Quality Manual
ND 2-Q03

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Profile of BSMA

Legal Entity of Public Law - Teaching University - Batumi State Maritime Academy (BSMA) is under regulation of the Legal Entity of Public Law Maritime Transport Agency of the Ministry of Economy and Sustainable Development.

Below is listed the brief information of BSMA:

The International Quality Management Standard ISO 9001 was implemented at BSMA in 2000;

In 2005 the Academy commenced the application of ECTS;

In 2005 and 2007 the Academy passed the State Accreditation;

In 2006 the Academy became the member of the International Association of the Maritime Universities (IAMU);

In 2010 the Academy obtained the Certificates of ISO 9001:2008 and IQNet;

In 2010 the Academy became the member of the Association of the Black Sea Maritime Institutions (BSAMI).

In 2011 the Academy passed State Authorization and Programmes Accreditation;

Maritime education in Georgia is regulated by three laws:

Law on Education and Certification of Seafarers (2012);

Law on Higher Education (2005);

Law on Vocational Education (2007).

At present two faculties function at Batumi State Maritime Academy:

- Maritime Faculty (MF);
- Business and Management Faculty;

- Vocational Training Centre (VTC), and Seafarers Training and Certification Centre (STCC) also functions at BSMA;

- Educational programs at Maritime Faculty, VTC and STCC are compiled according to the IMO recommended Model courses in compliance with STCW (Manila Amendments) Convention requirements;

- Maritime Faculty offers three Bachelor educational programs;

- Vocational Training Centre offers two “3rd level” Vocational programs.
Bachelor programs offered by Maritime Faculty:

- Marine Navigation, 240 ECTS, according to Section A-II/1 and Section A-II/2 of STCW;
- Marine Engineering, 240 ECTS, according to Section A-III/1 and Section A-III/2 of STCW;
- Electrical Engineering, 240 ECTS, according to Section A-III/6 of STCW.

Vocational programs offered by VTC:

- Deck Rating, 60 ECTS, support level according to Section A-II/4 of STCW;
- Engine-room Rating, 60 ECTS, support level according to Section A-III/4 of STCW.

**Academy Statement of Mission**

Learning for life in a dynamic world.

**Academy Vision Statement**

To be a leader in relevant, applied learning in our national and international communities.

**Academy Core Values**

- **Learning Centred**
  Learner success is our primary focus.

- **Excellence**
  We strive for the highest standard where learner, staff, and alumni success is observed, measured, and celebrated.

- **Integrity**
  We demonstrate honesty, respect, fairness, and equality in all of our pursuits.

- **Relevant, Responsive, and Flexible**
  We are responsive and flexible to the needs of our learners and staff while remaining socially and economically relevant to industry, business, and our community.

- **Accountable**
We hold ourselves responsible to ensure the future sustainability of Academy, academically, fiscally, and environmentally.

See the organizational chart as appendix 1
See the organizational chart (expend one) with directions and cycles of faculties as the appendix 2

Academy Quality Policy

Quality policy ND 2-Q01

Entire activity of BSMA is aimed to ensure complex of objectives on training and certification of specialist in Maritime transport in accordance with requirement of law of Georgia on “Higher Education”, Law of Georgia on “Education and Certification of seafarers”, “International Convention on Training and Certification of Seafarers and Watch keeping” (STCW) and other international and national standards, rules and legislation of Georgia.

BSMA is aimed to keep and develop business, scientific, educational and other existing contacts with leading maritime schools, shipping and crewing companies from all over the world.

Policy of teaching university, public entity Batumi State Maritime Academy in field of quality is dedicated set of actions to complete task of quality assurance on the level, providing implementation of common policy and strategy of BSMA with strict compliance of national and international standards.

In order to achieve this BSMA develops and implements internal rules, procedures, instructions, educational programs, training guides, uses necessary laboratories, simulators, organizes production and sailing practice for students of BSMA to keep teaching process of training and certification of specialists in maritime transport on high international level, using Quality Management System, which meets standards ISO 9001:2008.

Management of BSMA sets objective to accomplish existing and intended needs and expectations of BSMA consumers, personnel of BSMA, society in general and aims to continual improvement of BSMA activity, based on that elevation of competitiveness on global service market.
Policy of BSMA management in field of quality is aimed on permanent development and perfection of its activity on the level high national and international standards. BSMA management aims permanent improvement of quality management system efficiency on every level of organization and under permanent control of BSMA management.

BSMA management sets objectives to achieve quality and permanently analysis quality management system of BSMA to provide its relevance.

All relations of BSMA with consumers, suppliers and other partners, actions of BSMA and provided services are based and considered as expression of quality.

Formulated by BSMA management general policy and strategy, quality policy and quality objective of BSMA in field of quality are brought to attention of BSMA personnel on every level of organizational structure of BSMA.

Quality Management System

General Requirements (4.1)

Academy operates a documented QMS to ensure that specified educational, training and support requirements are met. The effectiveness of the QMS is monitored through a process of internal auditing, client feedback and the analysis of that feedback and management review.

Feedback from staff, who are integral in the application of the various components of the QMS, alert the Quality specialist to potential problems and appropriate and timely revisions are made to correct the deficiency. Areas of nonconformance are addressed by raising corrective action request and areas of potential nonconformance are addressed by initiating a preventive action request. Academy may also make suggestions for improving any aspect of the Academy by submitting an improvement initiative proposal.

Scope
The design and delivery of education and training to students including support services.

Documentation Requirements (4.2)

General (4.2.1)
Academy maintains electronic copies of a Quality Manual, Procedures Manual, and supporting documentation. These are available to staff at all sites via the Academy’s website.

The operation of the Quality System is subjected to audit and review in order to monitor, maintain, and improve its effectiveness. Quality System documentation is kept abreast of educational and academy developments. Measures are taken to ensure continuing compliance whenever the ISO 9001 Standard itself undergoes revision.

The Academy has established Quality Objectives that are monitored on a continual basis and reviewed annually. The process of monitoring the objectives is one mode by which the Academy can evaluate the effectiveness of the Quality Management System and to determine if client requirements are being satisfied. The Quality Objectives are included in section 5.4 of this Manual.

Quality Manual (4.2.2)

The Quality Manual is a policy document, containing a summary of how the Academy addresses the requirements of ISO 9001.

