

Quality Management Framework of LUNEX

A description of the Quality Management Context, Approach, Tools, and Outputs
for Quality Assurance at LUNEX

Sign-off Page

Approved

Name	Date of approval
Academic Director – Prof. Dr. Andreas Mierau	13.10.2022
Chair of the Teaching and Learning Council – Prof. Dr. Mathieu Winand	13.10.2022
Chair of the Examination Board – Assist. Prof. Dr. Fraser Carson	13.10.2022

Revisions:

Name	Date of approval
Quality Assurance Manager – Ms. Delia Marin	27.03.2024
Academic Director – Prof. Dr. Andreas Mierau	05.07.2024
Head of Administration – Ms. Mihaela Bozonca	05.07.2024

Intended audience for this document:

LUNEX Management and Staff
External Review Agencies – Audit and Accreditation

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Part 1: A Description of the Framework

1. Context

LUNEX Quality Management System (QMS) is based on a framework which manages and facilitates a cyclical process of plan-implement-review-change as per the well-known Deming Cycle. The constituents and tools of this system are policies and operational procedures that support the overall Strategy. LUNEX is influenced and directed as to its Quality Management System and operations in two major and complimentary ways:

- 1.1. LUNEX major shareholder is Carl Remigius Fresenius Education AG (CRF), integrated into the Group Quality Management System. As part of this, LUNEX maintains a QMS certified to ISO 9001:2015 and ISO 29990:2010.
- 1.2. LUNEX is situated in the Grand Duchy of Luxembourg and subject to accreditation by the Luxembourg Ministry of Research and Higher Education. The institution as a whole is visited by accreditation agencies appointed by the ministry at regular intervals which assess the quality of Academic programmes, facilities and their supporting processes against the European Standards and Guidelines for Quality Assurance in Higher Education (ESG) as well as the additional requirements of the Luxembourg Ministry of Research and Higher Education.

Policy and marketing decisions are informed by the institution strategy, and the legal and operational framework is provided by the Luxembourg Ministry of Research and Higher Education. The ESG provide the standards and guidelines for the Quality Management System at LUNEX.

- 1.3. The Quality Management System is based on the following premises:
 - 1.3.1. Organisational bodies and individuals all taking responsibility for Quality Assurance
 - 1.3.2. Academic freedom and integrity and protections against academic fraud
 - 1.3.3. No intolerance & discrimination

2. Related Documents

- 2.1. CRF Group Quality Management Handbook
- 2.2. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)
- 2.3. The Higher Education Law of 21 July 2023

3. Audits: Internal and External

- 3.1. The LUNEX Quality Management System is audited annually by CRF AG
 - 3.1.1. CRF AG conducts an audit of LUNEX every year and makes recommendations to the board.
- 3.2. ISO Certification (every three years):
 - 3.2.1. LUNEX major shareholder is Cognos International, part of the German CRF AG Group. The Group Quality Management holds an annual internal audit of LUNEX. This audit measures

compliance against the group's internal QMS. Any shortcomings are listed and given a deadline for compliance. As part of the group, LUNEX also undergoes an external audit by an appointed external company. This audit influences the group's ISO accreditation(s) and any major shortcoming could be a risk to the group's ISO status. LUNEX maintains a QMS certified to ISO 9001:2015 and ISO 29990:2010.

3.3. Programme Accreditation and Reaccreditation:

3.3.1. An independent agency tasked with assessing the institution quality management, competency, and capacity, is appointed by Ministry for Research and Higher Education in Luxembourg for the initial programme accreditation, and then every five years during the reaccreditation of the programme.

4. Responsibilities

4.1. The responsibilities for the QMS of LUNEX are structured as follows:

LUNEX is represented on the steering committee of CRF AG by the board of directors, the managing directors of the company. They are ultimately responsible for the implementation of the QMS at LUNEX and superordinate organisational and personnel issues. CRF AG and LUNEX work together to manage the following quality management tasks:

4.1.1. Drafting of the overall mission statement and objectives derived from it

4.1.2. Definition of group high-level processes

4.1.3. Creation and updating of the group Quality Management Handbook (QMH)

4.1.4. Information transfer to employees of the respective companies and support for the implementation of the QMS in the own organisations

At the LUNEX level, QM is subordinated to the Head of Administration who is a member of the extended Board of Directors. They check the planning and implementation of the institution quality objectives, the promotion of quality awareness, constant review and evaluation of the further development of quality management, audit preparation, updating and further development of the QM specification documents, coordinating the annual internal audit programme, and evaluation of internal audits, monitoring of corrective and preventive actions, reporting to the board of directors and coordination with the QM control centre of CRF AG.

4.3. Within the departments, quality management is integrated into studies, teaching, research, and further education. This ensures that both the quality objectives, applicable to all, devolve to departments and become integrated in their operations. At the same time, the system and its responsible persons are flexible enough to address issues and processes that are specific to departments or areas.

4.4. At a high level the following responsibilities are defined and designated:

4.4.1. The Quality Manager, responsible for the quality management of the company, conducts training (individual and group) and internal audits to ensure compliance with and monitor the quality management system and drive the process for continuous improvement.

