the country. The system should ensure the creation and sharing of knowledge and should be recognised as being representative of educational and academic fields as well as ordinary citizens, private and public organisations and civil sector representatives.“*

It is evident from the text of the mission statement that the college aspires to align the institution to western standards and integrate it in the international educational field in order to contribute to the development of the Georgian society. However, the wording „integrating it into the international educational field“ does not clarify if the institution aspires to be competitive internationally and/or to attract international students or to only be aligned to the said international standards; the panel has clarified during the site visit that it is the philosophy of the institution to encompass all three elements. In order to better reflect these institutional aspirations to the general public, the panel suggests for this specific wording to be clarified.

The college mission statement defines the institutional role locally, but not internationally. Again, the panel has clarified during the site visit that the college sees its role globally, and even to „change the universe“ (according to the SER), but in order to communicate to all interested parties its institutional role in the international landscape, this wording should be clarified.

The mission statement takes into consideration the role the institution has in the knowledge creation and dissemination; however, the role of the college in developing active members of the society, as well as facilitating students personal development and ensuring their competitiveness on the labour market is currently not underlined in the text of the mission. The mission statement reflects its focus on teaching as well as research, but it does not include the profiles it wishes to include in its work (profiles of its study programs).

As it stands now, the mission statement does not reflect the uniqueness of the institution and it could be easily transferred to other HEIs in Georgia (in a snap comparison on several websites, four mission statements of Georgian universities have been identified as following a similar line of thinking). As the strategic plan acknowledges „the university is distinguished by its different perspective on higher education issues“, as well as the „uniqueness in its learning model and approaches“, the panel considers that the institution should increase its efforts towards reflecting this aspect into its mission statement text.

The mission statement is shared by the community of the institution; as observed during the interviews the panel has conducted, most of the college employees are able to summarise the

general lines included in the mission – „establishing the best Western values and society development“, „contribute to the development of the society by establishing international standards“, „diploma highly skilled and recognisable“, „bring European quality to Georgian society“, „bring an interesting and unique experience to students“, „generate social impact“, „establish innovative processes in our social environment“, etc. However, the institutional mission is not published on the website of the college in an easily accessible and intuitive location (in Georgian or in English). Therefore, considering that the college might want to disseminate its mission to all its interest groups (external stakeholders, prospective students, parents, foreign partners, society at large), the panel considers that the mission statement should be made publicly available on the institutional website.

#### **Evidences/indicators**

- Institutional mission statement;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that the mission statement defines the institution's role internationally, which are in fact the college's aspirations;
- Revisit the text of the mission statement so as to take into consideration the role of higher education in facilitating students' personal development and ensuring their competitiveness on the labour market;
- Ensure that the mission statement defines the characteristics of the institution based on its type and main directions of its work (profile).

#### **Suggestions:**

- Revisit the wording of the mission statement so as to clarify what does „integrating it into the international educational field“ means;
- Reword the mission statement so as to reflect the uniqueness of the institution.

#### **Best Practices (if applicable):**

*Not applicable*

#### **Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☒ Does not comply with requirements

### **1.2 Strategic Development**

- HEI has a strategic development (7-year) and an action plans (3-year) in place.
- HEI contributes to the development of the society, shares with the society the knowledge gathered in the institution, and facilitates lifelong learning
- HEI evaluates implementation of strategic and action plans, and duly acts on evaluation results.

## **Descriptive summary and analysis of compliance with the standard component requirements**

The college has developed a Strategic Plan for the timeframe 2019-2025, prepared by the *University Strategy Planning Working Group* which has been specifically established for this purpose. The group has in its composition the following: Rector, Head of Legal service, Head of Financial service, Head of International Relations service, Head of Administration, Dean of Business Department, Head of Public Wider Engagement service, Professor of Business department, Dean and researcher of Economics Department, Professor of Politics Department. The Strategic Framework includes 6 strategic aims, as follows:

1. Institutional strengthening;
2. Organisational strengthening;
3. Research activity strengthening;
4. Improvement of learning quality;
5. Internationalisation of teaching and research;
- 6s. Awareness raising and gaining authority.

Each strategic goal has been allocated between 3 and 7 strategic tasks that contribute to its achievement. Each of the respective tasks includes specific activities detailing the steps to the task implementation. The set goals, tasks and activities are generally in line with the institutional mission, vision and values. However, as the mission statement of the institution states that the main goal of the college establishment has been the societal development, the panel considers that the strategic plan should reflect specifically how is that planned to be achieved, which is not the case at the moment. The strategic plan is generally achievable; however, the specific point when the strategic goals, tasks and activities can be declared achieved cannot be determined by the panel (or by the institution itself!) considering that many of these are not measurable. Instead, very general projections are made, for example: „the university will initiate exchange programmes. Memorandums will be signed for the development of exchange programmes with international universities and the University will join "Erasmus +;" (but it does not clarify how many exchange programmes, how many memorandums, how many students will benefit from an exchange programme, institutions from what regions), or „Research activity will be carried out" (but it does not clarify what kind of research, in what fields, how many research products, how many research projects, what funding generated from research), and „Structural units will be staffed and advertising for/hiring the necessary staff/recruitment will be carried out" (but it does not clarify how many units, how many staff, how many advertisement websites), among others.

Therefore, it is unclear for the panel how will the college evaluate the progress of its actions, if they are heading in the right direction, with the right speed and, most importantly, when the institution has achieved its goals. The panel believes that the monitoring of the strategic plan implementation will be challenging unless measurable Key Performance Indicators are set and correlated with specific timelines. Moreover, the panel is concerned about the capacity of the institution to use its strategic and action plans as sufficient support for decision making; when this aspect was addressed during the interviews conducted by the panel, the management of the institution did not seem to be aware that this is in fact the coherent use of the strategic planning processes.

The institution has also developed an Action Plan for the time-frame 2020-2026, where the academic year 2019-2020 is not included. The action plan extracts all goals, tasks and activities of the strategic plan and narrows them down by allocating monthly assignments, responsible persons, performance indicators, operating goals and budget. Even if the Action Plan does provide Performance Indicators, most of them are not measurable either, for example: „created working groups" (but it does not clarify how many working groups, engaging how many staff members), „Trainings/retraining conducted" (but it does not clarify how many trainings, engaging how many staff members), and „Extracted funding" (but it does not clarify in what amount).

Also, the action plan is budgeting the specific goals, tasks and activities. However, the funding is allocated for the tasks, but not divided for each of its actions. For example: a certain amount goes to „encourage research activities” globally, but it is not clear how much will it go into „Research funding, Funding to attend research conferences, Support and encourage Research Personnel and Centres in Obtaining Financing for Research, Organise local conferences” (the assigned activity components). Also, the resource allocation only takes into consideration the finances, but it does not extrapolate the necessary material and human resources needed for their implementation.

The institution does not *de facto* have any financial resources in the accounts legally associated to the LLC University of St. George. As the funds are only available with the founding organisation, the panel has difficulties assessing the LLC University of St. George capability of meeting its strategic goals as it does not literally own the capital to do so.

The institution has developed a Strategic Planning Methodology. It is the opinion of the panel that this document did not and does not respond to the needs it is expected to, as it is only a descriptive story of the steps that have led to the creation of the strategic plan.

According to the Strategic Plan, „research was carried out by the University which examined the requirements of the labour market and the existing need of specific skills. Statistical data was collected and presented within the research framework and secondary literature was reviewed. Leading companies in Georgia were interviewed through specific questionnaires and revealed the needs and demands of the labour market.” However, no students and external stakeholders were present in the composition of the Strategy Planning Working group (according to the composition reflected in appendix 2 of the Strategic Plan). According to the SER „it is desirable for the next strategic plan to take into considerations the people’s opinions on what they think about the university’s role and work in society. what should a university do in a society? What particular aim should university have in order to improve their lives?”. It is unclear for the panel why these questions could not have been raised to the external stakeholders when the current strategic plan was developed.

The strategic and action plans cover all aspects which are vital to the operation of the institution: institutional development, human and material resources, infrastructure, research, quality assurance, internationalisation, as well as planning and implementation of educational programmes. However, the student body planning and student services are not included in the strategic planning process.

The panel believes it is too early to assess the contribution of the college to the development of the society, so the panel can only evaluate what the institution plans to do in this regard; while this is claimed to be the main scope of the institution’s establishment, the panel believes that the strategic plan fails to reflect specifically how will the institution contribute to Georgian society development. The strategic plan does not make reference to the areas included in the NCEQE standards, such as: social, cultural, economic, environmental and other programmes and events; activities facilitating lifelong learning; HEI’s academic and scientific staff participates in the discussion of important social issues, offers expert and consultation services, and conducts research for different institutions.

Naturally, since the strategic plan is in its inception, the panel cannot assess the *de facto* monitoring and reporting on its implementation as well as adjustments made, but only the process the institution has planned in this regard. The college has developed a Strategy Monitoring and Evaluation Procedure, which provides the process for the monitoring the implementation of the strategy. However, the panel has found a few contradictions in the document and in the SER – „Monitoring the implementation of the strategy is conducted by the Head of the University Administration and Deans/The academic council presents the Head of Administration and Deans on progress of strategic plan/is carried out by a monitoring group whose composition is approved by the Rector”; it is not clear for the panel which version applies and a monitoring group has not been appointed by the time of the site visit. Also, it is confusing if the reporting on the monitoring the implementation of the strategy is to be done every semester or quarterly.

**Evidences/indicators**

- Strategic Plan 2019-2025;
- Action plan 2020-2026;
- Strategic Planning Methodology;
- Strategy Monitoring and Evaluation Procedure;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

**Recommendations:**

- Ensure that the strategic planning is a participatory process by actively involving students, employers and other stakeholders;
- Align the strategic goals to the institutional mission by adding the societal development component;
- Ensure that the institutional goals are measurable by adding specific KPIs to the strategic plan;
- Revisit the performance criteria in the action plan so that they become measurable;
- Complete the resource allocation in the action plan by setting all the necessary resources (material, financial, human) needed for the implementation of the activities;
- Ensure that the LLC University of St. George possesses in its own accounts the necessary capital for the achievement of its strategic goals;
- Revise the strategic planning methodology so that to support the institution through all the steps of the process;
- Ensure that the strategic and action plans also cover aspects such as student body planning and student services;
- When referring to society contribution, ensure that the strategic planning also includes social, cultural, economic, environmental and other programmes and events; activities facilitating lifelong learning; HEI's academic and scientific staff participates in the discussion of important social issues, offers expert and consultation services, and conducts research for different institutions;
- Clarify the provisions of the Strategy Monitoring and Evaluation Procedure in terms of regularity of reporting and task division for this purpose.