It contains the Academy’s quality policy, and cross-references Academy procedures to the elements of ISO 9001.

Most staff members have access to the electronic web-based version of the Quality Manual, which is controlled centrally by the Quality specialist. Where Web access is not available, paper-based copies of the Quality Manual are made available.

The Quality Manual is maintained by the Quality specialist, who ensures that the electronic version is kept in alignment with its contents.

Amendments to the Quality Manual are controlled and published by the Quality specialist.

Changes in content are normally agreed with the functions responsible for their implementation. Paper-based copies of quality documents are uncontrolled documents and as such it is the responsibility of holders of paper-based manuals to incorporate authorized amendments and disposing of obsolete pages.
The Procedures Manual

The Procedures Manual incorporates procedures, information, and forms relating to staff activities. Procedures describe educational and student-support processes, including documentary and record-keeping requirements, and identify the functions responsible for their implementation.

Procedures are categorized under four main headings (2-Q05-01, 2-Q05-09):

1. Organization (BSMA Charter, Senate Regulation, Internal regulation, schedules for staff/personnel, contracts with students and personnel, BSMA strategic plan, BSMA annual plan,) – O / P

2. Quality System (Quality Policy, Quality objectives, Quality Manual, Quality Procedures, Working procedures and instructions) – Q

3. Fundamental processes (Students Entry and Exit, Educational programmes and syllibuses, training programmes, active forms collection, forms for records) – F/R

4. Miscellaneous

Control of Documents (4.2.3)

The Academy maintains documented procedures (ND 2-Q04-01) to control the review, approval, issue, amendment, and availability of documentation and data relating to the operation of its QMS. Related Policies (ND 2-O01), Regulations (ND 2-O03), and Administrative Regulations (ND 2-O03) are also maintained in a similar fashion. All staff are required to use and refer to current issues of these documents in performing their duties.

Specified documents and data are controlled to ensure that up-to-date information is available and accessible to staff involved in the organization and delivery of courses and programs. Where documents and forms are used within an individual program or program unit, it is controlled internally. All documents issued have an issued date or revision status indicated on the document. Staff receiving important new or revised documents from external sources are required to make them available to appropriate members of staff, and to ensure that obsolete material is updated, withdrawn or destroyed. If retained, obsolete material is required to be suitably identified to prevent its inadvertent use.

The electronic copies of the Quality Manual and other computer data essential to the operation of the QMS, is backed-up on a regular basis.

See the appendix 3 – Document levels

Control of Quality Records (4.2.4)

The Academy maintains such records as are necessary to demonstrate the quality of its provision and compliance with
procedures and the effectiveness of the QMS. Members of staff are responsible for ensuring that the records for which they have responsibility are clearly labelled or otherwise identified, legible and readily retrievable. Quality records are required to be stored in ways that minimize the risk of their deterioration or loss.

A quality records procedure (ND 2-Q04-02) lists documents whose retention is necessary for reference purposes and to provide evidence of the QMS’s effectiveness. The procedure identifies the confidentiality status and minimum retention time for each record, and the function responsible for its maintenance, storage and disposal.

Where contractually agreed, customers are afforded access to appropriate quality records.

**Management Responsibility**

**Management Commitment (5.1)**

Members of the QAS are committed to the development and implementation of the QMS and to continually improving its effectiveness. Management reviews the Academy’s Quality Policy annually. All staff are encouraged to seek ways to continually improve the Academy’s processes and the service provided to clients. In addition to this commitment by staff, Academy Management, on an annual basis, identifies organizational quality objectives. These objectives are established based on results of audit findings, the analysis of data generated by various forms of client feedback and management reviews of the quality system.

Quality objectives are communicated by senior management to all levels of the organization. Divisions, departments and individual staff are tasked with identifying methods and processes for achieving quality objectives that are applicable to them and documenting the results. The results of activities undertaken to realize the quality objectives are documented and reviewed by Academy Management on an ongoing basis.

Academy Management annually reviews the quality objectives established the previous year with regard to their suitability, adequacy and effectiveness. Each year the quality objectives and the outcomes from the objectives are reviewed.

The quality objectives may be continued for the next year, revised, or new objectives may be identified and implemented. **Section 5.4** of this Quality Manual contains the Academy’s most current “Quality Objectives” that have been established and approved by the QAS.
Customer Focus (5.2)  

Academy Management is committed to determining that customer/client requirements are met with the aim of enhancing customer (client) satisfaction. While the primary customer or client of the Academy is the student, secondary clients are the businesses, organizations, industries, government nongovernmental agencies that hire the graduates. Programs and courses are designed and developed with input from those secondary clients. Students benefit from receiving education and training that has been developed under those conditions. Clients from all levels, both external and internal, provide feedback regarding the programs, courses, and services provided by the Academy.

There are a number of procedures that provide processes for gathering and utilizing this feedback. The Academy in general and individual subdivisions within the Academy has implemented various processes for monitoring and measuring client satisfaction (2-Q05-08).

When customized or contract training courses are designed and developed, the requirements of the client are an integral part of that process. As an Teaching University, the Academy is aware that students have other needs and there are other factors that may influence their ability to be successful in the program or course they have chosen. Procedures also provide clients with the opportunity to register complaints regarding any service provided by the Academy and for students who may not be satisfied with a decision regarding their academic status, to appeal that decision (2-O07). Student review meetings with student representatives or groups of students – student’s self government may also be held to address specific concerns or to obtain input with regard to a specific issue or issues.

The Academy’s website also provides an “Electronic Feedback” submission form that is submitted directly to the QAS. Through this form anyone can submit a suggestion, comment, or concern regarding any information or service provided by Academy.

Submissions received are documented and forwarded to the appropriate member of Academy staff. All complaints received through this means are formally documented as a complaint and handled through Procedure (2-O07).

Quality Policy (5.3)  

The Academy’s Quality Policy (ND–2-Q01) was established by the QAS, considered by the Senate and approved by Rector.

The policy is reviewed annually during a Quality Management Review meeting to ensure it continues to:

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a) be appropriate to the purpose of the Academy;
b) include a commitment to comply with requirements and to
improve the effectiveness of the QMS;
c) provide a framework for establishing and reviewing quality objectives;
d) be communicated and understood within the Academy, and;
e) be suitable.