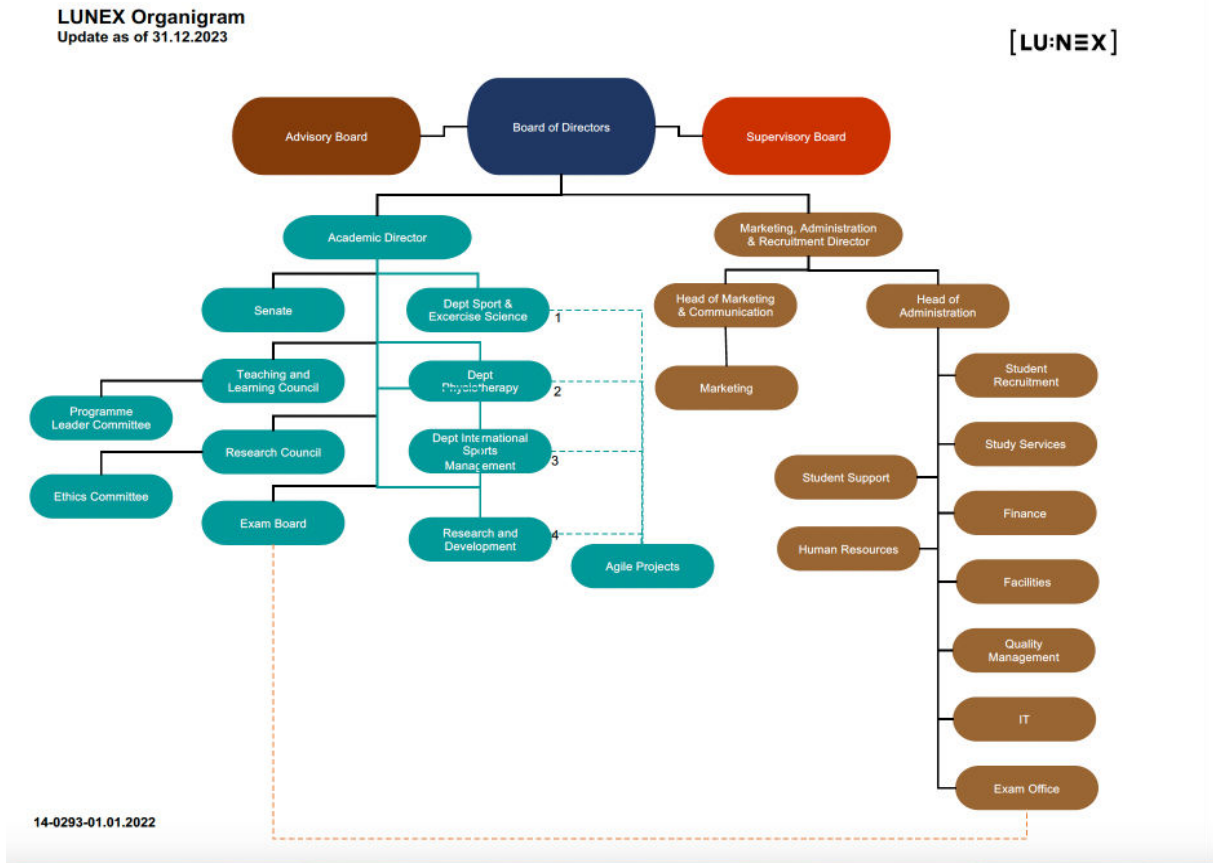
4.4.2. Head of Departments (HoDs) are responsible for ensuring that quality management tasks are performed in their respective departments and for instilling a "quality" mindset in their staff.

4.4.3. Programme Leaders are responsible for quality in the respective study programme, management, and control of the program modules.

4.4.4. Councils, their chairs, and sub-committees are responsible for cross department quality in their respective remits.

4.4.5. Module Co-ordinators are responsible for the quality of delivery of their teaching modules.

5. Organisational Structure



5.2. LUNEX's Quality Management System is supported by its organisational structure:

5.2.1. Lesser issues and possible remediations are considered and decided at department or council level and then forwarded further for approval if required. Issues and their proposed remediations are recorded in the minutes of the meeting.

5.2.2. Significant changes e.g., a change to a procedure, module content or internal regulation are managed in a formal process whereby the change is proposed, discussed, and communicated at council level and then submitted to the Board of Directors for approval. Proposed changes and their solutions, or remediations are recorded in the minutes of the council and Board meetings.

5.2.3. Implementation of an issue remediation or significant change is carried out in a controlled way through the appropriate body and communicated to those affected prior to the change.

6. Constituents of the QA Framework:

- 6.1. The constituents of the Quality Assurance Framework are the documents (policies, procedures, guidelines, constitutions, codes of conduct), operations and the QA calendar.
- 6.2. Operational activities include the Cyclical review of documents including policies, Cyclical review of operational processes, Managing and conducting surveys, Meetings of Organisational Bodies, Audits, Accreditation assessments.

7. Technical Tools supporting the QA Process

LUNEX uses the following technical tools for its operations:

- 7.1. Microsoft Office365:
 - 7.1.1. Exchange: email and calendar services
 - 7.1.2. SharePoint: documentation storage and availability, document versioning, storage of meeting minutes, storage of audit evidence
 - 7.1.3. QA Calendar, communications with internal and external stakeholders
 - 7.1.4. Office applications and collaboration tools
- 7.2. Rise: Financial and Accounting
- 7.3. Evasys: Assessments/ Surveys
- 7.4. eHVP: Student Management System
- 7.5. SalesForce: Capture of new applicants and management of their progress through the application process
- 7.6. Sonia Placement Management Software: Management of Student Placements
- 7.7. myHR – HR administration

These tools provide both quantitative and qualitative feedback. Further qualitative feedback is gathered from the various councils, the student support system, small group tutorials, one on one interviews (in person and telephonic).

8. Supporting the Quality Management Approach

Supporting LUNEX approach to quality management and to facilitate a continuous cycle of improvement, several basic structures and understandings are in place:

- 8.1. Clear communications for operational responsibilities, procedures, and approvals
- 8.2. Fit for purpose mechanisms of measurement, review, and feedback
- 8.3. A document library with formal document control

- 8.4. A review and update process for internal processes and documents
- 8.5. A calendar for scheduling elements of the cycle of continuous improvement
- 8.6. Records of operations for audit purposes
- 8.7. Active involvement of all stakeholders

9. Outputs of the QMS:

The list of outputs from the QMS are as follows:

- 9.1. Key figures for management
Key figures for management include statistics on student success, financial figures, staff qualifications and progression, academic output (journals, conference attendance etc) and impact factors, amongst others.
- 9.2. Internal and external reports for stakeholders
Internal reports are produced for management and internal bodies or departments. External Reports are provided to stakeholders such as the Ministry of Research and Higher Education in Luxembourg, the Supervisory Board of LUNEX and CRF AG.
- 9.3. Recommendations for improvements
Recommendations for improvements are derived from discussions minuted within the departments or body's meetings, approved by the board and then implemented.
- 9.4. Up-to-date processes, procedures, measurement data
Processes and procedures are derived from policies and operations. Changes in policy and operations prompt changes in processes and procedures. In addition to this, processes and procedures are reviewed at regular intervals. Measurement data are derived from activities such as surveys (modules, student satisfaction, etc) and financial data.
- 9.5. Records of decisions and changes
Changes to policy, processes, or procedures are made within formal meetings of organisational bodies and approved by the board. At each stage, the decisions are recorded in the minutes of that meeting.
- 9.6. Operational evidence for audit purposes
Following approval of changes, documented in minutes of meetings, operations are changed to comply to those decisions. Where possible, compliance can be assessed from stored artifacts or documentation produced from the changed processes.
- 9.7. Clear and documented roles and responsibilities
Staff roles and responsibilities are defined at a higher level within the employment contract. Detailed (lower level) roles and responsibilities are assigned at departmental level.

10. Managing Changes to Processes, Procedures or Documents:

Several different scenarios prompt a review of a process, procedure, or document:

10.1. After receiving unsatisfactory data via a survey or information from a report:

10.1.1. The findings are discussed in the relevant body i.e., board, council, or committee. The discussions revolve around the efficacy, completeness and appropriateness of this policy, procedure, or other document(s).

10.1.2. Changes to the document(s) are agreed (or the existing document confirmed) and the decisions recorded in the minutes of the meeting.

10.1.3. The document(s) are updated by the document owner and sent to the stakeholders to review and sign-off.

10.1.4. The documents are published to the document library or other platform and the changes noted in the document tracking register.

10.1.5. The document users are informed of any changes to the process or procedure which at that point is considered implemented.