**Suggestions:**

Consider a wider societal consultation when making such a big decision as establishing a college, responding to the visionary questions relating to the college's role and work in society.

**Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☒ Does not comply with requirements

## 2. Organizational Structure and Management of HEI

Organizational structure and management of the HEI is based on best practices of the educational sector, meaning effective use of management and quality assurance mechanisms in the management process. This approach ensures implementation of strategic plan, integration of quality assurance function into management process, and promotes principles of integrity and ethics

## 2.1 Organizational Structure and Management

- Organizational structure of HEI ensures implementation of goals and activities described in its strategic plan
- Procedures for election/appointment of the management bodies of HEI are transparent, equitable, and in line with legislation
- HEI's Leadership/Management body ensures effective management of the activities of the institution
- Considering the mission and goals of HEI, leadership of the HEI supports international cooperation of the institution and the process of internationalization.

### **Descriptive summary and analysis of compliance with the standard component requirements**

First and foremost, it is important to mention that, at the time of the visit, the university had no management, but a *projected* management that would come into effect should the institutional authorisation be approved (as confirmed by the contract signed between the „rector“ – director of the LLC University of St. George and the founding members of the institution). Whilst the respective person is the legal representative of the University of St. George as far as the LLC status is concerned, there is no document that would formalize the appointment of the „rector“ by the time of, and during the site visit.

Secondly, the panel was confused at the sight of the institutional organisation chart and is unsure what examples of good practice from other educational institutions the college has used. Specifically, an organisation chart should distinguish units of the institutional structure, not individuals: for example, different boxes are drawn for the Quality Assurance Service, Head of the Quality Assurance Service, Head/Direction Specialist and Educational standards and research specialist – all staff members under the QA Service. Likewise for the Documents Processing Officer under the Chancellery, the four staff members under the Service of broad cooperation with public, the three staff members of the Students' career development service, among others. The panel believes that the college should align its institutional structure to general organisational management structures, reflecting units instead of individuals; this will avoid very often periodical revisions or having void boxes in the chart, based on recruitment.

Generally, considering its legal status as LLC, there is quite a high autonomy in how the university is organizing its structure and organization chart.

According to the Statute of the institution, the Rector is appointed by the founder of University for a term of 7 years, which has the statutory responsibility to appoint and dismiss him, and supervise his activities. In other words, the rector is accountable to the founder; however, this accountability is not reflected within the institutional procedures considering that the founder of the institution is not included in the organisation chart. In fact, there is no clear and formal reporting process from the rector to the founders; when the founders were asked how do they plan to monitor and supervise the rectors activity, through what instruments and with what regularity, the panel found that the procedure is in fact reduced to a „we will just check, surveys, feedback from the departments, etc.“

Moreover, considering the rest of the responsibilities granted to the founder through the Statute, its supervisory role should be reflected in the organisation chart.

According to Art. 8 of the Statute „the academic council is the highest representative body of the university“, whose responsibilities are also described in the Statute. However, the panel has identified several inconsistencies in its operations:

1. According to the SER, the Academic Council is „the highest level of the academic units, where decisions are made, and which reviews and makes decision on every academic and related issues (except the finances).“ However, According to the Statute, „The academic council is the highest representative body of the university and has amongst its

responsibilities to develop and approve strategic plan of the University". The statement in the Statute indicates the role of the council in the strategic planning process, which has substantial financial implications; this contradicts the statement of the SER which clarifies that decisions regarding finances are not made by the Council.

2. The number of Council members is unknown; in relation to this, the Statute says that „it consists of: Rector as Chairman of the Academic Council and Academic Council members: 6 specific administrative units specifically listed, also each department has an equal number of representatives in the Academic Council (without specifying how many). The number and composition of representatives is approved by the Rector. It is necessary that the student self-governance has its representative in the Academic Council. The number and composition of student representatives is approved by the Rector".
3. According to the Statute "as the Members of the Academic Council are elected the heads of the University Administration, Legal, Financial Services, Service of broad cooperation with public, Students' Career Development Service and International Relations Service". Considering the scope of the Academic Council, the panel is confused about the high number of administrative units; it is unsuitable that its composition is dominated by administrative staff which might not have the competency and the legitimacy to decide over academic matters. Also, it is unclear why the Statute uses the words „elected" since the representatives of these administrative units get directly appointed by the rector in these positions and, according to the interviewees the panel has met, the position in the Academic Council comes by default with the statute of Head in one of the respective administrative units.

Generally, the responsibilities of structural units of the institution are not clearly defined and divided to implement their functions effectively and in a coordinated manner, and the organizational structure of the college does not ensure the effective implementation of activities defined in its strategic plan. This is not only justified by the inconsistencies (underlined above) in the structure of the Academic Council and accountability of the rector, but also the task division in quality assurance area (see Standard 2.2.), the monitoring of the strategic and action plans implementation (see Standard 1.2.) and the general use of data to support decision making and the usage of the information coming from lower organisational units, in the strategic and operations management, as identified during the meetings conducted by the panel. Moreover, when addressing the fitness of the structural units to implement to their functions effectively and in a coordinated manner, the management of the institution reflected the spontaneous nature of its organisation operations by stating that when a problem is found, the rector has the right to create a specific working group. This not only reflects the unclear and inconsistent task division across the college but the management's lack of vision towards the formality, transparency and predictability required of processes and procedures in an educational institution.

At the time of the site visit, there was no procedure for the election or appointment of the Rector, Dean, Academic Council, and others. Moreover, during the meetings it has conducted, the panel learned that the institution is not able to describe the process that led to the appointment of the rector; we did find out that it was „based on qualifications, mission, vision" and that „there were 7 other candidates", but the process was overall concluded with „it was just decided", „he was chosen". There is no evidence of formal provisions of predefined requirements or discussion of candidates' vision and plans. The same applies to the appointment of the deans and members of the Academic Council. The panel therefore concludes that the institution cannot ensure that the election/appointment to the management bodies of the institution takes place accordance to predefined requirements and based on the discussion of candidates' vision and plans; there is no procedure approved, transparent, equitable, and in line with legislation, nor were these principles identified in practice.

Considering that the institution has not started fully operating, the panel cannot assess whether the decisions of the institutional management related to academic, scientific and administrative issues, are made in timely and effective manner.

The institution has developed the *Rule of Procedure of the University of St. George*, which regulates document processing within the institution and these correspond to the established



legislation. According to the institutional provisions, documents in the electronic system (e-document) are first sorted by their content, then they are assigned according to their numbers and finally the scanned versions are uploaded in the proper section.

The institution has assigned an individual responsible to report to NCEQE on the maintenance of the registry of educational institutions, within the chancellery office.

To ensure the business continuity of all major processes, the university has a Business Continuity Plan, which assesses the potential risks, probability, impact, measures of prevention, and process in case of an incident. The plan takes into account some possible risks, measures of prevention and in case the prevention is not possible, the college is describing the process in case of an incident. However, the panel found that the institution has no risk assessment and alternative plans as far as finances are concerned. For example, the institution is planning to recruit 200 students in the 2019-2020 academic year should the authorisation be approved, and its financial planning is partly relying on this income. In case this number of students is proven to be challenging, which will impact the income of the college, the risk management of the institution is that „any financial risk is covered by the founder“. When talking about reducing its financial dependency to the founder and student fees, it is the view of the management that this can be achieved if the college „conducts SOME research consulting, provides SOME research services, and the training center“. However, the panel finds that these alternatives are not achievable or realistic at this stage, as the institution is not prepared to conduct such activities for the time being, nor is the view behind them very clear for the college itself.

The institution has developed an *Internationalisation policy*, which defines its purpose as following:

- Stage I - The University will become the leading higher education institution in Georgia by 2026, providing high quality of teaching and research and academic freedom;
- Stage II - The University will become one of the leading higher education institutions in Europe and Asia (among 1000 world universities) by 2033;
- Stage III - The University will become one of the best higher education institutions by 2040 (among 100 best universities of the world).

The panel observes that these purposes are very aspirational, but finds problematic that the institution does not know exactly how to get there.

Whilst there is no evidence of supporting the international mobility of students and staff, or participation into international research activities, as the institution has not started operating yet, there is a substantial prioritisation of the internationalisation area derived from the connection with the institutional mission, strategic plan, as well as the institutional cooperation with the foreign partner. As these ambitions have not yet been put into practice, the panel cannot yet assess how the internationalization results are effectively utilised in the work of the institution, besides its partnership with the University of Buckingham.

#### **Evidences/indicators**

- Organisation chart;
- Functions of structural units (extract from the Statute);
- Business Continuity Plan;
- Internationalization Policy;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that the organisation chart reflects the institutional units, not individual staff members;

- Integrate the founder as a stand-alone organisational structure so that to ensure that its accountability relation with the rector materialises within the institutional framework, not outside of it;
- Develop a formal and coherent reporting system between the rector and the founders so that to increase his accountability towards meeting the organisational goals;
- Clarify and revise the scope of the Academic Council in terms of strategic planning and financial remit;
- Reconsider the composition of the Academic Council and ensure that its members are drawn from the academic area of the college so that to meet its scope;
- Ensure that the responsibilities of structural units of the institution are clearly defined to implement their functions effectively and in a coordinated manner;
- Ensure that the organizational structure of the college ensures the effective implementation of activities defined in its strategic plan;
- Revisit the task division across the institution so that to allow the effective use of data in the strategic and operations management, as well as successfully closing of the quality cycle;
- Ensure that the task division between different organisational units is formalized, transparent and predictable;
- Draft and adopt a procedure for election or appointment of the rector, deans and Academic Councils that is transparent, equitable, and in line with legislation;
- Ensure that the election or appointment to the management positions bodies takes place accordance to predefined requirements based on the discussion of candidates' vision and plans;
- Revisit the Business Continuity Plan so that it covers the assessment and management of financial risks;
- Ensure a realistic plan for diversification of funding sources that is in line with institutional capacity.

**Suggestions:**

*Not applicable*

**Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☒ Does not comply with requirements

**2.2 Internal Quality Assurance Mechanisms**

- Institution effectively implements internal quality assurance mechanisms. Leadership of the institution constantly works to strengthen quality assurance function and promotes establishment of quality culture in the institution.
- HEI has a mechanism for planning student body, which will give each student an opportunity to get a high quality education.