The Academy QP (2-Q01), Senate Regulation (2-Q03), Administrative regulation (2-Q02) states:

Academy will meet its mission, vision, and core values by:

- committing to a structured Quality Program that satisfies the
requirements as outlined in ISO 9001:2008;
- according to SCTW, IMO requirements and Georgia legislation;
- involving industry/business in both the development and
evolution of our training programs and courses;
- ensuring that programs and services are designed and implemented with
a commitment to meeting customer requirements;
- ensuring staff are highly qualified through ongoing recruitment,
development and training;
- developing and delivering training that emphasizes Competency
Based Education principles;
- ensuring that standards are maintained and improved by active monitoring,
reviewing and improving all activities;
- ensuring that measurable and realistic quality objectives are established annually,
communicated to all staff, and evaluated, reviewed and revised (as needed)
on an on-going basis.

The QMS will operate with the following “Permissible Exclusion” to the ISO 9001:2008 standard:

Section 7.6 Control of Monitoring & Measuring Devices (2-Q05-07). Any monitoring or measuring devices used, are used for the purposes of training. Students are often required to calibrate and adjust these devices as part of their training. The absence of accurately calibrated equipment and devices would not constitute
a failure in the process of designing and delivering education/training to students.

Planning (5.4).Δ

Quality Objectives (5.4.1)
Academy Management annually reviews the quality objectives established the previous year with regard to their suitability, adequacy, and effectiveness. Each year the quality objectives and the outcomes from the objectives are reviewed. The quality objectives may be continued for the next year, revised, or new objectives may be identified and implemented (2-Q02, 2-O06-02). Academy also issue strategic quality objectives – long term plan (once in six years) (2-O06-01).

Quality Management System Planning (5.4.2).Δ
The planning and preparation of education, training and related activities is carried out in accordance with documented procedures. Necessary resources are allocated, and staff training provided, whenever new programs or requirements are introduced. Quality planning within Academy is an integral part of several Quality Procedures culminating in the establishing of Quality Objectives. Feedback from our customers (students, industry and the community) via Procedure 2-O05-08 and the program/course, provides a basis for planning within individual programs/courses, departments and the Academy as a whole. Procedure 2-O07 allows the Academy to respond to real or perceived problems with our service and implement preventive measures to preclude future occurrences. Management is provided with information regarding program performance and trends via Procedures 2-Q05-06. This procedure provides a process for staff, management and industry to review all aspects of a program/course.
Industry also plays a vital role in the development of new programs/courses through the occupational analysis process (2-F07, 2-F08) and the ongoing review and revision process through annual meetings.
One aspect of procedure 2-Q05-06 is the continual improvement by implementing steps to prevent problems from recurring and identifying any problem trends. Sometimes the prevention of a problem or dealing with a negative trend may require a strategic initiative. To facilitate this process the Quality specialist presents a summary of data from this Procedure to all scheduled Management Review meetings (2-Q05-08).
All the Procedures noted above ultimately feed into the planning process. Management Review meetings give management an overall picture of the Academy’s Quality System that reveals:

- strong and weak points;
- what we do well and what we can improve on;

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Management can then identify and integrate issues of a strategic nature into the planning process for the coming year. The Academy recognizes that a trained staff is essential to growth and development of the organization. One facet of Procedure 2-O09 (concern staff recruitment and orientation, achievement, success, training and development), identifies the training needs of the organization as a whole, the individual needs of staff members, and includes a strategy for inclusion of training needs in the yearly planning processes.

Changes to the QMS occur after careful planning and consultation with staff and relevant members of management. All procedural changes are approved by the Rector prior to release. All changes are coordinated by the Quality specialist who ensures other relevant documents are updated accordingly to reflect the latest revisions (2-Q04-01).

Responsibility, Authority and Communication (5.5) 

Responsibility and Authority (5.5.1)

The responsibility, authority and interrelation of staff who manage, perform and verify work affecting quality, is described in the Quality Procedures. The duties of key functions are described in Procedure 2-P and 2-JD entitled Staff Roles and Responsibilities but quality-related responsibilities are also an integral feature of all other procedures.

Management Representative (5.5.2) 

The Quality specialist is responsible for the oversight and day-to-day operation of the QMS, and for reporting on its performance to Executive Management. The Quality specialist reports to the Rector or his deputy. The Senior Executive Assistant is the Management Representative on the Management Executive Committee (MEC). The Senior Executive Assistant keeps the Quality specialist informed of discussions relevant to the QMS at MEC meetings.

The authority and responsibility of the Quality specialist is defined in the Staff Roles and Responsibilities Procedure (2-P and 2-JD). The Quality Specialist’s duties can be summarized under the following statements of responsibility:

- for ensuring that processes needed for the Quality Management System are established, implemented and maintained;
- for reporting to the Management Executive Committee on the...
performance of the Quality Management System and any need for improvement; and

- for promoting an awareness of customer requirements throughout the Academy.

Internal Communications (5.5.3)

Communications channels are established through the use of a Academy-wide electronic mail system that is accessible to all staff.

A directory of all staff with phone numbers and email addresses is provided on the Academy’s website.

Administrative Regulations (2-O02) and Operational Procedures have been established to deal with crisis and emergency situations and to ensure that appropriate communication channels have been organized.

Management Review (5.6)

General (5.6.1)

Members of the Management Executive Committee - SENATE (MEC) and other designated personnel meet to review the adequacy and effectiveness of the Academy’s QMS on an ongoing basis throughout the year. Review meetings are chaired by the Rector on the Senate (board) meeting agenda items over the period of the year cover all the requirements identified in Procedure 2-Q05-06 (Management Review).

A MEC meeting may occasionally be designated as a Quality Management Review Meeting, however, regular (generally weekly) MEC meetings often deal with items relating to the QMS. Minutes of MEC meetings are forwarded to the Quality specialist on a regular basis. The degree to which the requirements of ISO 9001:2008 and the Academy quality policy and objectives are being satisfied is reviewed on an annual basis.

Review meetings are minuted and necessary corrective action, preventive action, and improvement are initiated.