10.2. A legal, regulatory, or business strategy change:

10.2.1. The implications of the change(s) are discussed in the relevant body i.e., board, council, or committee. The discussions revolve around the compliance or suitability of this policy or other document(s) to the changes.

10.2.2. Changes to the document(s) are agreed (or the existing document confirmed) and the decisions recorded in the minutes of the meeting.

10.2.3. The document(s) are updated by the document owner and sent to the stakeholders to review and sign-off.

10.2.4. The documents are published to the document library or other platform and the changes noted in the document tracking register.

10.2.5. The document users are informed of any changes to the process or procedure which at that point is considered implemented.

10.3. An Annual Review of all Processes, Procedures and Documents

10.3.1. Each document is reviewed within one month of the anniversary of the last review date. If changes are required, the process follows the same as in 10.1. If no change is required, the review date is noted in the tracking spreadsheet. This spreadsheet is checked monthly by QA.

11. Audits

11.1. The next time a process or procedure is chosen for review during an audit, the latest approved document will be used to check the operational processes against it.

11.2. The findings of the audit are then communicated to the organisational body for remediation.

Part 2: Components and Schedule of the LUNEX Academic Quality Assurance Cycle

1. Student Statistics

1.1. Description:

Student statistics describe the student movements in terms of student recruitment (applicants, signed contracts), leavers, changes in student cohort, module passes & failures, premature leavers, and graduates.

1.2. Frequency:

Student Recruitment statistics are collected and reported weekly by the Student Recruitment Office; general student movement statistics are collected and reported per semester by Study Services.

1.3. Provided by:

Study Services, Student Recruitment, and Exam Office generate the statistics from the student management system, eHVP (students) and Salesforce (applicants).

1.4. Provided to:

Student Recruitment statistics are provided to the board, other statistics are provided to the Quality Manager and the relevant bodies and/ or departments every 6 months after the examination board has completed its end of semester sitting. This sitting confirms the module passes and failures for all students which affects student progression and graduation

1.5. Form(at) provided in:

Statistics are provided in tabular format and sent via email.

1.6. Purpose:

The purpose of these statistics is for the Board and other bodies to gauge (together with other information sources) the success and future security of the institution from a business perspective in terms of student numbers; and the academic success and progression of the students in terms of module passes and failures, drop out and progression rates.

1.7. Output(s):

These statistics are discussed by the board and the other relevant bodies to recommend policy and operational changes designed to improve the success, recruitment and retention of students and the overall quality of the educational offering of LUNEX.

1.8. Responsibilities:

Study Services, the Exam Office, Quality Management, and Student Recruitment: Generation of statistics

Organisational Bodies: Response to figures to increase student numbers and address student movements from an academic quality perspective

Quality Assurance: Assurance of process, publication of final report

2. Graduate Statistics/ Data

2.1. Description:

Graduate statistics provide LUNEX with statistics on the whereabouts of our graduate students e.g., where and in what circumstances they are currently working or studying further and how they feel their study programme at LUNEX prepared them for this.

2.2. Frequency:

Graduate statistics are collected every six months and reported on annually.

2.3. Provided by:

This data is collected by Quality Assurance via online survey using the survey application, Evasys. An invitation is sent to all students who have agreed to be contacted for this purpose, as per the GDPR.

2.4. Provided to:

A report is generated from Evasys by Quality Assurance and distributed to the Board, relevant bodies and heads of department.

2.5. Form(at) provided in:

The data is provided in the form of a report generated from the Evasys survey management application.

2.6. Purpose:

The purpose of the graduate survey is to track the former students' success and movement through their career and to review their comments regarding preparedness for their careers. These comments then feed into the overall quality and relevance of the content of their degree programmes.

2.7. Output(s):

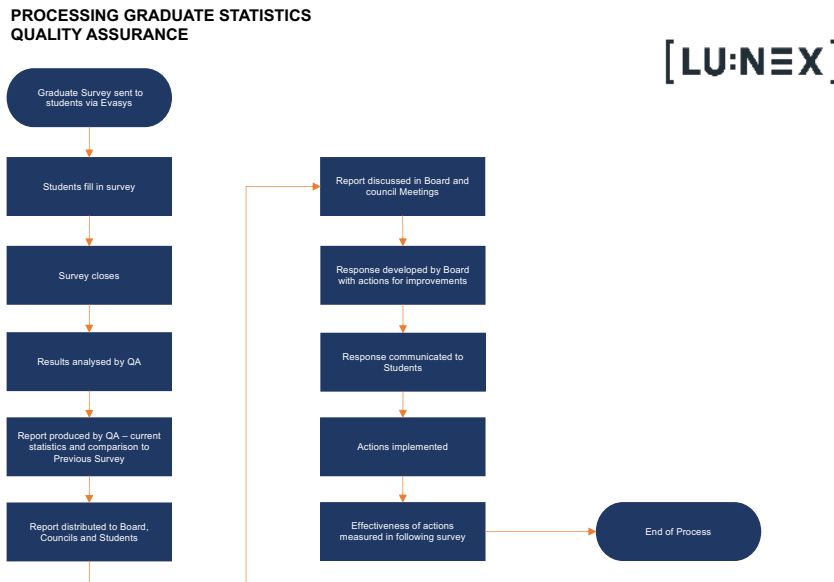
These statistics are discussed by the Board and the other relevant bodies to recommend changes in content quality and relevance, and therefore the overall quality of the educational offering of LUNEX. The data is also used to report on where our graduates are now in the world and in their careers for informational purposes for all students (former and current), their parents and the general public.

2.8. Responsibilities:

Quality Assurance: Collection of statistics via survey and assurance of process, publication of final report

Organisational Bodies: discussion, development, and implementation of remediation measures

2.9. Flow Chart:



[LU:NEX]

Abbreviations:
QA – Quality Assurance
14-0218-16.11.2020

3. Student Satisfaction

3.1. Description:

The student satisfaction survey asks the students how they find and feel about the non-academic aspects of student life e.g., student services, the campus environment, extracurricular activities, and the student community and student wellbeing.

3.2. Frequency:

This survey is conducted once a year.

3.3. Provided by:

Quality Assurance collects data via online survey managed by the application, Evasys.

3.4. Provided to:

A summary report is provided to the Board by email. The summary report and response to the students from the Board is made available to the student body via the documents portal on the student management system, eHVP. The students are notified of the reports via email.

3.5. Form(at) provided in:

The full report is generated from Evasys, summarized and reformatted and then emailed to the Board.

3.6. Purpose:

The purpose of this report is to gauge student wellbeing, and the quality and relevance of the non-academic parts of student life.

3.7. Output(s):

Once this information is analysed, the institution uses it to improve the quality and relevance of the non-academic support, facilities, and administrative and technical services available to students.