## **Descriptive summary and analysis of compliance with the standard component requirements**

The institution has developed a Quality Assurance Guide, which regulates the principles, processes, mechanisms and instruments of the internal quality management system, that have been „developed and adopted to ensure that the university fulfils its mission and achieves its goals“. According to the Guide itself, the document has in mind that „one of the main values of the university is that all the services, departments and personnel employed at the university will work to develop the quality of their work and establish a high standard at the university.“

The Quality Assurance System has been designed „to ensure that quality and inspection is carried out consistently and systematically. This process is planned in order to carry out - planning, implementing, checking, and responding - cycle“. For this purpose, the institution has included in its organisation chart the Quality Assurance Service; „the office and all its activities are based mainly on the authorization standards of NCEQE“. At the time of the site visit, the service considers that it is equipped with the necessary human, information and material resources to conduct its assigned activities, but in the future this could be supplemented.

Considering that the Quality Assurance System has only now been designed and has not reached the implementation stages, the panel cannot assess whether other structural units at the institution accept a common ownership for quality values. In fact, the panel is concerned about the commitment for quality enhancement and quality values even within the QA Service itself: according to the interviews conducted by the panel, the drafting of the Quality Assurance Guide was driven by the external processes the college is currently undergoing (authorisation, validation, etc) and not by the internal commitment for the constant quality improvement or conducting self-evaluation simply in order to reflect on the quality of its operations. Moreover, at the moment, the level of development of the quality culture across the institution does not support the development of the college operations. The very idea of quality culture is not well defined, spread or promoted across the institution. The institution should increase its efforts to promote the development of quality culture as a common understanding of quality values, for which every individual of the organisation is responsible, a set of shared ideas, beliefs and values about quality united when everyone inside the academic community is sincerely engaged and motivated.

In terms of other units' involvement in quality processes, there is a very big gap and discrepancy between the plan and the actual capacity. For example, the QA Service is supposed to provide quality monitoring data to the Academic Council in order to support its decision making; however, the staff currently sitting in the Academic Council have no understanding of notions such as benchmarks and KPIs, very little knowledge of the institutional strategic plan and seem very confused about the support that the quality assurance system should provide in the strategic and operations management of the college. The other units interviewed by the panel did not acknowledge their role and contribution to the QA system.

The following have been defined as components of the Quality Assurance System: defining quality standards, assessment of compliance with quality standards and quality improvement. The panel understands that the quality system has not yet been implemented; however, the views of the institution regarding the role of the QA system in its future operations are quite clear. Based on the meetings conducted during the site visit, it is the impression of the panel that the institution does not seem to understand the notion of „evidence based decision making“, as it has resulted that the „rector conducts the work based on founders' demands“ and the QA Service is also accountable to the founders. As detailed under Standard 1.2., the institution does not follow a coherent Plan-Do-Check-Act (PDCA) cycle where the QA system has the role to provide data on the progress of the strategic and action plans, as well as to detect irregularities and provide potential causes and solutions for them.

According to the QA Guide, the Quality Assurance system instruments include surveys of students, employers, academic and non-academic personnel; Planned Group Interview; Assessing the quality of research; Peer Review; Self-assessment of academic staff; Self-assessment of researchers; External evaluation. However, it is not clear how are these used to ensure the continuous assessment and further development of the institution's activities. At this stage, the

end-destination of these instruments implementation is the Academic Council (institutional or departmental level) which is assigned to decide on the measures to be taken for quality improvement.

The performance review system is planned to be conducted as follows:

1. For academic staff, the system will be based on: student surveys, academic and scientific production (conference participation, publication, etc), peer review, self-evaluation. These instruments have not yet been elaborated, so the panel is unable to assess their quality and fitness.

According to the meetings conducted by the panel, the data collected from these instruments will be sent to the Academic Council; the Human Resources staff are not engaged in the performance review or any area of HR management for academic staff, including induction, professional development, etc.

2. For administrative staff, the performance review lies with the HR manager and will be based on line manager review, peer review and self-assessment, and will be conducted at the end of each year. However, during the meetings conducted by the panel, it seemed that the HR manager found out about these instruments during the meeting, from the Head of the Legal Service. According to the interviews the panel has conducted, the Human resources department prepares the data in order to guide the decisions made by a group led by the rector.

There has been no reference of student and academic staff survey evaluating the performance of administrative staff. The panel has been provided with an *Evaluation table for non-academic staff*; however, it is not clear how this will be put into operation and by whom.

When asked about how their performance will be evaluated, the academic and invited staff the panel has met during the site visit referred to evaluation forms from students and from the institution (but were not able to indicate specifically what individual or entity), as well as self-reflective form, to be conducted at the end of each semester.

As also identified under standard 2.1., it is the impression of the panel, as resulted from the meetings conducted during the site visit, that there is no clarity among the college staff about who does what, who produces survey templates, who conducts them, who merges and analyses the data, who has the development-led discussion with the academic/administrative staff, how is the data specifically used in the staff performance review (including decisions regarding termination of contract, promotion, incremental pay, etc) and who monitors improvement. The panel understands that higher education institutions can operate differently and accepts if these tasks are divided between two different organisational units, as long as everyone is clear about their responsibility and there is a clear communication and logic between them.

The panel can conclude that the quality assurance instruments are processes are not designed to successfully drive towards improvement as there is no clear understanding on how exactly the quality cycle will be closed. For example, a coherent quality cycle in professional development would include identifying training needs, responding to them by allocating an internal budget for this purpose, connect professional development to staff performance review in order to promote on-the-job training, evaluate the impact of professional development on the quality of academic and research activity. Likewise, a comprehensive quality cycle in data collection would include merging all survey data, calculate scores, compare to internal and external benchmarks, discuss scores with the respective individual, monitor the improvement.

The Quality Assurance system does not envisage the monitoring mechanisms for students' academic performance.

The institution has developed mechanisms for the evaluation and improvement of educational programmes in the form of an *Appraisal Procedure and Procedure of Educational Programs* (Chapter IV of the Quality Assurance Guide). Academic and scientific staff, together with students and employers are planned to be actively involved in the processes for the evaluation and improvement of educational programmes. However, the quality guide does not include any instrument engaging the (future) graduates in this process. Also, in terms of the program quality management procedures, there seems to be a contradiction of views between the college and

University of Buckingham: the institution QA staff have declared during the site visit that their foreign partner will not be involved in the programme-level QA processes, whereas the Buckingham university representative is of a totally different opinion and believes it has a determining role in the quality monitoring of the programs, as well as in ensuring that the college addresses the concerning areas.

The Quality Assurance Guide mentions a principle that „all the existing student services should be reviewed and if needed, newly developed services should be created so that the students registered for this program have the appropriate service for development“; however, this statement is not supported by any specific instrument destined for the periodical evaluation of the quality of the institutional services and resources. No equivalent instruments have been located for the evaluation of administration besides a student satisfaction survey which addresses the simplicity of administration. The administration and student services do not seem to be evaluated in depth and their assessment does not include all internal stakeholders that these services are formally destined to support. Therefore, the panel cannot assess the usage of the results for the further improvement of the services and resources.

The institution has developed a *Student body planning mechanism, methodology and benchmarks*, which takes account of human resources (1:10 ratio academic staff/students) and material resources (sqm and computers/student) dedicated to students, as well as sets benchmarks for this purpose.

When asked how does the institution plan to integrate the students in the quality assurance processes, the college representatives the panel has met during the site visit were not familiar that this is even a possibility and could not refer to the kind of student engagement they can provide.

#### **Evidences/indicators**

- Functions of structural units (extract from the Statute);
- Quality Assurance Guide;
- Student body planning mechanism, methodology and benchmarks;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure the resources allocated to the QA Service resources keeps up with the tasks entrusted to this unit;
- Encourage and support all units of the institution to be effectively involved in the implementation of internal quality assurance mechanisms;
- Revisit the understanding of „quality management“ so that it is driven by internal preoccupations for quality enhancement rather than external processes;
- Support the development of quality culture across the institution;
- Clarify the task division between the college and its foreign partner in regards to the quality monitoring and management of the study programmes;

- Ensure that all individuals and units engaged in the management of quality across the institution are equipped with the necessary competencies to serve their role;
- Ensure a coherent and integrated interaction/link between the strategic and operations management and the quality assurance system, where the latter supports the decisions of the former;
- Revisit the scope of the QA system so that it clarifies its role in the monitoring and reporting on the achievement of the strategic and action plans progress;
- Ensure the implementation of a consistent PDCA cycle in the quality assurance system so that it develops the capacity to detect irregularities and provide potential causes and solutions for them;
- Improve the entire organization of Human Resources management so that it follows a clear task division and logical flow of all related processes: induction, professional development, performance review;
- Ensure that the QA system includes instruments designed to evaluate the perception of graduates; evaluate the quality of administration and services and resources; monitoring mechanisms for students' academic performance.

**Suggestions:**

*Not applicable*

**Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☒ Does not comply with requirements

**2.3. Observing Principles of Ethics and Integrity**

- HEI has developed regulations and mechanisms that follow principles of ethics and integrity. Such regulations are publicly accessible.
- Institution has implemented mechanisms for detecting plagiarism and its prevention.
- HEI follows the principles of academic freedom.

**Descriptive summary and analysis of compliance with the standard component requirements**

The institution has developed the Code of Ethics that determines the norms of ethics for students, academic and invited personnel at the University and which is made publicly available on the institutional website in Georgian language, but not available in English. According to the SER, general rules of conduct for the employees are regulated by the internal regulations and other internal legal acts of the university.

The Code of Ethics goes beyond its purpose and provides rights and obligations unrelated to ethics, but rather academic in nature, for example:

*The academic and invited personnel are obliged to:*

- *To continually take care of the academic level; to participate in scientific research and other activities in order to improve their qualifications; to ensure the updating of the syllabus topics in the course of the study taking into consideration the relevant fields;*

- *To ensure fair and objective evaluation of students according to the established rule;*
- *To provide students with comprehensive information on the forms of knowledge and criteria; to give a detailed explanation of the assessment; to assist in improving the achieved results; to hold consultations;*
- *To continuously seek ways to improve, upgrade and fine-tune teaching methods.*

The panel suggests that ethics norms and values, as well as ethical behaviour expectations should be kept separated from the academic obligations (which could be very well kept under the *Academic personnel management policy*). According to the interviewees conducted by the panel, the behaviour and ethical expectations have been separated between the academic and administrative staff precisely because the Code of Ethics for academics becomes quite specific for this area. The panel believes that it is not in the remit of the code of ethics to regulate academic performance and expectations; should the Code be kept to its purpose – to promote and safeguard general ethical conduct – it can be universally applicable for all categories of staff.