Review Input (5.6.2)

The input to management review includes information on: (2-Q05-06, 2-Q04-03, 2-Q04-04):

a) results of audits;
b) customer feedback;
c) process performance and product conformity;
d) status of preventive and corrective actions;
e) follow-up actions from previous management reviews;
f) changes that could affect the quality management system; and
g) recommendations for improvement.

Review Output (5.6.3)
The output from management review includes any decisions and actions related to:

a) improvement of the effectiveness of the QMS and its processes;
b) improvement of product/service related to customer requirements; and
c) resource needs.

Resource Management (6) ▲

Provision of Resources (6.1)
Adequate physical and human resources are provided for managing, performing, and verifying activities affecting quality and to enhance customer (client) satisfaction by meeting customer (client) requirements.

Human Resources (6.2) ▲

General (6.2.1)
All employees, including members of management, performing work that affects the quality of any service related to the design and delivery of education and training to students including support services, are hired on the basis of appropriate education, training, skills, and experience.

Documented procedures have been established for the recruitment of permanent and temporary staff (2-O09). Verification of candidate qualifications and/or experience normally precedes confirmation of an appointment. Staff orientation, appraisal, training, and development are carried out and recorded in accordance with documented procedures (2-O09) to ensure that the Academy:

- employs staff with relevant qualifications and experience;
- keeps abreast of developments in education and training;
- enhances and up-dates the skills of its staff;
- maintains the relevance and appeal of its programs and courses;
- strengthens and improves the service provided to its students and customers.
A academy-wide training needs analysis is performed biennially, and culminates in the preparation of a Academy Staff Development Plan (2-O09). Individual development and training needs are identified through evaluations and performance development reviews. Staff members are allocated to duties for which they are suitably qualified, trained, and/or experienced. Where necessary, appropriate prior training or on-the-job training is provided.

**Competence, Awareness and Training (6.2.2)**
Managers within the organization are responsible for ensuring that employees have the necessary competence for the effective and efficient operation of the Academy. In order to maintain the level of competence required, Managers ensure that employees under their responsibility remain current in the field of expertise for which they are employed and that employees, together with their immediate supervisor, plan their education and training needs in order to maintain the competencies necessary for the position. Employees essential to the achievement of stated quality objectives are made aware of their role and responsibility towards the achievement of the objectives through their manager. Where necessary, managers organize meetings with employees to determine the approach that will be taken to meet the relevant objectives.

The Academy maintains a training and development file for each employee. A record of the employee's education, skills, experience and training is maintained in this file. Staff are asked to retain a record of the external workshops, conferences, seminars, and industry training sessions in their personal portfolio. Staff who complete training, achieve professional recognition, earn a certificate/diploma/degree, etc., are asked to forward this information, along with a copy of any credentials received, to Human Resources.

**Infrastructure (6.3)**
The Academy reviews the requirements for facilities and equipment through the Strategic and Operational Planning (2-O06-01) and budgeting processes (2-O13). IT and e-learning center reviews the currency of computers in the Academy and provides a process for keeping student computer labs and computers used by individual staff current. This process involves an assessment of what the requirements of all users are and the allocation of more technically advance computers to those areas where they are most needed, and the reallocation of other computers to other areas of the Academy as needed.

IT and e-learning center maintains the Academy's computer network system, provides an electronic mail system for all staff.
and e-learning as for full-time students and also for distance learning students. Center also provides support for a number of general software programs utilized by Academy staff and students and smooth operation of academy website.

The Academy also maintains a website that provides information on many aspects of the Academy including registration information, current information, and Academy job postings. There is also an internal staff website that provides staff with relevant information and links (www.office.bsma.edu.ge).

**Work Environment (6.4)**

The Academy’s Internal regulation Policy 2-O02 Institutional Safety, Health and Wellness provides direction to members of the Academy community for the maintenance of safety awareness in programs and within Academy facilities and for the promotion of wellness activities. The Wellness in the Workplace initiative was established to promote physical activity, improve nutrition, and the reduction of stress and smoking. Committees at various centres plan activities and events to encourage staff participation in this program. There is also a Wellness in the Workplace website that promotes various activities and provides wellness related information.

**Product Realization (7)**

**Planning of Product Realization (7.1)**

The scope of the Academy’s Quality System states: “Quality is delivered by people, to people, through people. The design and delivery of education and training to students including support services.”

Product realization then applies to those processes which impact directly on the Academy’s provision of education and training and related student support services. The following processes have been identified as being relevant to supporting product realization:

- Training center procedure- Trainee’s registration, testing-evaluation and certificate issuing procedure (2-F01)
- Procedure for student’s registration and external mobility/transfer (2-F02)
- Educational process procedure for vocationals (2-F03)
- Educational process procedure for bachelors (2-F04)
- Educational process procedure for masters (2-F05)
- Procedure for evaluation of the students achievements (regulation for intermediate and final examination) (2-F06)
- Procedure for the rule of using the strict register forms - diplomas (2-F07)
- The rules of library (2-F 08)
- Design and Development of Programs and Syllabuses (2-F 09)
- Purchasing of Equipment (See section 7.4, Purchasing, of this manual, 2-Q05-10)
- Other Support Services (includes Library, computer services)

Documented procedures, as indicated above, cover some of these processes and those responsible for overseeing the administration of the process ensure that objectives are established and requirements identified.

**Customer Related Processes (7.2)**

**Determination of Requirements Related to the Product (7.2.1)**

The Academy’s “product” is the educational programs, courses, and services that it provides. The Academy’s primary client, the student, expects:

- the product to meet stated standards and outcomes;
- the product to be current & relevant;
- the product to provide them with the opportunity to receive education & training that will assist them in meeting the requirements of the industry or business of their chosen career;
- any support services to meet or exceed the normal standard for that service;

Educational programs and courses can essentially be divided into two types:

- applied degree/diploma/ continuing education programs (vocational, bachelar, masters)
- applied certificate/ short certificate courses – training programs for the Training Center (ND 2-F01 for certificates issued by Academy, ND 1-01-05 for certificates issued by MTA);

New applied degree/diploma/ continual education programs are subject to approval by the Academy Senate.