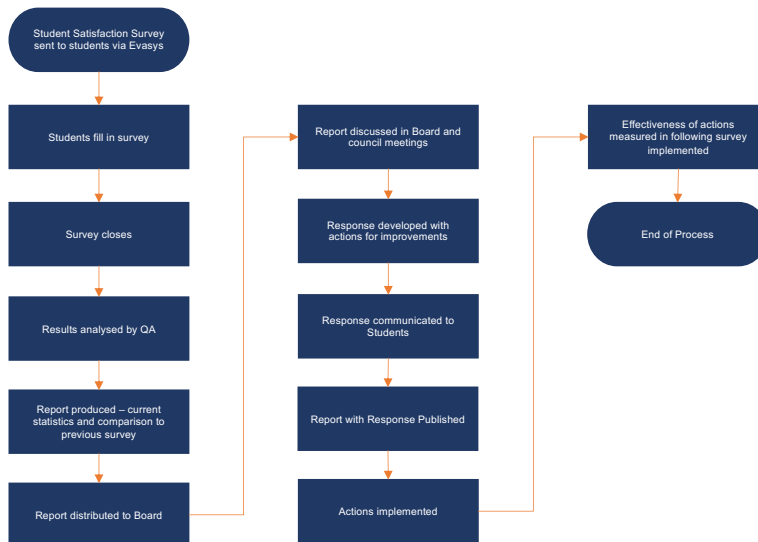
3.8. Responsibilities:

Quality Assurance: Collection of statistics via survey and assurance of process, publication of final report

Organisational Bodies: discussion, development and implementation of remediation measures.

PROCESSING STUDENT SATISFACTION SURVEY RESULTS QUALITY ASSURANCE

[LU:NEX]



Abbreviations:
QA – Quality Assurance
14-0221-16.11.2020

4. Physiotherapy Clinical Internship Survey(s)

4.1. Description:

The internship satisfaction survey asks the students how they found the internship organisation and environment, and how they found the quality of mentorship and learning during their internship. In physiotherapy, the internship satisfaction survey compliments the practical competency assessments (mid-term and end of term) of the student by the internship institution.

4.2. Frequency:

This survey is conducted by each student per internship placement.

4.3. Provided by:

The internship management application, Sonia, distributes these surveys to students and collects the data within the application.

4.4. Provided to:

The results of these surveys are reviewed directly by the academic staff responsible for the internships and the head of department.

4.5. Form(at) provided in:

The surveys are in the format of the Sonia application interface.

4.6. Purpose:

The purpose of this survey is to ensure that the internship institutions provide the required standard of education and welfare for the students undertaking their internships in them.

4.7. Output(s):

The output of this process is to identify issues and implement the necessary changes through discussions between the head of departments and the internship organisations. This process, together with the academic report the student is required to submit after each internship, provides a thorough (all round) assessment of the quality of the internship experience and that the required standards of pedagogy have been met.

4.8. Responsibilities:

Placements Office: distribution and collection of the responses of the survey to the student via the Sonia application (PT)

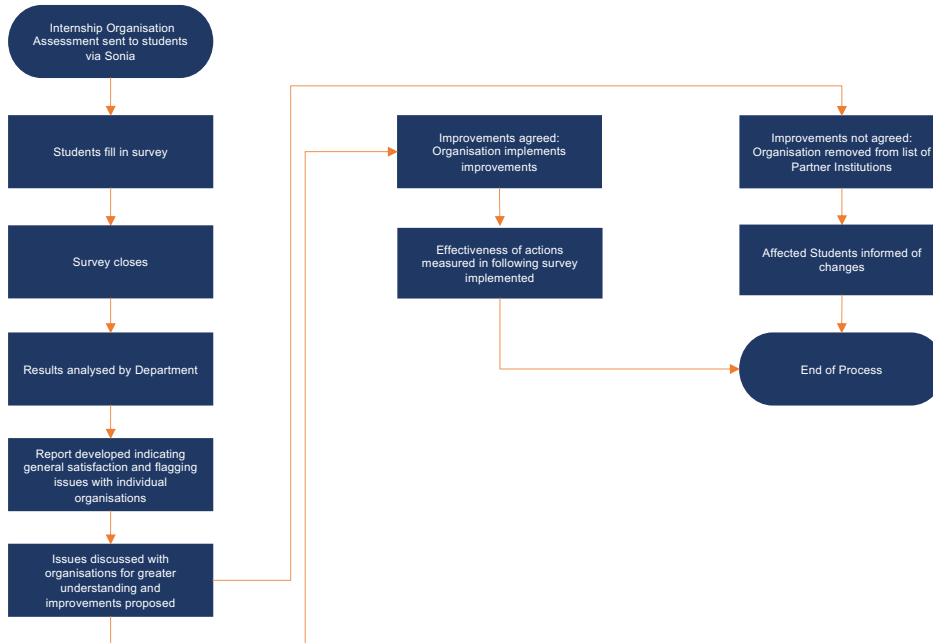
Departments: discussion, development and implementation of remediation measures

Quality Assurance: Assurance of process.

4.9. Flow Chart:

PROCESSING STUDENT SATISFACTION WITH INTERNSHIP ORGANISATION DEPARTMENTS

[LU:NEX]



Abbreviations:

Sonia – Internship Management Software
14-0217-16.11.2020

5. Module Surveys

5.1. Description:

The module surveys ask the students for their comments on how they found the standard of teaching and the environment of the modules they attended.

5.2. Frequency:

A module survey is conducted after each module.

5.3. Provided by:

The module surveys are generated and distributed from within the Evasys application, managed by Quality Assurance.

5.4. Provided to:

Once closed, a report is generated for each module and sent to the module co-ordinator. The module co-ordinator distributes it to the individual lecturers who participated in the module. The module co-ordinator produces short feedback summary for the students who took the module. At the end of the semester, collated reports are created for each departmental head (e.g., per module, or per lecturer, as requested).

5.5. Form(at) provided in:

The report formats are typically produced in the format provided from within Evasys. The student feedback is provided using a template form created for that purpose.

5.6. Purpose:

The purpose of the module surveys is to assess the quality of the teaching, the content, and the environment the module is taught in.

5.7. Output(s):

The output of the process is the identification of shortfalls in any of the above-mentioned aspects of the module and to find and implement improvements. The frequency of the module evaluations enables the identification of immediate or acute issues that can be addressed in a much shorter time than the eventual semester-based reports for the heads of departments and programme managers.