The institution has not established an independent Ethics Committee responsible of safeguarding the provisions in the Code of Ethics but, in the case of the violation of the ethics rules, the Academic Council of the respective Department shall consider the disciplinary responsibility of the students, academic and invited personnel. Also, the organisation chart includes the Committee of Research Ethics and Funding in order to „establish ethicalness of the research project and decides whether to finance it or not”.

There appears to be no institutional unit in charge of the analysis and sanctioning of ethical breaches of administrative staff.

The Code clarifies what it considers as ethical breaches, and provides the possible sanctions for such situations. However, the Code does not define the institutional understanding of conflict of interest or incompatibility of positions, and it does not clarify the sanctions in case of conflict of interests. When asked about the institutional definition and expectations of conflict of interest or incompatibility, the academic and invited staff the panel has met during the site visit were not able to recollect such provisions, but have rather explained that they have been in this field for a while so they know the implications.

The Code of Ethics defines the notion of plagiarism, but it does not lay down mechanisms for appropriate response in case of plagiarism.

Both these provisions are separated in the Internal Regulations, but the panel considers that they qualify as ethical norms and should therefore lie in the Code of Ethics.

The institution plans to acquire an anti-plagiarism software in order to safeguard and confirm the originality of academic and research products, as well as to introduce classes on this topic. Both these aspirations are yet to be materialised.

The Statute of the institution promotes the principle of academic freedom by stating that „the main value of the University is striving to the best quality and academic freedom, in which no one related to it will be punished in the search for new knowledge”; however, considering that the institution is not operational yet, the panel cannot assess the actual implementation in practice of this principle across the academic community, nor how do different internal stakeholders feel about the management of the institution promoting this principle.

#### **Evidences/indicators**

- Organisation chart;
- Code of Ethics;
- Internal Regulations;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that the Code of Ethics is a generally applicable document for the entire college community – academic staff, students, administrative staff – that includes only provisions

<p>related to ethical expectations and behavioural norms, while the academic performance and expectations are regulated through different instruments;</p> <ul style="list-style-type: none"> <li>● Revise the organisational chart in order to ensure a more coherent task division in terms of Code of Ethics implementation, including for administrative staff;</li> <li>● Revisit the Code of Ethics so as to provide the definitions and sanctions for conflict of interest, incompatibility and plagiarism so that these are not spread across other internal documents;</li> <li>● Increase the dissemination of provisions in terms of conflict of interest and incompatibility, so that all staff know what is expected of them in this regard;</li> <li>● Pursue with the initial plans of acquiring an anti-plagiarism software as well as delivery of classes for this purpose;</li> <li>● Ensure that the principle of academic freedom is promoted across the entire academic community.</li> </ul>
<p><b>Suggestions:</b> <i>Not applicable</i></p>
<p><b>Best Practices (if applicable):</b> <i>Not applicable</i></p>
<p><b>Evaluation</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Complies with requirements</li> <li><input type="checkbox"/> Substantially complies with requirements</li> <li><input checked="" type="checkbox"/> Partially complies with requirements</li> <li><input type="checkbox"/> Does not comply with requirements</li> </ul>

### 3. Educational Programmes

HEI has procedures for planning, designing, approving, developing and annulling educational programmes. Programme learning outcomes are clearly defined and are in line with the National Qualifications Framework. A programme ensures achievement of its objectives and intended learning outcomes

<b>3.1 Design and Development of Educational Programmes</b>
HEI has a policy for planning, designing, implementing and developing educational programmes.



## **Descriptive summary and analysis of compliance with the standard component requirements**

The institution has developed a document for *Planning Designing and Development of Educational Programs*, which is a part of the *Quality Assurance Guide*. The provision of the document is mentioning that the procedures for the development, approval, amendment and annulment of an educational program is based on the current Laws of Georgia on Higher Education, and on Education Quality Development.

According to the document, the idea about program development could be initiated by any academic person, who works at the institution or on the bases of labour market results, innovation in the field, research priority or cooperation with other universities. According to the interviews and the self-evaluation report, based on the cooperation agreement, both bachelor degree programs are taken from Buckingham University. However, the interviews and presented documents include contradictory information: the representative of Buckingham University mentioned that their policy towards cooperation is to be compatible with local legislation framework even if it can be more tight, and they expect their partner to make any every suitable adjustment according to Georgian laws and regulations. The interview results with institution representatives revealed that the college is not going to change anything in the curriculum or syllabi of the programs, while the top management representatives mentioned that the college is allowed to make some amendments in the program curriculum, and they have readiness after the first academic year to renew and improve programs according to the constantly changing environment and labour market analysis results. The market analysis was provided to the panel as supplementary document.

According to the SER, the development of the program is a participatory process, in which academic staff, accreditation expert, representative of public/private sector, students and service of broad cooperation with public of the institution are involved; the drawn up program must first be submitted to the Quality Assurance Service, in order to evaluate its compliance with the authorization and accreditation standards, which shall be then presented for approval to the Academic Council. The Academic Council will review the compliance of the program with the institution mission and innovations of the field. However, the presented programs have not been amended according to the Georgian laws and regulations so far. Moreover, the Program descriptions provided by the college do not indicate any formal approval by the Academic Council or any other order. Also, when meeting the external stakeholders of the college during the site visit, the panel has learnt that there has been no dialogue between the college and the representatives of the private sector/employers about the type or content of the programs the college is planning to deliver.

To conclude, the panel can confirm that the processes for program planning, designing and development has not been so far a participatory process considering that the programs were basically copied and pasted from the partner university; secondly, the Quality Assurance Guide does not envisage satisfaction survey for graduates, which is one of the stakeholders the college should be consulting.

According to the meetings during the site visit, the panel learned that the college sees itself as pioneers in transferring western knowledge and skills through Buckingham university programs, since it is their view that Georgian universities do not enforce western values. The panel considers, however, that the college might not be fully aware of the educational context of the country or might have not identified the right missing gaps, considering that Georgia is a full member of the Bologna Process/European Higher Education area since 2005.

Articles 27-28 of the Quality Assurance Guide provide the description of the procedure for amendment and annulment, where the same reasons are listed for both procedures: students' low academic performance and assessment/self-assessment of academic personnel. As far as amendments in the programs are concerned, these reasons could be logical, but in case of program annulment the panel considers that annulling a study program because of students' low performance is not adequate. Instead, the institution is rather expected to investigate how and why the results are poor, and try to address the issue; however, the college representatives the

panel have met during the site visit were not familiar with this course of action in case a problem in student performance is identified. Also, it is not explained why these two reasons could be relevant for program annulment. Moreover, the panel find this reason quite subjective and unsupported by evidence, as no margins are defined to reflect the institutional understanding of low academic performance; no explanations are provided as to how self-assessment of academic personnel could be the reason for program annulment.

In case of amending/annulling the program as a result of the decision of National Center for Quality Enhancement, further assurance of the students' education will be implemented in accordance with the Rules of Student Mobility and Recognition of education received during the academic period. While asking what mechanisms does the institution consider to smooth the process of student transfer in case of program annulment, the management of the college mentioned that the institution will move students to Japanese University Massey, or Buckingham University, where they can resume their studies. The panel considers this as very unrealistic, unsuitable and not supported by evidence, considering that:

- the cooperation agreement with the Japanese University Massey is only mentioning students exchange in teaching languages for summer school or only one semester;
- the agreement with Buckingham University does not include receiving the students, which was also confirmed during the interview the panel has conducted with their representative;
- the college justified this decision by the fact that „no university in Georgia delivers western standards“;
- it is completely inappropriate to expect that students should be ready to move to a different country or a different continent in case of program closure.

The college is planning to ensure programs development each semester, where the development and update will be done in accordance to several aspects: one of them is the employers' satisfaction with the skills of students; however, it is not clear how this could be evaluated each semester, and there is no guarantee that all students will be employed. The second aspect for program development and update is the innovations established in other universities: during the meeting conducted with the Quality Assurance Service it was specified that these will be the universities with the same educational programs in Georgia. As mentioned under Standard 2.2. no satisfaction survey has been presented during site visit as these are not elaborated yet. The third aspect for program development and update is the external evaluation of the institution, which includes: evaluation by an external expert, hired by the college and the evaluation by NCEQE.

The qualification of the academic personnel recruited for the implementation of the two programs is fully compatible with program objectives. The panel has learned during the site visit that Buckingham University is taking responsibility to train the college professors before the academic year starts, as well as to monitor the academic process and check final academic performance of students.

#### **Evidences/indicators**

- Matching Skills and Labour Market Needs in Georgia;
- Quality Assurance Guide;
- CVs of academic personnel and invited staff;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that the programs are aligned to the national context and needs;
- Ensure that the program development is a participatory process that engages the internal and external stakeholders;
- Elaborate and integrate amongst the mechanisms for QA a satisfaction survey for graduates;
- Follow the formal process described in the policy document regarding Program Development;
- Ensure that the Academic Council is revising the programs and formally approves them;

- Revise the reasons for program annulment;
- Revise the program development monitoring aspects so that they are fit for purpose;
- Provide satisfactory arrangements for students to smoothly complete their education in cases of annulling of programmes.

#### **Suggestions:**

- Develop realistic agreements with local universities with the same educational programs to support students transfer in case of program closure;
- Determine the margins for low academic performance.

#### **Best Practices:**

Intended training of local academic personnel by Buckingham University trainers.

#### **Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements

### **3.2 Structure and Content of Educational Programmes**

- Programme learning outcomes are clearly stated and are in line with higher education level and qualification to be granted
- With the help of individualized education programmes, HEI takes into consideration various requirements, needs and academic readiness of students, and ensures their unhindered involvement into the educational process.

#### **Descriptive summary and analysis of compliance with the standard component requirements**

The institution is planning to start its academic activities with the launching of two first circle programmes: Business and Management (NQF code 02), qualification awarded Bachelor of Business Administration, and Political Science (NQF code 0702), qualification awarded Bachelor of Arts in Political Science.

According to the program description provided by Buckingham University, the name of the program is „BSc (Hons) Business and Management“ with final award „BSc Business of Science“. The Business and Management program is not fully compliant with the qualification to be granted, according to the National Higher Education Qualifications Framework of Georgia. In the Georgian version of the program description, the title is „bachelorette“ (in line with the qualification awarded), whereas in the SER the title is „Bachelor of Business Administration“.