For applied degree/diploma/ continual education programs the determination of requirements related to the product is a result of several processes. First and foremost the primary objective of any of the Academy's programs and courses is to provide an educational product that is relevant to the applicable industry or business. During the

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development and delivery of applied degree/diploma/ continual education programs this is attained through the contribution by representatives from the related industry/business /government to the occupational analysis. Course outlines are developed for all continuing education programs and outcomes are identified. New applied certificates/ short training courses/training programs for the Training Center are subject to acceptance by Maritime Transport Agency (MTA) and when approval by the Academy Senate.

Review of Requirements Related to the Product (7.2.2) 

The review of requirements related to new applied degree/diploma/ continuing education programs is conducted through the design and development processes (2-F09). Programs are reviewed by program’s author and approved by faculty and after on Academy Senate. Programs may also be reviewed by QAS of the Academy and/or by programs staff on an on-going basis. Formal and informal feedback provided by students, recommendations from business and industry, and a desire to keep programs current and relevant, all drive an on-going review process. When program requirements change, a development and implementation plan is developed.

Short training courses (training center) are designed and developed according to IMO model courses. Before any required or customized training course is finalized (2-F01), it is reviewed to ensure that:

- customer requirements are clearly defined;
- where the customer will be supplying facilities equipment and/or materials, necessary procedures are followed;
- the Academy has the capability to deliver the training;
- any differences between initial proposals and final specifications are resolved.

Customer Communication (7.2.4) 

Documented procedures have been established to control program and continuing education course (2-F09), student and admissions and registration processes (2-F02). Admissions staff may redirect inquiries as appropriate in order to provide customers (clients) with the best response to their inquiry. Some of the smaller centres and the affiliates also have on-site support staff that have been delegated some admissions office functions.

Product requirements are defined through program fact sheets, the Academic Calendar and the Academy Website. These sources provide clients with accurate information regarding programs and courses. This information along with occupational job analysis and course outlines, form the basis for the identification of customer requirements.
Student orientation sessions generally provide students with a broad range of information on the Academy, their program, what is expected of them as students, and the various services provided by the Academy.

Student feedback, obtained from various surveys and questionnaires provided to students both during the program and after graduating, is also considered in program review and planning. Every continuing education student is given the opportunity to complete a course evaluation and provide comments which in turn feed into planning for subsequent continuing education offerings.

Places in applied degree/diploma/certificate programs are offered to applicants on the basis of established prerequisites and assessment criteria. Applicants, whose application does not meet one or more of the program prerequisites, may be requested to undergo an academic assessment and/or to meet with an Admissions Specialist (7 and 14 subdivisions specialist) to review their application (for the short-term courses see procedure 2-F01- entry standard, for the continual education see the procedures 2-F02 and 2-F03, - education students are admitted according to the national examination results). Applications from mature applicants, who do not meet normal entry criteria may be considered on an individual basis, provided they meet program specific minimum requirements and satisfy specific conditions. All applicants who have their application rejected are notified by a letter and invited to contact an Admissions specialist.

Students enrolling in courses offered by the 14 subdivision for the continual education and 7 subdivision – for short term courses, which are registered by internal register, and an individual learning plan is developed in consultation with the student to assist them in meeting their objective (on faculty for the continual education students and on the training center – for the short term students).

Program and syllabuses requirements for education programs prescribed by the appropriate government department (for continual education by the Ministry of Education and Science) or agency (for the short term education by Maritime Transport Agency) are reviewed and satisfied on an ongoing basis.

Wherever possible, the Academy facilitates the transfer of students to other programs if those for which they register prove inappropriate.
Design and Development Planning (7.3.1)

Program and syllabus initiation, design, development, and approval processes are carried out in accordance with detailed documents that include external and internal Quality Procedures and normative documents (2-Q05-01). Applied degree/diploma/short certificate courses/continuing education programs are dealt with separately due to their differing levels of complexity. All new programs are subject to approval by the Faculty Board and then by Academy Senate.

The process for revision of existing programs is also included in these documents (2-F9).

Syllabus design and development of applied degree/diploma/short certificate courses/continuing education is overseen by subjct reader—specific member (lecturer or instructor) of staff, who is responsible for that subject, under supervision of QAS. Subject individual program design projects are allocated to and led by responsibles for design, development and then establishing, which includes the following at minimum:

a) provides an overview of the development required;

b) identifies the staff to be involved and their responsibilities;

c) identifies the resources required;

d) includes time frames for various development phases and for overall completion of the development;

e) identifies and describe, including when they will occur, the review, verification and validation processes that will be used;

f) includes time frames for implementation of the revision;

g) for program revisions, identifies how the implementation of the revision will impact on enrolled students and, if applicable, the next two graduating classes, including the credentials that will be issued.

The design process includes the generation of occupational charts/specifications, learning guides and other supporting material (IMO model Courses). Customized training and continuing education courses may be developed to address the general demands of industry in response to specific requests for training.

For the short courses trainings the lead-time is often short, and this is reflected in the streamlined approach adopted by the design requirements for these courses. A nominated member of staff acts as project coordinator and ensures
compliance with design, development, and approval requirements: for long term education approved by faculty and then by Senate, for the short courses - by Senate. Continual educational and short term cours ed programs are authorized by MTA.

**Design and Development Inputs (7.3.2)**

For each program being developed or undergoing a major revision, design input and output requirements are defined, and review, verification, and validation activities are performed at appropriate stages, in accordance with the Design and Development Plan. Industry inputs are an important feature of the design process (2 F-08).

The design and development of the program also considers appropriate Academy standards regarding program design and development, applicable entrance and prerequisite requirements, and applicable academic, regulatory or other requirements that may be required.

Inputs are reviewed for adequacy to determine if they meet requirements and to ensure they are not in conflict with each other.

**Design and Development Output (7.3.3)**

Design and development outputs for applied degree/diploma/continual educational programs normally consist of Chart or Specification with outcomes and competencies, Instructional Material, and Assessment Criteria (ND 1-01-07). During Academy accreditation and authorization (once in 5 year with regular annually selfassessment questionnaire filling) all programs and syllabuses are checked by national educational quality development center requirements for the national regulations and standards conformity. Design and development outputs for applied degree/diploma/short term training courses normally consist of Specification with outcomes and competencies, Instructional Material listed in IMO training courses.

Prior to delivery of the training, the appropriate staff (QAS) ensures the program is sufficiently developed, to permit delivery of the training to the students. During this process the design and development outputs are verified against the inputs.