5.8. Responsibilities:

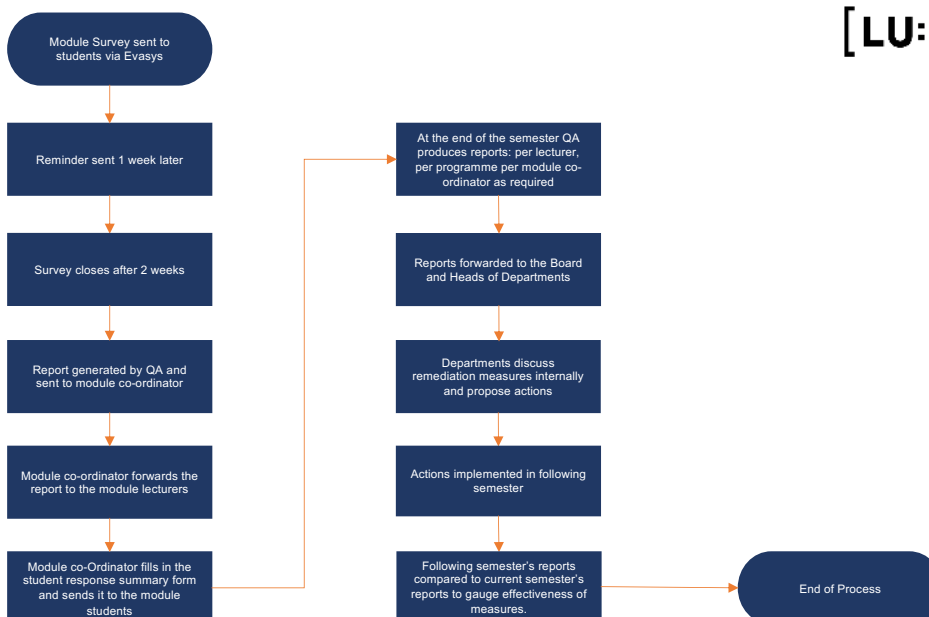
Quality Manager: distribution of module surveys and collection of the results. Report generation and distribution to module co-ordinators, Assurance of process

Module co-ordinators: distribution of report to module lecturers and feedback to students

Heads of departments, PLC: discussion and agreement of remediation actions

5.9. Flow Chart:

PROCESSING MODULE SURVEYS QUALITY ASSURANCE



[LU:NEX]

Abbreviations:
QA – Quality Assurance
14-0216-16.11.2020

6. Programme Reviews

6.1. Description:

A Programme Review considers three components or reports and uses them to assess the quality and efficacy of the programme. These components are the Programme Review form, the Module Monitoring Report and the end of semester, collated reports derived from the module surveys.

6.2. Frequency:

The programme review takes place annually in an extraordinary sitting of the Programme Leader Committee.

6.3. Provided by:

The collated module survey reports are provided by Quality Assurance, the Module monitoring reports are provided by the Module co-ordinators, and the completed Program Review form is provided by the Programme Leaders.

6.4. Provided to:

The completed programme review is submitted to the Teaching and Learning Council for discussion. Recommendations from this discussion are submitted to the Board for review and the heads of department for information.

6.5. Format provided in:

The component reports are provided in the form of Evasys (collated reports) and completed form templates (Programme review form and Module monitoring reports). The report submitted to the TLC is a digital document which once finalized is saved in PDF format and signed.

6.6. Purpose:

The Programme Reviews assess the quality and efficacy of the programmes as a whole.

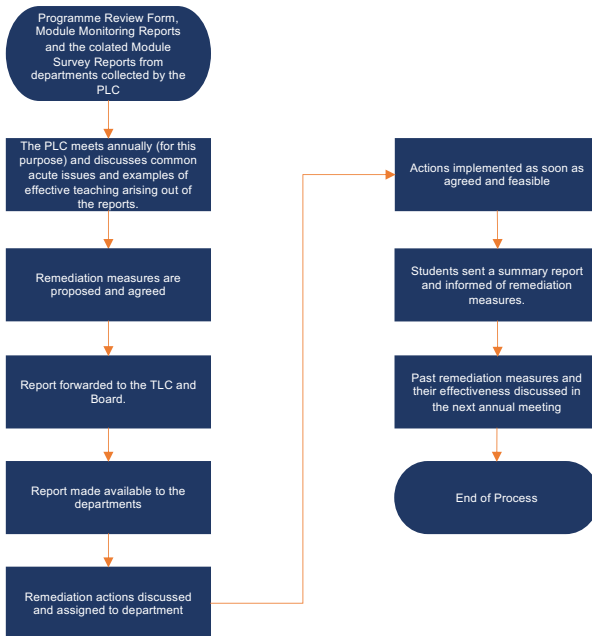
6.7. Output(s):

The outputs of the Programme Review are to identify shortcomings in programmes and to recommend and plan remediations.

6.8. Flow Chart:

PROCESSING PROGRAMME REVIEWS PROGRAMME LEADER COMMITTEE, TEACHING and LEARNING COUNCIL

[LU:NEX]



14-0215-16.11.2020

7. Student Staff Interactions

The LUNEX Students Union (LSU) facilitates the election of at least one student representative in each cohort. Out of these, student representatives dedicated to academic issues have active representation in LUNEX councils and committees (bodies) such as the Teaching and Learning Council, The Programme Leader Committee, the Research Council, or the Senate.

The information is provided in the policy “Opportunities for Student Representation on Councils” which is available for all staff and students.

8. Staff Student Consultations

8.1. Description:

Staff Student Consultations take the form of a dialogue between the head of department (and lecturers of the department) and the student cohort representatives. The meetings are informal and issues and their possible remediations are discussed and agreed between the department and the student representatives considering constraints such as regulations, time frames and resources.

8.2. Frequency:

Staff and student consultations occur at least once a semester.

8.3. Purpose:

The purpose of the staff student consultations is to foster, in a non-intimidating setting, a collaborative spirit in the progress and improvement of academic quality, and to increase student involvement in the process. Another purpose is to improve communication between staff and students and to foster a sense of responsibility in the students for their education. A further purpose is to gather feedback that is outside the questions asked in other surveys.

8.4. Output(s):

The output of this process is to achieve a more complete set of feedback and facilitate a good working relationship and communication between students and staff.

9. External Assessments

9.1. Description:

External assessments refer to audits or assessments by agencies during the process of programme accreditation or reaccreditation.

9.2. Frequency:

Audits are conducted annually, and agency visits occur when a programme is due for reaccreditation, typically every 5 years.

9.3. Provided by:

Audits are conducted by CRF AG. Accreditation assessments are initiated by the Luxembourg Ministry for Research and Higher Education.

9.4. Provided to:

The accreditation report is initially submitted to the Ministry of Research and Higher Education, who in turn submits a report to LUNEX. The annual audit report is provided to the Quality Manager, who manages the implementation of the conditions, measures, and recommendations for achieving compliance.

9.5. Form(at) provided in:

Digital document or paper format.

9.6. Purpose:

The purpose of the audit is to identify aspects of processes or standards (e.g., non-academic, facilities, administrative) that do not meet the required levels and to provide recommendations for improvement. The purpose of the accreditation process is to assess whether LUNEX has the competency and capacity to conduct its academic commitments and to accredit a programme with or without conditions.