The learning outcomes of the programmes are not in full compliance with the National Higher Education Qualifications Framework of Georgia, neither as they are reflected in the program descriptions, nor in the SER (Article 3.6. of the NQF - the qualification descriptors relevant to the first cycle of higher education). However, the learning outcomes listed are based on field characteristics, but are not completed.

The module dedicated to dissertation does not provide any teaching material; however, some topics are mentioned and there is also a specification that three research workshops are necessary.

The college follows the European Credit Transfer and Accumulation System ECTS guidelines; however, there are some discrepancies regarding the calculation of credits for dissertation thesis

in Political Science (engagement hours are 400, which means that the credit calculated will be 16, not 20).

The program structure and content ensure a logical connection between all of its components and the achievement of given learning outcomes. Students have the opportunity to elect non-compulsory components of the educational program; the number of elective disciplines offer student an appropriate level of flexibility and autonomy in influencing their own learning path.

The volume of the programs is reasonable according to the content and specifics of the field, and consists of 240 credits. However, the panel observed that programs provided by Buckingham University are originally designed to be implemented in three years, whereas the college plans to implement them in four years. Considering that no amendments and adjustments have operated in the content of the programs, the panel is unsure of what does the college plan to do with the students during the fourth year.

The curriculum of Political Science does not include any course of research methods/skills; a module for the preparation of the dissertation is in place, but the college has not yet developed the guidelines for the drafting of the dissertation paper itself.

Information about programs is given on the website of the institution in Georgian and English languages. The panel has learned during the site visit that the college communicates with private and public schools, as well as with agencies in Eastern countries and uses social networks widely to attract future students; to date, the college is not searchable on social media.

The college has not developed a detailed programme catalogue yet.

According to the meetings conducted by the panel, the professors of Buckingham University will monitor the academic process at the college and even evaluate students' final exams; however, these aspects are not formally reflected in the document about students assessment, which only mentions blind assessment for upgrading the assessment grade.

The Quality Assurance Guide describes in Art. 29 the development of individualized education plans for students with special needs, where it is mentioned that such students should address their department and present required documentation. However, the methodology needs more specifications, which students are considered as having special needs, who is responsible to develop the individualized plans, etc.

All students have the right to submit a complaint and participate in focus groups enquiries each semester, where they can state any problem or issue that represents a barrier in the learning or integrity process. The complaint is sent to the chancellor's officer through the electronic system and then to the Dean, who will make a decision about the following steps.

#### **Evidences/indicators**

- Buckingham Political Science programme;
- Buckingham Business and Management programme;
- National Higher Education Qualifications Framework of Georgia;
- Official college website [www.stgeorge.ge](http://www.stgeorge.ge);
- Syllabi for Political Science programme;
- Syllabi for Business and Management;
- Quality Assurance Guide;
- Rules for regulating the learning process;
- Exam Regulations;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that the qualifications awarded and learning outcomes are adjusted with National Higher Education Qualifications Framework of Georgia;
- Revise the calculation of ECTS credit for dissertation and overall across the syllabi;
- Revise the syllabi for both programs so that to meet the NCEQE requirements related to the structure and content of the educational programmes;
- Develop a program catalogue and make it publicly available for all interested parties.

**Suggestions:**

*Not applicable*

**Best Practices:**

- The planned system of tutorials for students;
- Programs content developed by a European University with good practice in Teaching Excellence.

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements

**3.3 Assessment of Learning Outcomes**

HEI has law-compliant, transparent and fair system of learning outcomes assessment, which promotes the improvement of students' academic performance.

**Descriptive summary and analysis of compliance with the standard component requirements**

The learning outcomes assessment is described in the SER. However, the assessment strategies and methods in the syllabi and program descriptions are not completed. Typically each assessment should include the respective component/components of the assessment method that is measured by criteria, but this is not the case in the college.

The *Students Assessment Criteria* describes the assessment of dissertation/research paper/presentations. The *Exam Regulations* describes the exam procedures, but it does not mention that final exams will be checked by Buckingham University professors.

Assessment components are not presented in detail, which the panel considers is an important element for students to understand what is the grade they deserve. In order to ensure more transparency in assessing students, learning assessment components should reflect precise scoring for each grade, should provide the necessary information for students about goals achieved, gaps and ways for further improvement, but it will also ensure equal and fair approaches. Each assessment should include margin of minimum competency.

Students' assessment criteria are developed separately for essay, dissertation or research paper. As Political Science program intends to develop dissertation in the end of the program, it is relevant to develop dissertation guidelines for students, which the college has not done yet, as also mentioned under Standard 3.2.

The teaching methods mention tutorials, which will serve as a good practice for the institution.

Students have the right to request the re-evaluation of their work, which is discussed by the Dean of the relevant department, who is able to decide it independently or present it to Academic Council of the department. However, during the site visit the panel has learnt that the representatives of Buckingham University will check and evaluate all students' final exams, so the procedure described is in contradiction with written regulations.

When asked about who is responsible to monitor the fitness of the assessment methods and their suitability to the achievement of the intended learning outcomes, the representatives of the college management had no clear answer, but rather referred that this will be based on „*inside and outside factors, assess our teaching methods and everything*“, that „*it will be discussed and agreed together with Buckingham*“ and that „*nothing is constant in this life*“. The panel found this approach very worrying and, as previously noted under Standard 2.1., we are very concerned about the task division between different organisational units of the college, between the college

and its foreign partner, as well the preparedness of the LLC University of St. George to conduct educational activities. The QA staff of the college could not indicate either who from within the institution is responsible for this task.

#### **Evidences/indicators**

- Exam Regulations;
- Assessment Criteria for Students;
- Syllabi for Political Science programme;
- Syllabi for Business and Management;
- Business and Management Program BSc;
- Political Science Program BA;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that each assessment component includes the minimum margin of competency;
- Develop guidelines for dissertation;
- Clarify the task division between the college and its foreign partner in regards to the final assessment; ensure the internal regulations are formally adjusted accordingly;
- Revise the learning assessment components so that they reflect the precise scoring for each grade;
- Design and implement a clear process to ensure the fitness of the assessment methods in measuring the achievement of the learning outcomes;
- Revise the appeals system so that it is more clear, precise and transparent.

#### **Suggestions:**

Adjust the assessment approach so that it is formative rather than summative; for the achievement of the learning outcomes it is preferable if the assessment is divided into more than 2 components.

#### **Best Practices:**

The blind assessment system by Buckingham University.

#### **Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements

## **4. Staff of the HEI**

HEI ensures that the staff employed in the institution (academic, scientific, invited, administrative, support) are highly qualified, so that they are able to effectively manage educational, scientific and administrative processes and achieve the goals defined by the strategic plan of the institution. On its hand, the institution constantly provides its staff with professional development opportunities and improved work conditions.

### **4.1. Staff Management**

- HEI has staff management policy and procedures that ensure the implementation of educational process and other activities defined in its strategic plan.
- HEI ensures the employment of qualified academic/scientific/invited/administrative/support staff.

### **Descriptive summary and analysis of compliance with the standard component requirements**

The institution has developed a *Staff management policy*, which includes general principles and rules on academic and non-academic staff management. The institution has defined the qualification requirements for academic, scientific, invited, administrative and support staff, considering their job descriptions, functions and existing legislation. During the consultation of the CVs and qualifications of the academic and non-academic staff, the panel has observed that these are in line with HEI qualifications requirements and with their job descriptions.

The college is planning to evaluate academic and non-academic staff on a semestrial/annual basis, in line with its *Staff performance review policy*, as detailed under Standard 2.2.

Even though during the meeting with the HR representative the panel did learn about the general principles of remuneration and encouragement, the panel was not provided with documents which prove consideration of employees performance evaluation results in that process.

The college has developed an on-boarding procedure ensuring the integration of new non-academic staff members into work environment and their efficient involvement into the working process. However, no similar process is being organised for the academic staff and, according to the interviews conducted by the panel, there is no clear view who is responsible for it.

The college developed a *Staff development policy and procedure*; however, the policy does not clarify what are the procedures for identifying training needs for academic and non-academic staff. The institution is planning to deliver some trainings for academic staff in collaboration with the University of Buckingham. However, there is no professional development plan and it is not clear how is the institution planning to assess in what areas is the training required. In addition, during the meetings conducted on the site visit, the panel learnt that there was no clear view about who was responsible for identifying professional development needs for the staff and how should all collected data feed into the professional development plan and the budget allocated for this purpose.

Even though the panel did learn about the formal procedures for hiring (electing/appointing) academic, scientific, invited, administrative and support staff, the panel was not provided with documents which prove the hiring of the academic and non-academic staff via a contest (e.g. interviewing).

The college has developed an affiliation policy. Affiliation terms and conditions are written out in a formal agreement between the academic staff and the college, where each academic staff member defines his/her affiliation with one HEI only. During the interviews conducted on the site visit, the panel learnt that most of the academic and invited staff are familiar with the terms and conditions of affiliation, however the institution does not have any affiliated academic staff members yet.

Considering that the institution is not yet fully operational and no satisfaction surveys were conducted yet, the panel cannot yet assess how is the institution utilizing staff evaluation and satisfaction survey results in the process of staff management. Moreover, when asked if the instruments that are planned to be used for staff evaluation have already been drafted, the HR representatives stated that she planned to use the ones she had with her previous employer, with minor adjustments.

### **Evidences/indicators**

- Staff management policy;
- Criteria and requirements for the employment of non-academic personnel;
- Appointment to an academic personnel position;

- Evaluation table of non-academic staff;
- Academic personnel evaluation policy;
- Non-academic personnel evaluation policy;
- CVs for administrative staff;
- Affiliation terms and conditions;
- Staff development policy;
- On-boarding program
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that the procedures for hiring academic, scientific, invited, administrative, and support staff are transparent and objective, and followed consistently in practice;
- Clarify the task division between the HR and QA services in terms of the performance review system for all staff;
- Revisit and improve the overall management of the performance review system for all staff – assigned responsables, design and conduct instruments, data collection, data aggregation and analysis, decision making, monitoring – in a transparent and predictable manner;
- Clarify how are the staff performance review evaluation results impact the system for remuneration and encouragement;
- Clarify and implement accordingly the onboarding program for academic staff;
- Revisit and improve the overall management of the staff development system for all staff – assigned responsables, identify training needs, budget allocated, training provided, impact assessed, monitoring – in a transparent manner;
- Ensure that all instruments used for staff evaluation and performance review are fit for purpose and provide sufficient detail to serve as a basis for improvement;
- Provide benchmarks for all staff and the work completed by them in order to effectively manage the institution's activities.