Also, within at the end of the term a new program startup or after a program that has undergone a major revision restarts, conducts a formal internal evaluation.

**Design and Development Review (7.3.4)**

Preliminary and Final Design reviews and, when necessary, additional intermediate reviews, are specified in the program’s
Development and Implementation Plan. As part of the design review process, outputs are compared with Design input requirements and any necessary action will be taken to address discrepancies. Participants of reviews represent the necessary expertise to perform the review.

All reviews are documented in the form of minutes of meetings which clearly identify actions to be taken, personnel responsible and completion dates for actions.

Annually quality assurance head of the faculty and QAS review evaluation summaries and other relevant data. The QAS reviews programs and syllabusis charts, occupation specifications (STCW convention rules, updated resolutions and IMO model courses recommendations), course outlines, or other program design documents in light of this information and any changes that have occurred in the occupation, and make recommendations regarding revisions. Depending on the extent of the changes recommended, changes may be able to be implemented within a short time period or a more long term strategy will have to be considered.

**Design and Development Verification (7.3.5)**

QAS coordinates the verification and validation of new or revised program development. Verification and validation activities are included in the Development and Implementation Plan.

All verification and validation activities are documented and clearly describe the activity, when it was conducted, what part of the design was involved, what actions, if any, are to be taken, the personnel responsible and any follow-up required. Verification in the design and development of educational programs may include the following:

- comparing the program to established Academy standards with regard to program and syllibuses development;
- comparing the program to an existing National Standard, International standards or accreditation standard;
- having the program, or portions of it, reviewed by industry experts;
- reviewing the syllibuses developed to ensure it meets the requirements that were identified by the STCW and IMO courses;
- reviewing the programs developed to determine if the desired outcomes are being met.

**Design and Development Validation (7.3.6)**

The process of designing educational programs has two primary objectives:

- to meet the needs of the recipient of the education (the student); and
to meet the requirements of the industry or business where the student will ultimately work.

Therefore the objective of validating an educational program is to determine if the program is meeting both of these primary objectives. Some validation in the early stages of the design process, such as having an industry advisory group validate the course outlines, may be necessary, while the primary validation occurs during and immediately after the initial program offering.

Validation may occur through a number of defined processes such as:

- formal internal evaluation by the QAS within the academic term of program startup or restart;
- review by industry/business advisory committees or industry/business experts (MTA);
- when the program is required to meet an existing National Standard or an accreditation review by an external body, this may form part of the validation requirements;
- conducting student reviews such as through questionnaires, progress and success reviews, and other feedback mechanisms, on an ongoing basis during the initial offering (this may be a combination of internal reviews by the program Learners/Instructor/orQAS);
- ongoing evaluation, review and adjustment, when necessary, of syllabus by program Leader;
- graduate and employer or other feedback mechanisms.

**Control of Design and Development Changes (7.3.7)**

Changes in syllabuses are done based by the syllabus lecturer/author on the amendments in educational program or based on the changes in the reference documents, on which the syllabus is based on.

Minor changes to syllabuses design and delivery are generally part of the day to day program delivery process and are made as required by lecturer/Instructors.

Major changes to syllabus should be approved by the Faculty board, when informed the QAS, by adding the necessary changes to document Master list (2-Q05-01). Changes in program is under control of the program head/program originator. When the need for more significant changes, such as the addition or deletion of courses or significant rewriting of the developed program is indicated by staff or from the results of evaluations, the originator of the program should issue the new or edited program which should be approved by the Faculty board, and inform the QAS and when approved by the Senate. Any changes to the design will be reviewed and approved as required by Academy Regulations before any material is reissued (2-F8).

Design changes are formally reviewed, recorded, and implemented. A majority of the programs offered by the Academy are competency-based and occupational analysis and specifications are important outcomes of

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the design process. Once these documents have been approved, they
are subjected to regular review and revision in association
with representatives from the relevant industries (2-Q04-01).
Records of changes are maintained by the QAS (2-Q05-01).

**Purchasing (7.4)**

**Purchasing Process (7.4.1)**
The purchasing of goods with is controlled by Georgian Legislation (2-Q05-01) prescribed in Purchasing Procedure 2-
Q05-10.

**Purchasing Information (7.4.2)**
Purchasing documents are required to contain clear descriptions of the goods ordered.
Such documents are reviewed and endorsed by an authorized signatory prior to release.
The tendering process for other major purchases is controlled through normal tendering processes.
Contracts signed with suppliers who have been awarded a tender are reviewed and approved. Suppliers who
have a “non-approved” designation are not considered during any tendering process.

**Verification of Purchased Product (7.4.3)**
Delivered goods are checked for correctness against the original purchase order, and examined for damage or faults.
Defective items are segregated and/or labelled to prevent their inadvertent use. The originator of the purchase requisition
or appropriate designate checks the items received to ensure they are working and are capable of performing the intended
function. The originator of the Purchase Requisition, or designate, inspects/tests the
equipment for damage or malfunction. Problems with the equipment are reported to the Purchasing Department.

**Production and Service Provision (7.5)**

**Control of Production and Service Provision (7.5.1)**
The planning, delivery, monitoring, and review of programs and
courses are controlled in accordance with a comprehensive
range of procedures. The QMS also includes, where it is
applicable, provision for equipment maintenance and various student
support mechanisms.
Program/course Planning and Delivery

A Curriculum Delivery Plan is required for all full-time programs. All courses in a full-time program have an approved course outline. For continuing education courses a course outline is prepared. Where appropriate, Planning, Advisory, and Review meetings are held. Program Executive Directors/Program Managers oversee the delivery of all programs and courses. A range of procedures set out requirements for:

- program planning and delivery;
- scheduling of student activities;
- student orientation;
- reviewing student progress and dealing with concerns;
- dealing with situations of student misconduct;
- program-related meetings, including student review meetings;
- monitoring student attendance;
- on-the-job training.

Post-program Processes

Procedures control student exit and graduation processes, including:

- the issuing of records of achievement, transcripts and diplomas/certificates;
- the processing of requests for transcripts;
- the release of student information;
- the planning of graduations.

Post-course guidance and assistance could also potentially occur as part of contract training, and would be covered by relevant contractual arrangements.