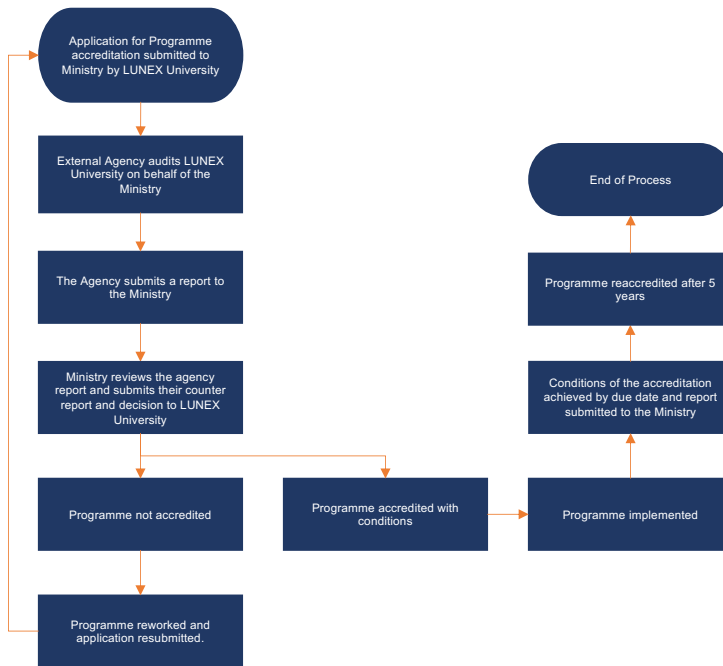
9.7. Output(s):

Teaching quality and operational/ support processes that meet the quality standards for the degree programmes taught.

9.8. Flow Chart:

EXTERNAL REVIEWS ACCREDITATION AGENCY

[LU:NEX]



14-0214-16.11.2020

10. Collation of data from all surveys

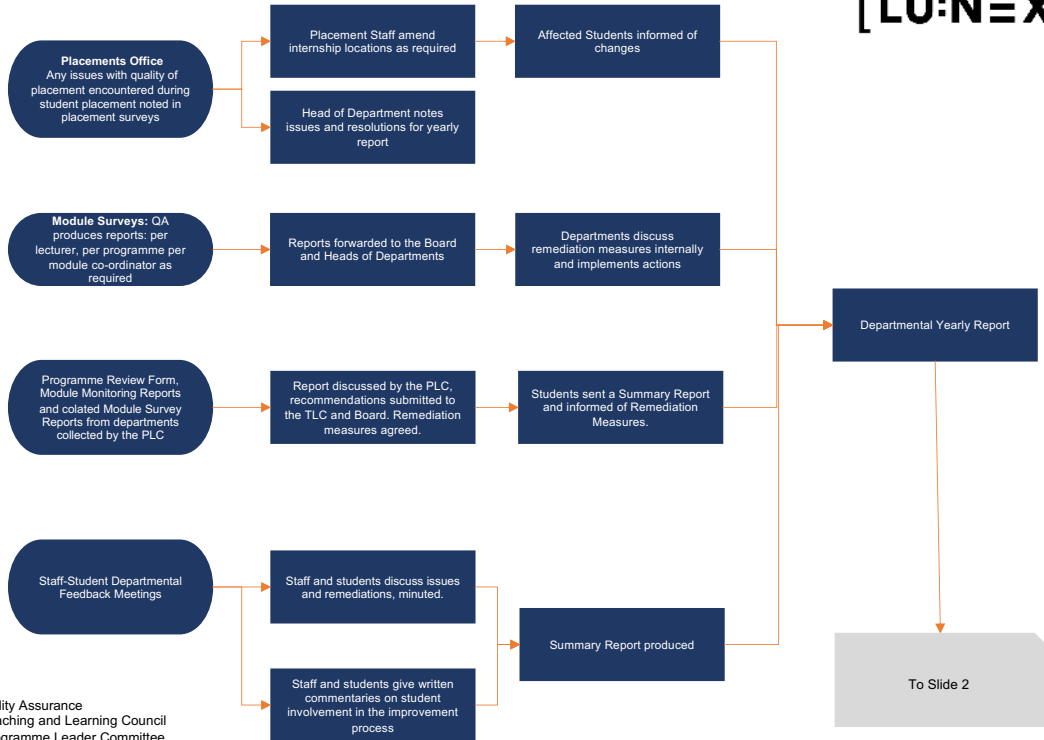
These surveys are intended to give LUNEX (staff and students) a thorough indication of the quality of its education, environment, and facilities. The information feeds into two processes:

- 10.1. Internal feedback to staff, students and other stakeholders on student happiness, satisfaction, and how they value their time and education at LUNEX, during their studies and retrospectively after they graduate and move on into working life.
- 10.2. Notification of areas where improvement or change is necessary which is incorporated into the development plans for the departments thereby feeding into the commitment to continuous improvement of quality.

11. Information flow:

ACADEMIC QUALITY INFORMATION FLOW DEPARTMENTS, COUNCILS, BOARD

[LU:NEX]



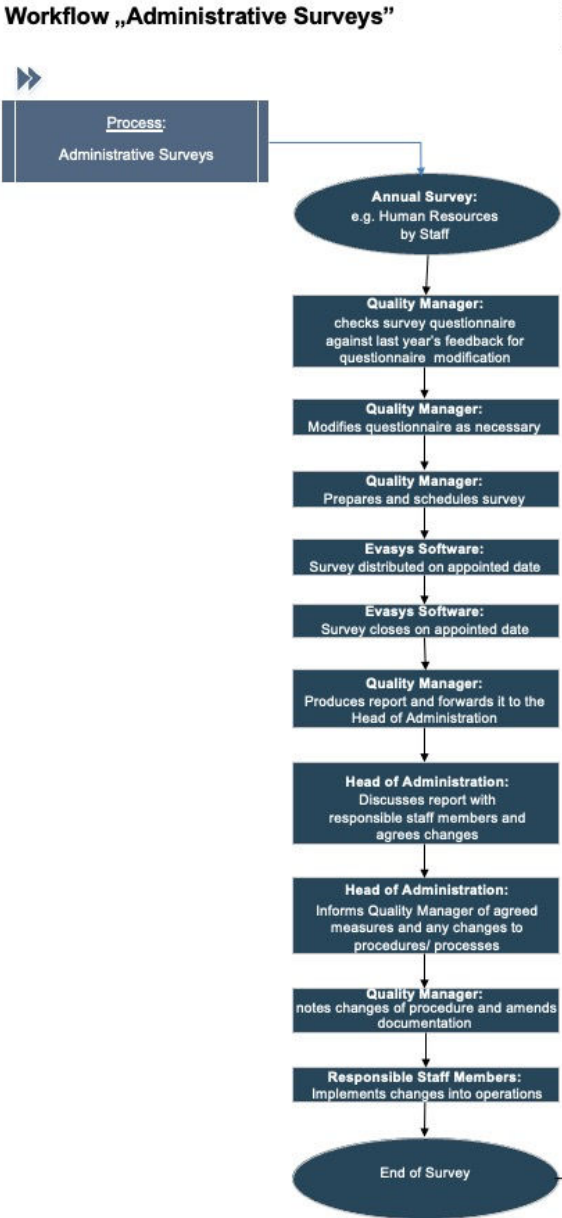
QA: Quality Assurance
TLC: Teaching and Learning Council
PLC: Programme Leader Committee
eHVP: Student Management System

14-0235-03.12.2020

Part 3: Components and Schedule of the LUNEX Administrative Quality Assurance Cycle

Administrative operations and communications are surveyed by (sub)department or area. The surveys are sent out not more than one per month, spread over the year. The feedback is dealt with per department and the improvements implemented as required.