#### **Suggestions:**

*Not applicable*

#### **Best Practices (if applicable):**

*Not applicable*

#### **Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements

#### **4.2. Academic/Scientific and Invited Staff Workload**

Number and workload of academic/scientific and invited staff is adequate to HEI's educational programmes and scientific-research activities, and also other functions assigned to them

#### **Descriptive summary and analysis of compliance with the standard component requirements**

The institution has developed the *Methodology of the elaboration Scheme of the Academic/Scientific and Invited Staff Workload*. The main aspects of the activity are teaching, scientific-research activities, as well as administrative and social activities. The scheme is divided into the academic and scientific directions, where for each is defined the teaching and research



component, which is determined by the deans and professors of the departments every semester, in agreement with the academic and scientific staff. In case of academic staff, the main focus is made on teaching and learning, where the time allocated for weekly courses is 12 hours, for which for preparation takes 18 hours (for 1 contact hour 1.5 hour for preparation). In the case of scientific staff, the main focus is on preparing and conducting research, where the main time is spent to create new knowledge and then present it in appropriate spaces.

At the time of the site visit, the college had 10 academics and 9 invited personnel for the implementation the programs. The institution is planning to enrol 200 students for the first academic year. The target ratio of the number of academic/invited staff to the number of students is 10:1. According to this, the number and workload of the academic and scientific staff ensure the implementation of educational programs and proper fulfilment of research activities and duties assigned to them for the first academic year. During the meetings conducted on the site visit, the panel learnt that the institution is planning to recruit additional staff after its authorization is approved by NCEQE. To ensure programme sustainability, while planning the number of academic, scientific and invited staff, the institution considers the number of existing and future students on each programme. In this sense, the institution has developed a *Student Body Planning Methodology*.

As observed during the interviews the panel has conducted, most of the academic staff are familiar with the conditions of affiliation. The institution does not have any affiliated academic staff members yet.

The institution has not set any benchmarks for their staff in order to effectively carry out its educational, research, creative, performing activities.

#### **Evidences/indicators**

- Academic/scientific and invited staff workload.
- The methodology of the elaboration Scheme of the Academic/Scientific and Invited Staff Workload.
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.
- Student Body Planning Methodology.

#### **Recommendations:**

Provide benchmarks for all staff in order to effectively carry out their educational, research, and administrative activities.

#### **Suggestions:**

*Not applicable*

#### **Best Practices (if applicable):**

*Not applicable*

#### **Evaluation**

- ☐ Complies with requirements
- ☒ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☐ Does not comply with requirements

## **5. Students and Their Support Services**

HEI ensures the development of student-centred environment, offers appropriate services, including career support mechanisms; it also ensures maximum awareness of students, implements diverse activities and promotes student involvement in these activities. HEI utilizes student survey results to improve student support services

### 5.1. The Rule for Obtaining and Changing Student Status, the Recognition of Education, and Student Rights

- For each of the educational levels, HEI has developed regulations for assignment, suspension and termination of student status, mobility, qualification granting, issuing educational documents as well as recognition of education received during the learning period.
- HEI ensures the protection of student rights and lawful interests.

#### **Descriptive summary and analysis of compliance with the standard component requirements**

First and foremost, it is important to underline that, since this is the initial authorisation application of the college, the institution has not yet enrolled any students and, therefore, the panel has not met any students during the site visit.

*The Rules for Regulating the Learning Process* developed by the college are providing in full the procedures for obtaining and changing student status, regulations for mobility and the protection of student rights. The information concerning these matters is made public only in Georgian language and is therefore accessible only to Georgian-speaking students and stakeholders; as detailed under Standard 7.3., the official website of the college is at present incomplete.

The status of a student may be suspended in the following cases: personal statement, studying in foreign country, financial debt, among others. The status of a student may be terminated for the following reasons: personal statement, passing the deadline of 5 years after suspension of the student status, completion of educational program, among others.

The college has also developed set of admission procedures for Georgian and foreign students and there are defined requirements for enrolment at the college. The contract with the college protects students' rights and lawful interests, at least in the case of the Georgian Students, as for the foreign students, the panel has not received the respective document in spite of repeatedly asking for it as a supplementary document. The Office for educational management is destined to give students a clear understanding of all information within student contract; however, as no students are currently enrolled, the panel cannot assess to what extent is the office achieving its role.

The college provides written mechanisms for the protection of student rights and lawful interests, as well as for the discussion of students' appeals related to the work of academic and administrative bodies. However, as detailed under standard 3, the college has to provide better provisions for student transfers in case of programme annulment, as well as to clarify its appeals procedures - both of which have to better ensure the wellbeing of students.

In general, the panel was concerned to observe that the student is generally referred to as a „product“, as oftenly mentioned during the interviews conducted during the site visit (in contexts such as „*we create a product that is called student, who should be attractive on the labour market internationally*“). We would, therefore, like to remind the college that the European Ministers responsible for Higher Education described (in their Prague Communiqué, 2001) students as “competent, active and constructive partners” in the establishment and shaping of the European Higher Education Area. Not only that students should be given their rightful place and treated accordingly, but they should also be involved in all strategic, decisional, consultative and executive bodies, as well as in all quality assurance processes.

#### **Evidences/indicators**

- The Rules for Regulating the Learning Process;
- Official college website [www.stgeorge.ge](http://www.stgeorge.ge);
- Student contract (Georgian students);
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

**Recommendations:**

Ensure that the official website of the college, as well as all documents available there are also available in English language.

**Suggestions:**

*Not applicable*

**Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☒ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☐ Does not comply with requirements

**5.2 Student Support Services**

- HEI has student consulting services in order to plan educational process and improve academic performance
- HEI has career support service, which provides students with appropriate counselling and support regarding employment and career development
- HEI ensures students awareness and involvement in various university-level, local and international projects and events, and supports student initiatives
- HEI has mechanisms, including financial mechanisms to support low SES students

**Descriptive summary and analysis of compliance with the standard component requirements**

The college plans to provide opportunities for the participation of students in various projects, as well as to fund their ideas.

There is a Career Development Centre responsible for providing professional orientation and other information regarding labour market, employment and career development. The college has already signed agreements with two companies - LLC Citycom and LLC Genio, specialised in software development and hotel management respectively - in order to secure employment and internship places for its graduates. However, these companies' field of activity is not fully in line with the profile of the students and graduates in the two planned study programmes.

As detailed under Standard 2.2., the college has integrated in its QA system surveys for its students regarding their personal, professional and academic development. However, no such instrument is yet planned for graduates.

The college is also planning to incentivise students access by partially reducing their tuition fee; However, the college doesn't take into consideration students' socio-economic status and background when making such flexible fee-payment arrangements, but only academic performance. The college should have in mind that tuition-waivers can have different purposes: first type – academic – has the objective to support and encourage excellence and performance and therefore should be offered taking into account academic results. The second type – social – has the role to facilitate student access, progress and completion of higher education studies and should therefore be offered to students that need them from the socio-economical background point of view, without taking into account the academic performance. Consequently, the typology and criteria for these two fee-waivers should be kept separately.

The college plans to create opportunities for students' international mobility (Erasmus+) and participation in various projects, ensure students awareness on various international projects and events carried out outside of the college; at the moment, the college has ongoing discussions with other universities for future partnerships. However, none of these plans to create opportunities for students have been materialized by the time of the site visit.

The college plans to provide student services with the aim to support and help students' development, such as the personal tutor scheme, which is not a voluntary scheme and each student is assigned with a personal tutor at the beginning of the study process. However, the panel cannot yet assess the implementation of this system. The college plans to supports student initiatives (extracurricular activities, sports, arts, educational activities). This way, the college aspires to have individual approaches to students. Beside this, the college provides an Enterprisists' Center for students. This will be a space at the college which can be used by students for work, meetings or any other activity necessary for their projects. Students are able to have a personal mentor who will assist them with any issue.

#### **Evidences/indicators**

- Functions of structural units (extract from the Statute);
- Quality Assurance Guide;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Provide a clear Guidebook to help students understand the structure and hierarchy as well as responsibilities of each structural unit of the college;
- Conduct satisfaction surveys amongst college graduates regarding their personal, professional and academic development;
- Revisit the typology and criteria for fee waivers so as to separate the two scopes and provide a better support to low SES students.

#### **Suggestions:**

Ensure partnership agreements with organisations and institutions specifically compatible with the profile of the students and graduates.

#### **Best Practices (if applicable):**

*Not applicable*

#### **Evaluation**

- ☐ Complies with requirements
- ☒ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☐ Does not comply with requirements

## **6. Research, development and/or other creative work**

Higher Education Institution, considering its type and specifics of field(s), works on the strengthening of its research function, ensures proper conditions to support research activities and improve the quality of research activities

### **6.1 Research Activities**

- HEI, based on its type and specifics of its fields, carries out research/creative activities.
- Ensuring the effectiveness of doctoral research supervision
- HEI has public, transparent and fair procedures for the assessment and defense of dissertations which are relevant to the specifics of the field

### **Descriptive summary and analysis of compliance with the standard component requirements**

According to the SER, the institution is a research-oriented educational organization, which is also confirmed in the mission statement and in the strategic plan.

At the moment, the institution does not conduct research activities, but it is planning to initiate and strengthen its research function, to ensure support of research activities and to improve quality of research in the country and beyond.

In this regard, the institution has developed a *Research Strategy*. At the initial stage, the research activity at the institution starts in two areas - economics and politics. The *Activities planned as contribution for society Development* provides the description of intended research topics. However, the SER mentions different topics, which indicates not only that the institution is inconsistent about its future priorities, but also that there is no coherent strategy of determining research priorities.

The institution is planning to open two research centres with 2 researchers, as of September 2019. However, the panel has observed during the tour of facilities that no distinct spaces are dedicated to research activities. During the site visit, the panel has learned that one researcher was already contracted.

The budget includes the salaries for research staff, which is increasing year by year on behalf of new departments. The budget also includes funding travel grants for conferences, but separate funding for conducting research is not allocated. As detailed under Standard 1.2., the Action plan of the college reflects the budget allocated for research for the 2019-2020 academic year under the aim of „Encouraging research activities“, but it does not clarify to which of the 5 specific actions will the funds go.