Equipment Maintenance and Repair

Equipment used in the delivery of education and training is suitably maintained to ensure minimum disruption of learning activities. A fault reporting process ensures that unsafe equipment is removed from service and repaired or replaced (ND 2-Q05-10). A computer Help-Desk has been established to provide assistance on hardware and software problems. It also coordinates the reporting of problems with audio-visual equipment.
Student Support

For the provision of support services to students two subdivisions are maintained: students support service (15) and student’s self-governance (21).

Assessment of Students

Students are assessed against established program prerequisites prior to entry to the Academy as part of the admissions procedure (ND 2-F06).

In-program/course assessment methods and schedules are implemented according to the demands of the particular program or course. Student assessments and progress are recorded and regularly reviewed. Students experiencing difficulties may be referred to Academic Support Services. Academy Counsellors may refer students for assessment (14 subdivision Students’ registration, assessment and monitoring service) to Assessment & Counseling Services. An appeals procedure exists for students who are dissatisfied with their grades.

Validation of Processes for Production and Service Provision (7.5.2)

As noted earlier in 7.2.1 of this document, the Academy’s “product” is the educational programs, courses, and services that it provides. Section 7.1 described product realization as applying to those processes which impact directly on the Academy’s provision of Education and training and related student support services. The following processes were identified as being relevant to supporting product realization:

- Admissions & Registration (2-F02)
- Student Exit & Graduation (2-F06)
- Provision of Student Support Services
- Design and Development of Programs and Syllabuses (2-F06)
- Delivery of Programs
- Purchasing of Equipment (2-Q05-10)
- Other Support Services (includes Library, Bookstore, computer services)

The output from each of the above processes, with the exception of “Design and Development of Programs and Curriculum”,

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is verified by monitoring and/or measuring during the delivery of the service.
Validation of program design and development is done through various means already described in section 7.3.6 (Design and Development Validation).

The procedures identified next to each of the processes listed above include defined responsibilities for review.

**Student Feedback and Review**
Student feedback is sought via questionnaires and student review meetings. The results are analyzed and, where appropriate, acted upon by the staff delivering programs, courses, and student services.

**Identification and Traceability (7.5.3)**
Tracking is achieved via a number of different procedures, which record:

- student applications, registrations and transfers;
- the status of program/course delivery;
- individual student progress;
- attendance, where this is a requirement;
- exits from programs;
- graduations and the issuing of diplomas/certificates.

**Customer Property (7.5.4)**
The suitability of facilities or materials (may include intellectual property) provided by customers for incorporation into courses, programs or events is established before any contract is finalized. Such facilities and materials are verified before use, and any damage or loss is reported to the customer.

**Preservation of Product (7.5.5)**
The conformity of educational programs and the graduation credentials provided by the Academy is controlled through the Board Policies, Board Regulations, Administrative Regulations and Quality Procedures.

The recognized official source for all occupational analysis documents, course outlines, profiles, lists of required courses, and pass marks is the Program directions of Faculty. The Curriculum Assistant with this department ensures that any revision to these documents is recorded and that program staff and the Office of the Registrar are kept current.
Appropriate members of Management Deanery are responsible for designating individuals to be responsible for development and delivery of continuing education courses, including contract/customized training. These individuals, sometimes in consultation with others in the Academy, ensure the conformity of these courses to stated standards and/or requirements.

The Office of the Registrar is responsible for ensuring that all applied degree/diploma/certificate program graduation credentials and continuing education certificates meet the official minimum requirements for the program/course and that the credentials presented meet the official Academy regulations for graduation credentials.

Control of Monitoring and Measuring Devices (7.6) 4

Permissible exclusion: any monitoring or measuring devices used are used for the purposes of training. Students are often required to calibrate and adjust these devices as part of their training. The absence of accurately calibrated equipment and devices would not constitute a failure in the process of designing and delivering education/training to students.

Measurement, Analysis and Improvement

General (8.1) 4

The Academy uses a range of performance indicators to evaluate the quality and success of each program offered by the Academy (KPI). These indicators are compiled yearly by the QAS of Faculty from a combination of internally generated statistical data and graduate employment and satisfaction surveys and a report is prepared and circulated to the Management Executive Committee(Senate) and the QAS. The indicators are used to identify performance trends, and provide a basis for strategic decision-making and improvement. The indicators are also used to establish Quality Objectives and provide a basis for measurement of the achievement of objectives.

In addition to feedback provided by students and graduates of the Academy, Industry Advisory Committees (MTA) also provide the Academy with a valuable source of information regarding programs and courses, the curriculum and the success of graduates.

Internal reviews of programs and syllibuses by the faculties and internal quality audits (2-Q04-03) are used to ensure conformity within the QMS.
Monitoring and Measurement (8.2)

- Customer/Client Satisfaction (8.2.1)

Client satisfaction is measured through various means identified undersection 8.2.3. Processes are in place to ensure information obtained regarding client satisfaction is analyzed and considered in the Academy’s planning processes.

Internal Quality Audits (8.2.2)

The operation of the Academy's QMS is internally audited in order to determine its adequacy and effectiveness, and to verify staff compliance with procedures (2-Q04-03). Auditing and follow-up activities are carried out systematically in accordance with audit plans and a documented procedure. Audits are performed by trained personnel who are independent of the activities being audited. Audit results are recorded and submitted to the Quality Specialist who communicates the results to those responsible for the areas and activities audited. Auditees are required to take timely post-audit corrective action. Follow-up audit activities are arranged to verify and record the implementation and effectiveness of corrective action. The results of quality audits are reviewed by the Quality specialist and are an agenda item at management review meetings.

Monitoring and Measurement Processes (8.2.3)

A number of procedures include steps for determining the satisfaction of students registered in both applied degree/diploma/certificate programs and continuing education courses. Students are provided with information regarding the program/course expectations and outcomes through either marketing information or program and course information provided by learning managers and instructors. All students are given an opportunity during either the program or prior to completion of a course to provide feedback through the completion of a program or course evaluation form. Students, as well as any individual from the community, can at any time lodge a formal complaint regarding the Academy or any of the services provided by the Academy.