The workflow of the administrative surveys is as follows. The process for each survey is the same, however, the questionnaires and survey recipients differ:



1. Human Resources by Staff

1.1. Description:

The Human Resources by Staff Survey collects feedback on the satisfaction of all staff as to the efficiency, efficacy and quality of support for human resources related questions and issues.

1.2. Frequency:

The survey is conducted annually in September.

1.3. Provided by:

The survey is conducted by the Quality Manager.

1.4. Provided to:

The results of the survey are provided to the Head of Administration.

1.5. Form(at) provided in:

Digital document or paper format.

1.6. Purpose:

The purpose of the survey is to collect feedback that will inform changes and improvements in Human Resources support or operations in the institution.

1.7. Output(s):

Information highlighting deficits and successes in Human Resources operations and communications facilitating improvements that meet the needs of staff.

2. Student Recruitment by Students

2.1. Description:

The Student Recruitment by Students Survey collects feedback on the student recruitment process from new students within the first month of starting their first semester.

2.2. Frequency:

The survey is conducted twice a year in April and October following the semester in-takes of new students.

2.3. Provided by:

The survey is conducted by the Quality Manager.

2.4. Provided to:

The results of the survey are provided to the Head of Administration.

2.5. Form(at) provided in:

Digital document or paper format.

2.6. Purpose:

The purpose of the survey is to collect feedback on the student's experience of the recruitment process. The survey provides, information on the quality of information provision, communications, and process efficiency.

2.7. Output(s):

Information providing insights into the students' experience of the student recruitment process, deficits, and successes, leading to improvements. Improvements are aimed at the efficiency of the student recruitment process, raising recruitment numbers, and raising the quality of students recruited.

3. Exam Office by Staff and Students

3.1. Description:

The Exam Office by Staff and Students Survey collects feedback on the satisfaction of staff and students as to the efficiency, efficacy, and quality of the Exam Office.

3.2. Frequency:

The survey is conducted annually in January.

3.3. Provided by:

The survey is conducted by the Quality Manager.

3.4. Provided to:

The results of the survey are provided to the Head of Administration.

3.5. Form(at) provided in:

Digital document or paper format.

3.6. Purpose:

The purpose of the survey is to collect feedback that will inform changes and improvements in the Exam Office, and exam process operations and communications in the institution.

3.7. Output(s):

This survey highlights deficits and successes in communications and operations in and around the Exam Office and the exam process.

4. Quality Assurance by Staff and Students

4.1. Description:

The Quality Assurance Survey by staff and students collects feedback on the satisfaction of staff and students as to the processes, communications, and information provided by the Quality Assurance.

4.2. Frequency:

The survey is conducted annually in February.

4.3. Provided by:

The survey is conducted by the Quality Manager.

4.4. Provided to:

The results of the survey are provided to the Head of Administration.

4.5. Form(at) provided in:

Digital document or paper format.

4.6. Purpose:

The purpose of the survey is to collect feedback that will inform changes and improvements in Quality Assurance communications and operations in the institution.

4.7. Output(s):

Quality Assurance operations and communications that meet the needs of staff, students, and the institution.

5. Marketing by Staff and Students

5.1. Description:

The Marketing by Staff and Students Survey collects feedback on the satisfaction of all staff as to the efficiency, and quality of support for marketing-related questions and issues.

5.2. Frequency:

The survey is conducted annually in March.

5.3. Provided by:

The survey is conducted by the Quality Manager.

5.4. Provided to:

The results of the survey are provided to the Head of Marketing and the Head of Administration.

5.5. Form(at) provided in:

Digital document or paper format.

5.6. Purpose:

The purpose of the survey is to collect feedback that will inform changes and improvements in Marketing support or operations in the institution.

5.7. Output(s):

Information around the quality of marketing operations and communications at the institution.

6. Facilities by Staff and Students

6.1. Description:

The Facilities by Staff and Students Survey collects feedback on the satisfaction of staff and students on the support for and operations around facility-related queries. (The quality of the facilities, in general, is dealt with in a different survey).

6.2. Frequency:

The survey is conducted annually in May.

6.3. Provided by:

The survey is conducted by the Quality Manager.

6.4. Provided to:

The results of the survey are provided to the Head of Administration.

6.5. Form(at) provided in:

Digital document or paper format.

6.6. Purpose:

The purpose of the survey is to collect feedback that will inform changes and improvements in facilities support or operations in the institution.

6.7. Output(s):

Information about the quality of facilities-related operations and communications at the institution.

7. IT and Helpdesk by Staff and Students

7.1. Description:

The IT helpdesk by Staff and Students Survey collects feedback on the satisfaction of staff and students as to the efficiency, efficacy, and quality of support for IT-related questions and issues.

7.2. Frequency:

The survey is conducted annually in June.

7.3. Provided by:

The survey is conducted by the Quality Manager.

7.4. Provided to:

The results of the survey are provided to the Head of Administration.

7.5. Form(at) provided in:

Digital document or paper format.

7.6. Purpose:

The purpose of the survey is to collect feedback that will inform changes and improvements in IT support or operations in the institution.

7.7. Output(s):

Information around the quality of IT support operations and communications.

8. Financial Matters by Staff and Students

8.1. Description:

The Financial Matters by Staff and Students Survey collects feedback on the satisfaction of all staff as to the efficiency, efficacy, and quality of support for Finance-related questions and issues.

8.2. Frequency:

The survey is conducted annually in July.

8.3. Provided by:

The survey is conducted by the Quality Manager.

8.4. Provided to:

The results of the survey are provided to the Head of Administration.

8.5. Form(at) provided in:

Digital document or paper format.

8.6. Purpose:

The purpose of the survey is to collect feedback that will inform changes and improvements in support or operations for questions around financial matters in the institution.

8.7. Output(s):

Information around the quality of support for operations and communications around financial matters.

Part 4: Stakeholder Involvement

This framework aligns with European quality assurance standards and the principles of the European Higher Education Area (EHEA). Stakeholder involvement is a central pillar of quality assurance, enhancing the educational experience for all students.