According to the Code of Ethics, academic personnel is obliged to be involved in research activities, and they also have to engage their students in carrying out research. It is the plan of the college that students with high academic performance will be able to apply on research assistant position. CVs of academic personnel show that they have suitable qualification to carry out research activities.

The institution has signed cooperation agreements with three economic agents, LLC Genio, LLC Citycom and LLC English book in Georgia. As mentioned under standard 5, the object of these agreements is related to students' internships and employment; however, Citycom and English Book memorandums include conducting research activities as well. As a partner, the University of Buckingham does not consider research cooperation with the college so far, and this is not mentioned in memorandum either.

According to the Research Strategy, each program will have a module through which students are taught how to identify research problems and carry out research. However, the curriculum of the Political Science programme does not include any course regarding research methods; the Business and Management curriculum includes *Research Skills for Business*. In the Dissertation Module Specification of Political Science programme, it is only mentioned that three research workshops will be conducted to discuss different methods, however there is no any syllabi or teaching literature.

The *Research Strategy* mentions that the institution will evaluate the impact of each research result; however, no methodology has been developed so far in this regard. It is the plan of the institution that the results of these researches will be reviewed by the Academic Council and then integrated in teaching curriculum.

The college does not operate PhD programs, so the panel cannot evaluate at this stage the effectiveness of doctoral research supervision or procedures for the assessment and defence of dissertations.

The institution does not yet have a clear vision of being an implementer of research and development activities; whilst it does plan to implement complex research and development activities and has a very aspirational view in this regards, the panel believe that the institution is not clear exactly how to reach there, nor does is have a systemic process of determining its research priorities.

#### **Evidences/indicators**

- Institutional mission statement;
- Strategic Plan 2019-2025;
- Action plan 2020-2026;
- Activities Planned as Contribution for Society Development;
- Research Strategy;
- Memorandums of cooperation with economic agents: Genio, Citycom, English Book in Georgia and Buckingham University;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

#### **Recommendations:**

- Ensure that the institutional budget includes funding for research, so as to support institutional objectives;
- Develop a coherent strategy of determining research priorities;
- Revisit the infrastructure and resources allocation so that suitable spaces are also dedicated to research, especially in the light of the Research Centres being planned to open soon;
- Provide a more specific resource allocation in the research area of the Action Plan;
- Strengthen the research component in the programmes curriculum;
- Develop methodology to measure the impact of research results;
- Develop a clear vision of being an implementer of research and development activities.

#### **Suggestions:**

*Not applicable*

#### **Best Practices (if applicable):**

*Not applicable*

#### **Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements

#### **6.2. Research Support and Internationalization**

- HEI has an effective system in place for supporting research, development and creative activities
- Attracting new staff and their involvement in research/arts-creative activities.
- University works on internationalization of research, development and creative activities.

### **Descriptive summary and analysis of compliance with the standard component requirements**

In order to support its research priorities, the institution has a *Research Strategy* and the *Regulations for Breach of Ethics and Behaviour*, which also includes the evaluation framework for research. In order to regulate research related issues and support scientific/research work at the college, the Committee of Research Ethics and Funding will be established. The Research Strategy is mentioning that the scheme for the appraisal and promotion of researchers is based on a grading system.

According to the Action Plan, one research centre for each program will be operational from September 2019; the budget for the upcoming years reflects allocated salaries for chief researcher, researcher and research assistant. As mentioned under Standards 5 and 6.1. the institution is going to engage students in ongoing research; also, students with good academic performance will have opportunity to work as research assistants.

The Research Ethics and Funding Committee will bear the responsibility of identifying the ethical part of research projects and to make decisions about funding. When funding research, priority will be given to interdisciplinary research with international partners; research with local universities and internal independent will also be conducted. The funding of research will be based on a grading system which is planned to ease the decision making. However, the budget includes only travel grants for conferences and salaries for research centre employees, and the Action Plan is not sufficiently clear as to what specific actions are being funded in the 2019-2020 academic year.

In order to attract new staff, the institution is planning to conduct introductory lectures, where researchers will introduce the results of their findings and career characteristics to interested students. There is no formal strategy for attracting new staff in research; when the panel addressed this concern it has learned that high salaries is the only strategy the institution has in place.

The college includes information about the internationalization of research in the *Policy of Internationalization and International Cooperation*, and *Internationalization Mechanisms*. The same information is provided in the *Strategic Plan*. The institution presents a plan regarding future cooperation with international agents for: the recruitment of international professors as well as students, implementation of joint international research projects, supporting local academic personnel in getting international experience, obtaining membership of European Association of International Education, International Council for Open and Distance Education, Erasmus +, Quality Assurance Agency. The college is planning to be registered in Times Higher Education World University Ranking as well.

The panel believes that plan regarding internationalization is very ambitious; however, the panel cannot evaluate its feasibility at this stage considering that, for the time being, the college only has memorandums with two international universities where nothing is mentioned about joint research activities.

### **Evidences/indicators**

- Strategic Plan 2019-2025;
- Action plan 2020-2026;
- Mechanisms for International cooperation and Internationalization;
- Regulations for Breach of Ethics and Behaviour;
- Internationalization Policy;
- Research Strategy;
- Memorandums of cooperation with economic agents: Genio, Citycom, English Book in Georgia and Buckingham University;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

### **Recommendations:**

- Ensure that the dynamic of funding allocated for research is reflected in the budget;
- Develop a clear strategy for attracting new researchers.

**Suggestions:**

*Not applicable*

**Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements

**6.3. Evaluation of Research Activities**

- HEI has a system for evaluating and analysing the quality of research/creative-arts activities, and the productivity of scientific-research units and academic/scientific staff.

**Descriptive summary and analysis of compliance with the standard component requirements**

The institution has developed the *Policy for evaluation of research activities*. According the document *Regulations for Breach of Ethics and Behaviour*, the quality of research conducted at the college is going to be evaluated based on research activities performed by academic personnel. The mechanisms for the evaluation of effectiveness of future research centres, as well as evaluation of research impact assessment are not included. Research evaluation framework is mainly based on a 1-5 grading system; attention will be drawn to the amount of publications in English language in peer reviewed journals. The college plans to conduct, once in two years, a research competition to nominate the most positive impact research even if, as mentioned before, there is not clear view and system of assessing research impact.

Scientific productivity of staff will be evaluated by the QA Service, which is currently drafting its instruments to be used. The college does not have affiliated academic staff so far. Based on the presented documents it is ambiguous how the institution is going to utilize evaluation results, however during interview was revealed that QA department is planning to evaluate the scientific productivity of staff and they will be responsible for utilization and analysis of evaluation results.

**Evidences/indicators**

- Regulations for Breach of Ethics and Behavior;
- Research Strategy;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

**Recommendations:**

Clarify the mechanisms for the evaluation of effectiveness of future research centres, as well as evaluation of research impact assessment.

**Suggestions:**

*Not applicable*



**Best Practices (if applicable):***Not applicable***Evaluation**

- ☐ Complies with requirements
- ☒ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☐ Does not comply with requirements

**7. Material, Information and Financial Resources**

Material, information and financial resources of HEI ensure sustainable, stable, effective and efficient functioning of the institution, and the achievement of goals defined through strategic development plan.

**7.1 Material Resources**

- The institution possesses or owns material resources (fixed and current assets) that are used for achieving goals stated in the mission statement, adequately responds to the requirements of educational programmes and research activities, and corresponds to the existing number of students and planned enrolment.
- HEI offers environment necessary for implementing educational activities: sanitary units, natural light possibilities, and central heating system.
- Health and safety of students and staff is protected within the institution.
- HEI has adapted environment for people with special needs

**Descriptive summary and analysis of compliance with the standard component requirements**

At the time of the site visit, the situation in relation to the fixed assets was the following: according to the tenancy agreement, the landlord (LLC Unique Learning) agrees that the tenant (LLC University of St. George) has the right to occupy the residential premises of 3207,9 square meters and the tenant agrees to pay rent on time.

According to the tenancy agreement, the object of tenancy will be used for implementing educational programmes activities. Also, according to the tenancy agreement, under paragraph 2.1 of clause of 2, the parties agree that the contract will come into force after the authorisation of the institution by NCEQE is approved. According to paragraph 2.2, the college will implement educational activities from July 1st 2019. From this date, the parties are obliged to meet their responsibilities listed under Chapter 3 of the Agreement. In case of failure to obtain authorization under paragraph 2.3, the Agreement shall not enter into force and does not provide any rights or obligations to the Parties.

In line with the extract from the Public Registry, the building is owned by Unique Learning LLC (extract dates from 16.11.2018). According to paragraph 2.4 of the same article, the landlord guarantees that LLC University of St. George will not rent the tenancy property to any other person before the authorisation approval from NCEQE.

The object of the contract is represented by the following: Construction of N1 Construction Area - 6038.4 sq.m Summer Area - 277.8 sq.m Warehouse Area - 933.2 sq.m Space Audit Area - 4827.4 sq.m. Address: Tbilisi, Village Dighomi, Vepkhistaosani street N92. The mortgage was not loaded at the date of the site visit. Under paragraph 1.3 of the same Agreement, the lease object is used to carry out educational, educational and research activities. However, at the

moment of site-visit, the University of St. George did not have a lawful possession of fixed assets certified by the extract from the Public Registry, as these belong to the „LLC Unique Learning“ In relation to real estate, legitimate ownership will arise after obtaining the authorization. The legitimate possession of St. George University Ltd is not confirmed by the Public Registry.

As for the liquid assets, according to the receipt and invoice of computers, digital technology, and other liquid assets, the LLC English book has acquired liquid assets for St. George University. However, there is no written evidence (written agreement, acceptance act, account invoice, long term balance, etc) to attest the respective ownership at least for the authorization period; this was also applicable during the site visit. For the purpose of obtaining possession over liquid assets, parties do not have an appropriate agreement, and the item to be handed into the ownership of a new possessor.

During its visit of the infrastructure, the panel has observed that the college building is hosting the following compulsory sections: foyer, recreation spaces, teaching classrooms, administrative offices, space for group work, sanitary/hygienic units, library, archive. Generally, the distribution of various units supports the effective implementation of educational and administrative process. However, if the institution wants its two research centres to be fully functional at the beginning of the academic year, suitable infrastructure and facilities should be dedicated for this purpose. Also, the panel has learned during the tour of the facilities that only one administrative office will be dedicated to secretarial relations with the students, which we believe is not suitable for the prospect of 200 students in the first academic year. The institution should also generally consider the resource allocation considering its request for 700 students as part of the authorisation application.