Students who are dissatisfied with a rating, grade or other decision that affects their academic standing may also use one of the appeal processes defined in the procedures (2-O07). Students may at any time express any concerns or dissatisfaction to programs staff, student services staff, admissions staff or any administrative staff member. Staff are encouraged to try and solve any student concerns themselves or direct the
student to another member of staff who may be more appropriate for a particular concern. Concerns that cannot be resolved by staff are directed to the appropriate member of Academy Management. Student feedback from surveys and questionnaires are reviewed by the Academy's QAS and Academy Management. The Specialist makes reports to MEC with regard to any adverse trends. Any adverse trends with regards to customer satisfaction are noted and addressed by the appropriate member of management.

**Monitoring and Measurement of Product (8.2.4)**

The Academy’s product (design and delivery of education and training to students including support services) is delivered through the processes identified under section 7 of this document. Monitoring of these processes is included in the procedures identified and through the Management Review process (2-Q05-06).

**Control of Nonconforming Product (8.3)**

When possible, any nonconformity with regard to the provision of service to the Academy’s clients, is dealt with by the staff or management member(s) who are directly involved. Staff are required to identify, document, and take timely action to address problems that fall within the scope of the QMS. Problems that cannot be handled at a particular level are referred upwards. Documented procedures address problems associated with:

- program and course organization and delivery;
- student progress and discipline (2-O08);
- general administration and services;
- purchasing (2-Q05-10).

Problems may be resolved by:

- suspending, terminating, modifying or repeating certain activities or processes;
- replacing, substituting or withdrawing staff, facilities, materials or accommodation;
- amending documentation or data.

Clients or members of the general public who are experiencing difficulties in resolving a specific nonconformity can bring it to the attention of the Quality specialist, a member of senior management.
or the Rector. Any member of staff can initiate a Corrective Action Request, CAR (2-Q04-05), to address any nonconformance they become aware of.

Any outstanding Corrective Action Requests that have not been addressed within a reasonable timeframe are forwarded to the next level of management and eventually to the Rector if they remain unresolved.

When situations occur that prevent compliance with normal procedural requirements, or that result in a deviation in the way a service is ultimately delivered, the responsible member of staff or management can make a request to the Quality specialist that a concession be granted to permit the suspension of normal procedural requirements for that specific occurrence. The Quality specialist or designate monitors the concession until it is closed. Records are kept by the Quality specialist of all concessions requested, whether they are granted or not.

**Analysis of Data (8.4)**

Procedure of Program/Course Monitoring, Evaluation & Review and Performance Indicators provide a process for analyzing data gathered through the student feedback and evaluation processes described. The results of the analyses are reported to MEC during Management Review meetings.

**Improvement (8.5)**

**Continual Improvement (8.5.1)**

Continual improvement of the QMS is inherent in many of the system procedures and processes. Through internal audits, investigations into complaints, users requesting concessions, management review, monitoring of processes, reviews of feedback, corrective and prevention action requests and resulting investigations, improvement initiative proposals, input from QAS and accrediting bodies, and ongoing diligence on the part of Academy employees, the QMS is under constant surveillance for ways to improve the delivery of service to the Academy’s clients.

The setting of Quality Objectives tied to the improvement of various factors that are monitored and measured within the QMS provides another vehicle for continual improvement.

Actual and potential student, program, service and related problems, are investigated in accordance with documented procedures to identify the action required to prevent their occurrence or recurrence. Student feedback and performance indicators contribute to the identification of opportunities for improvement and/or remedial action.

Corrective and preventive measures are recorded, and necessary controls are exercised to ensure their effectiveness.
Academy staff may also initiate an improvement initiative by completing and submitting an Improvement Initiative Proposal. An improvement initiative is an opportunity to improve some aspect of the Academy.

Formal student and customer complaints are recorded, and investigated by an individual assigned by the Rector. Complainants are promptly informed of the outcome, including any corrective action taken or proposed.

Records of complaints received by the Academy, and the results of internal and external quality audits, are reviewed periodically by the Quality specialist in order to identify adverse trends.

Where investigations highlight the need for changes in working practices or documentation, the Quality specialist arranges for procedures and other documentation to be revised accordingly.

**Corrective Action (8.5.2)**

There are, within the QMS, several procedures, listed below, that deal with resolving specific situations or problems that may occur through the delivery of services to clients of the Academy.

Procedure - Student Accidents & Injuries
Procedure - Academic Progress
Procedure - Student Misconduct
Procedure - Student Appeals and Complaints

However, when problems that cannot be dealt with by these procedures or other incidents of nonconformance with Quality System requirements occur, Quality Procedure 2-Q04-04, Continual Improvement 2-Q05-06, provides a process whereby the nonconformance is documented and action is taken. Under this procedure any factors that are causing, or have the potential to cause, problems within the Quality System are investigated, and appropriate corrective action is taken. All Corrective Action Requests are forwarded to the Quality specialist who generally assigns them to an Academy employee for action.

**Preventive Action (8.5.3)**

Whenever a nonconformance, problem, or other adverse factor is investigated, preventive, as well as corrective action is sought to help prevent future occurrences of the situation. In some situations the
only action that can be taken is preventive. This process is also controlled under Procedure 2-Q04-06. Preventive actions can also be initiated under any one of the other procedures listed in section 8.5.2 above.

Users of the QMS are also encouraged to pass on any comments or suggestions they may have concerning the QMS or any other aspect of Academy operations that may potentially affect the service provided to the clients of the Academy to the Quality Coordinator Internal audit reports also include a section where auditors can provide recommendations or make observations for the benefit of those being audited.
STRUCTURE OF BATUMI STATE MARITIME ACADEMY

Senate's Office

Senator

Rector's Office

Rector

Administrative Department

Deputy Rector

Maritime Faculty

Seafarers Training and Certification Center

Vocational Training Center

Business Management Faculty

IT & E-Learning Center

Library

Students Support Service

Students Registration, Assessment & Monitoring Service

Security & Safety Service

Financial-Economic Department

Local Department

Human Resources Management Service

Material Resource Management Service

Students Self-Governance
Chart No 2 Quality documents structure

- Quality Policy
- Quality Objectives
- Quality Assurance Manual
- Core QMS Procedures
- Fundamental and organizational processes procedures, provisions
- Working instructions, job descriptions, plans, etc.
- Forms, templates, flowcharts
- Records
- External Docs