1.1. Objective

Ensure that all study programs are developed, monitored, and revised with active and meaningful participation from a broad range of stakeholders, thus improving the quality and relevance of education.

1.2. Scope

This framework applies to all stages of program development, from design to alumni feedback.

1.3. Definitions

Stakeholders: Includes students, alumni, employers, industry professionals, academic staff, administrative staff, supervisory bodies, professional and regulatory bodies, and local community representatives.

1.4. Roles and Responsibilities

Board of Directors: ensure the implementation and oversight of this policy.

Academic and Administrative staff Facilitate stakeholder engagement activities and incorporate feedback into decision-making processes.

Stakeholders: Actively participate in engagement activities and provide constructive feedback.

2. Levels of Stakeholder Involvement

2.1. Strategic Level

Refers to the involvement in defining the vision, mission, objectives, and KPIs, strategic alignment of programs with institutional goals.

Stakeholders: Academic and administrative staff, Advisory/Supervisory Board, students.

2.1.1 Modalities of Engagement:

- Scheduled meetings with specific agendas to gather targeted input.
- Surveys and interviews
- Advisory panels and supervisory boards for ongoing advice and insights.
- Use of digital tools such as email, SharePoint, Evasys, social media, Staff portal for information sharing and feedback collection

2.2 Study Programme Level

Refers to effective stakeholder involvement in the design, development, and continuous improvement of the study programmes, such as but not limited to:

- contribution to needs assessments, curriculum development, learning outcomes, and assessment methods.
- input on teaching methods, student support services, and programmes delivery
- participation in regular program reviews and feedback processes.

Stakeholders: Staff, professional bodies, students, alumni, regulatory authorities

2.2.1 Modalities of Engagement:

- Formal consultations through scheduled meetings and meetings with specific agendas to gather targeted input.
- Surveys and questionnaires distributed to capture broad and varied feedback efficiently.
- Advisory panels and boards comprising a mix of stakeholders to offer ongoing advice and insights.
- Use of digital tools such as email, SharePoint, Evasys, social media, Staff portal for information sharing and feedback collection

3 Quality Assurance Monitoring and Evaluation

3.1 Mechanisms for Engagement:

- Regular internal audits to assess the effectiveness and adherence to the framework.
- Indicators: such as stakeholder satisfaction, the impact on program outcomes, and responsiveness to feedback.
- Reports: annual reports detailing stakeholder involvement activities and their impact.

3.2 Reference Documents

- Higher Education Law of 21 July 2023, Annex C and Annex D
- Standards And Guidelines For Quality Assurance In The European Higher Education Area
- Job descriptions and employment contracts
- Boards and Committees statutes and constitutions
- Quality Assurance Framework

4 The Advisory Boards

By engaging in various activities, the Advisory Boards play a crucial role in shaping the strategic direction and enhancing the overall quality and reputation of LUNEX.

4.1 Structure of the Advisory Board Members

- Industry Leaders: Executives from relevant industries who can provide insights into current trends and future directions.
- Academic Experts: Distinguished academics from other institutions who can offer perspectives on educational best practices and research opportunities.
- Alumni: Successful graduates who can share their experiences and help bridge the gap between current students and the professional world.
- Community Leaders: Influential individuals from the local community who can help integrate the LUNEX's activities with community needs and opportunities.

- LUNEX Representatives: Senior leaders from LUNEX, such as Member of Board of Directors, Head of Departments and Program Leaders, who provide internal perspectives and updates.

4.2 Functions of the Advisory Boards

1. Strategic Guidance:

- Offer advice on long-term strategic planning and vision for LUNEX.
- Provide insights into industry trends and future directions that can impact academic programs and research initiatives.

2. Curriculum Development:

- Assist in the development and refinement of academic programs to ensure they meet current industry standards and future needs.
- Help establish partnerships for internships, co-op programs, and job placements for students.

3. Fundraising and Resource Development:

- Support the LUNEX's fundraising efforts by leveraging their networks and influence.
- Advise on strategies to secure funding from various sources, including government grants, private donations, and corporate sponsorships.

4. Community and Industry Engagement:

- Facilitate connections between LUNEX and the business community, government agencies, and non-profit organizations.
- Promote LUNEX's activities and achievements within their networks to enhance its reputation and influence

5. Review and Feedback:

- Provide critical feedback on LUNEX's performance and suggest areas for improvement.
- Review the outcomes of key initiatives and programs to ensure they align with LUNEX's goals.

6. Advocacy and Promotion:

- Act as ambassadors for LUNEX, promoting its mission, programs, and successes to a broader audience.
- Advocate for LUNEX's interests in various forums and help build its public profile.

4.3 Activities of the Advisory Board Meetings

1. Reviewing Progress Reports:

- Assessing updates on ongoing projects, initiatives, and overall performance.

2. Discussing Strategic Issues:

- Addressing major strategic issues, such as expansion plans, new program development, and research focus areas.

3. Providing Feedback:

- Offering constructive feedback on specific proposals, initiatives, or challenges presented by LUNEX's leadership.

4. Networking Opportunities:

- Facilitating networking opportunities for board members with faculty, students, and other stakeholders.

5. Special Presentations:

- Attending presentations by faculty or students on recent research, innovative projects, or significant achievements.

4.4 LUNEX Advisory Board (Institutional Level)

External Members:

- Dr. Pierre Gerckens
- Prof. Dr. Rudi Balling
- Raymond Schadeck
- Marc Niederkorn
- Marc Theisen
- Giulia Amparo Bruni Roccia
- Sven Müller

LUNEX Members:

- Adjunct Prof. Dr. Matthias Afting – Board of Directors
- Prof. Dr. Andreas Mierau – Board of Directors
- Mihaela Bozonca – Head of Administration

4.5 Sports Advisory Board (Department Level)

External Members:

- Ralf Lentz - Comité olympique et sportif luxembourgeois
- Dan Ley - Institut national de l'activité physique et des sports
- Vuk Karanovic - Confédération européenne de volley-ball
- Karen Wauters - Corporate governance & sustainability professional
- Melissa Chase - Miami University
- Alwin de Prins - Luxembourg Institute for High Performance in Sports

LUNEX Members:

- Prof.Dr. Mathieu Winand - Head of Department of Management
- Assoc. Prof. Dr. Fraser Carson - Programme Leader Bachelor in Sport and Exercise Science
- Assoc. Prof. Dr. Thorben Hülsdünker - Programme Leader Master in Sport and Exercise Science
- Sophia Harith – Lecturer in Sport Management
- Prof. Dr. Andreas Mierau – Academic Director

4.6 Health Advisory Board (Department Level)

External Members:

- Patrick Obertin - President of the Association Luxembourgeoise des Kinésithérapeutes (ALK)
- Dr. Patrick Feiereisen - Attaché à la Direction des Soins Centre Hospitalier de Luxembourg (CHL)
- Dr. Frédéric Dierick - Senior researcher , Movement and Posture Analysis Lab at Rehazenter