According to the architectural design and on-site observations, it is confirmed that the educational and auxiliary spaces of the college are separated based on the measurement drawings of the building. Specifically for teaching and learning purposes, the college provides are teaching classrooms, one conference hall, professors offices (where professors provide counselling to students), and library.

The panel considers that the university has an appropriate inventory for the implementation of its activities. However, considering its institutional aspirations towards research, infrastructure and facilities in this areas should be added.

The building is equipped with divided sanitary units, including for people with disabilities; the sanitary units observe good sanitary-hygienic conditions, but the work is still in progress. The units have continuous water supply; however, at the time of the site visit, no hot water was available. During the meetings conducted on the site visit, the panel learned that the college has a hot water supply equipment that is in the process of installation.

The building is equipped with a central heating system and an uninterruptible power supply system.

All classrooms have artificial light possibilities, but not all educational spaces have natural light. During the visit of the facilities, the panel observed that the building is not equipped with fire extinguishers on every floor; the administration of the university noted that these are acquired and will be delivered within the next 10 days. Detailed instructions on the use of fire prevention equipment is present on all grounds and the evacuation plans are approved by the competent authorities. However, the respective instructions are provided only in Georgian language.

The interview with the administration revealed that the institution has medical staff in place. During the tour of the facilities, the panel was presented with a „medical cabinet“; however, we found that it was merely a room that had a first aid kit on its desk. The room is completely unsuitable to serve as a cabinet: it does not have natural ventilation, natural lights, constant supply of hot water and the „medical bed“ is actually a regular couch.

Order is maintained throughout the perimeter of the institution; the institution allocate security staff to timely and effectively respond to violation of order, and protect material values of the institution. In order to maintain order, the institution has security video recording and storing facilities installed both inside and outside of the building, throughout the premises.

People with special needs are able to freely navigate and move around the building which is equipped with ramps, elevators, etc.

At the time of the site visit, the library was not equipped with learning resources dedicated to students with special needs (Braille, audio-reading software, etc). As far as adapting teaching methods and plans, the panel is not yet able to assess if these will be adapted to students with special learning needs.

**Evidences/indicators**

- Tenancy Agreement;
- Receipts and invoices for learning resources;
- Extract from the public registry;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit;
- Visiting tour of the institutional facilities.

**Recommendations:**

- Ensure that the lawful possession of fixed assets is based on written agreements and registration of such rights into the Public Registry, at least a period of authorization to be granted;
- Ensure the lawful possession of liquid assets, supported by written evidence, at least a period of authorization to be granted;
- Align the infrastructure to the institutional goals by allocating suitable spaces dedicated to research;
- Finalise the sanitary/hygienic units;
- Ensure that fire equipment is located on each floor of the building, in a visible area;
- Instructions relating to health and safety should be made available in English as well;
- Reconsider the space destined as a medical cabinet, which should be equipped with a proper medical bed, natural lights, natural ventilation, and constant supply of hot water;
- Ensure that all spaces destined as teaching classrooms have natural light possibilities;
- Ensure that the library is equipped with learning resources dedicated to students with special needs.

**Suggestions:**

*Not applicable*

**Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☒ Does not comply with requirements

**7.2. Library Resources**

Library environment, resources and service support effective implementation of educational and research activities, and HEI constantly works for its improvement.

## **Descriptive summary and analysis of compliance with the standard component requirements**

During the site visit, the panel has also visited the library spaces, which include: reading hall, library staff office space, meeting and group workspace, IT equipment space. The institution has developed regulations for the usage of the library. The reading hall is equipped with appropriate inventory, including computers connected to internet. However, the panel has observed during the visit that the library is not equipped with printer, copy machines, and scanners and it is not connected to Wi-Fi.

There are 440 books in the library, processed in accordance to the library regulations, dedicated for the implementing of two programs, all purchased by the founder organization. The main literature mentioned in the syllabus is available at the library; the books are processed according to the library rules, and are based on the need for academic personnel and students.

The institution has access to a electronic library network; specifically a contract signed between the founder organization and the Georgian Association of Libraries in accordance with the Agreement on the 19th of October, 2018, which enables the applicant (to join the Association and the accompanying service (Article 17.10.2018, Article 1, paragraph 1.1). At the time of the site visit, there was no written evidence that shows the transfer of the respective rights from the founder to the LLC University of St. George.

The panel noted that the librarian has the appropriate competence in the library, but it does not have the language competencies to accommodate international students and staff. The college mentioned that they are going to add English language library personnel. The library personnel can provide information on the library resources and services for students and personnel. The library is available for students and staff six day per week. Students can use the library's electronic search system and an electronic library catalogue and have the possibility of home loans.

### **Evidences/indicators**

- Receipts and invoices for learning resources;
- Library regulation;
- Electronic library catalogue;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit;
- Visiting of the library.

### **Recommendations:**

- Ensure that the library offers possibilities for using printer, copy machines, and scanners;
- Expand the Wi-Fi network so as to include the library;
- Ensure that the library services are available to all future students, including international, by aligning the language capabilities of the library staff, as well as providing the Library regulations in English;
- Allocate suitable infrastructure and facilities to research activities, considering the institutional aspirations in this regard;
- Revisit the arrangements that gives the college access to the electronic library network through the Georgian Association of Libraries, and not only to the founding organisation;
- Reconsider the office space dedicated to secretarial relations with the student so that it is suitable for the projected enrolment numbers.

### **Suggestions:**

Ensure that the institutional website includes the link to the library.

### **Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements

**7.3 Information Resources**

- o HEI has created infrastructure for information technologies and its administration and accessibility are ensured
- o Electronic services and electronic management systems are implemented and mechanisms for their constant improvement are in place
- o HEI ensures business continuity
- o HEI has a functional web-page in Georgian and English languages.

**Descriptive summary and analysis of compliance with the standard component requirements**

The college has developed a *Regulation for Management Information Technologies*, which regulates the issues related to information technologies management, data protection and electronic services. The regulation also defines the rules of accountability related to the management of information technologies and responsibilities related to data disclosure.

The IT infrastructure (computer equipment, software provision, internet) is constantly accessible to the academic community; the panel must note however that the wi-fi has not always been functional during the site visit.

The college uses a set of electronic services and management systems (e-document platform, e-mail, etc), but these are not integrated with each other so as to facilitate the information flow across the institution. The information systems are used for academic and administrative registration processes, regulation of student status and registering academic evaluation data.

The official website of the college serves the communication and information functions, contains contact and other useful information in Georgian language including: strategic plan, organizational structure, procedures of teaching, learning and assessment, staff, annual reports, research strategy and research evaluation framework, employment opportunities and other available services. However, most of these documents are only provided in Georgian language, but their English version is missing.

**Evidences/indicators**

- Receipts and invoices for IT resources;
- Regulation for Management Information Technologies;
- Domain hosting certification;
- Official college website [www.stgeorge.ge](http://www.stgeorge.ge);
- Self-evaluation report;
- Meetings conducted by the panel during the site visit;
- Visiting tour of the facilities.

**Evaluation**

- ☐ Complies with requirements
- ☒ Substantially complies with requirements
- ☐ Partially complies with requirements
- ☐ Does not comply with requirements

**Recommendations:**

- Substantially improve the English translation of the institutional website so that to ensure it provides all the information required by NCEQE standards; amend the Georgian version as well so that it covers the missing elements, such as mission statement;
- Ensure that the Wi-Fi connection is constantly and continuously accessible to students and staff.

**Suggestions:**

Provide an integrated information/management system accessible for and by all areas of the institution.

**Best Practices (if applicable):**

*Not applicable*

**7.4 Financial Resources**

- o Allocation of financial resources described in the budget of HEI is economically achievable
- o Financial standing of HEI ensures performance of activities described in strategic and mid-term action plans
- o HEI financial resources are focused on effective implementation of core activities of the institution
- o HEI budget provides funding for scientific research and library functioning and development
- o HEI has an effective system of accountability, financial management and control

**Descriptive summary and analysis of compliance with the standard component requirements**

The main funding source of the college is the founder "English Book" LTD. According to the income statement, balance sheet and solvency ratio of founder organization, the founder organization has enough financial resources to invest in the college.

As detailed under Standard 2.1., the funding resources are not diversified, nor is there a sustainable plan to diversify them in the near future so as to ensure adequate and effective risk management. When addressing the concerns related to the risk assessment and management at the college, the panel has learnt that there are no such projections, as the institution is counting that its founder can intervene and rescue; this is further detailed under Standard 2.1.

In regards to the financial position of the LLC University of St. George, the institution provided the panel a pro forma (forecast) budget in which only payroll expenditure is given. Specifically, according to the 2019-2020 pro forma budget expenditures is distributed as follows: financial services, legal services, logistic services (head of payroll expenses), Office of International Relations, Student Career Development Office, Office of Cyber Security, Public Relations, Society Welfare service, library, security service, medical service, university administration, salaries for academic personnel for both programs, quality management, research centre, academic English teaching, expense expenditures and other expenses (Turnitin value, library resources, other incidental expenses).

The 2019-2020 pro forma budget does not include other operating costs such as travel expenses, utility costs, stationery costs, insurance costs, cost savings, etc, as it only provides the payroll costs. There are no other operational expenses and the projection revenue flows by years is not substantiated by concrete facts. It is therefore difficult to assess the financial sustainability by years. In addition, there is also an unclear connection between the budget and the action plan, as detailed under Standard 1.2.

LLC University of St. George has formal rules of financial management and control system, which ensures lawful, transparent, economical, efficient, and productive use of resources for the achievement of institutional goals; there are regulated by Article 14 of the *Financial management and control system*. However, at the time of the site visit there were no financial reports or relevant financial statements for LLC University St. George.

**Evidences/indicators**

- Balance sheet of "English Book" LTD;
- Income statement of "English Book" LTD;
- Pro-forma budget of LLC University of St. George;
- Financial management and control system;
- Self-evaluation report;
- Meetings conducted by the panel during the site visit.

**Recommendations:**

- Increase the institutional effort to diversify the funding sources;
- Improve institutional mechanisms for financial risk assessment and management;
- Ensure that the pro-forma budget, includes operational expenses and the projection revenue flows;
- Improve the connection between the strategic planning process and financial management.

**Suggestions:**

*Not applicable*

**Best Practices (if applicable):**

*Not applicable*

**Evaluation**

- ☐ Complies with requirements
- ☐ Substantially complies with requirements
- ☒ Partially complies with requirements
- ☐ Does not comply with requirements