RIGA AERONAUTICAL INSTITUTE

QUALITY MANAGEMENT SYSTEM

QUALITY MANUAL

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Riga, 2018

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1. GENERAL

1.1. Background

Riga Aeronautical Institute (RAI) is a higher education and research institution, which provides following professional higher education programs and training courses:

- Higher professional education programs;
- Professional Bachelor's Degree programs;
- Professional Master's Degree programs;
- Professional Training Courses.

Study programs implemented by RAI have been positively evaluated by international experts and are officially accredited.

1.2. Mission and values

Mission

RAI mission is to provide efficient and qualitative teaching and research, convened by high level professionals. It enables our customers to increase their level of competitiveness and operating efficiency.

Values

Teaching
The teaching we provide must meet the highest standards of professionalism and integrity.

Personnel
Our team is our main value – teaching in RAI is provided by the first class professionals under the guidance of highly competent management.

Development

We always try to be in the industry forefront – we deliver training which makes our trainees and students competitive in the modern world.

1.3. Guiding principles

Competence

We act as a competence bridge between our customers and the newest technological developments in any of the spheres for which we provide training.

Commitment to our customers

We always analyze the needs of our customers and deliver the training which suits their individual requirements. As a result they are able to decrease their expenses and save their time which would be spent looking for other training suppliers.

International environment

Our customers come from all parts of the globe – we operate in international environment.

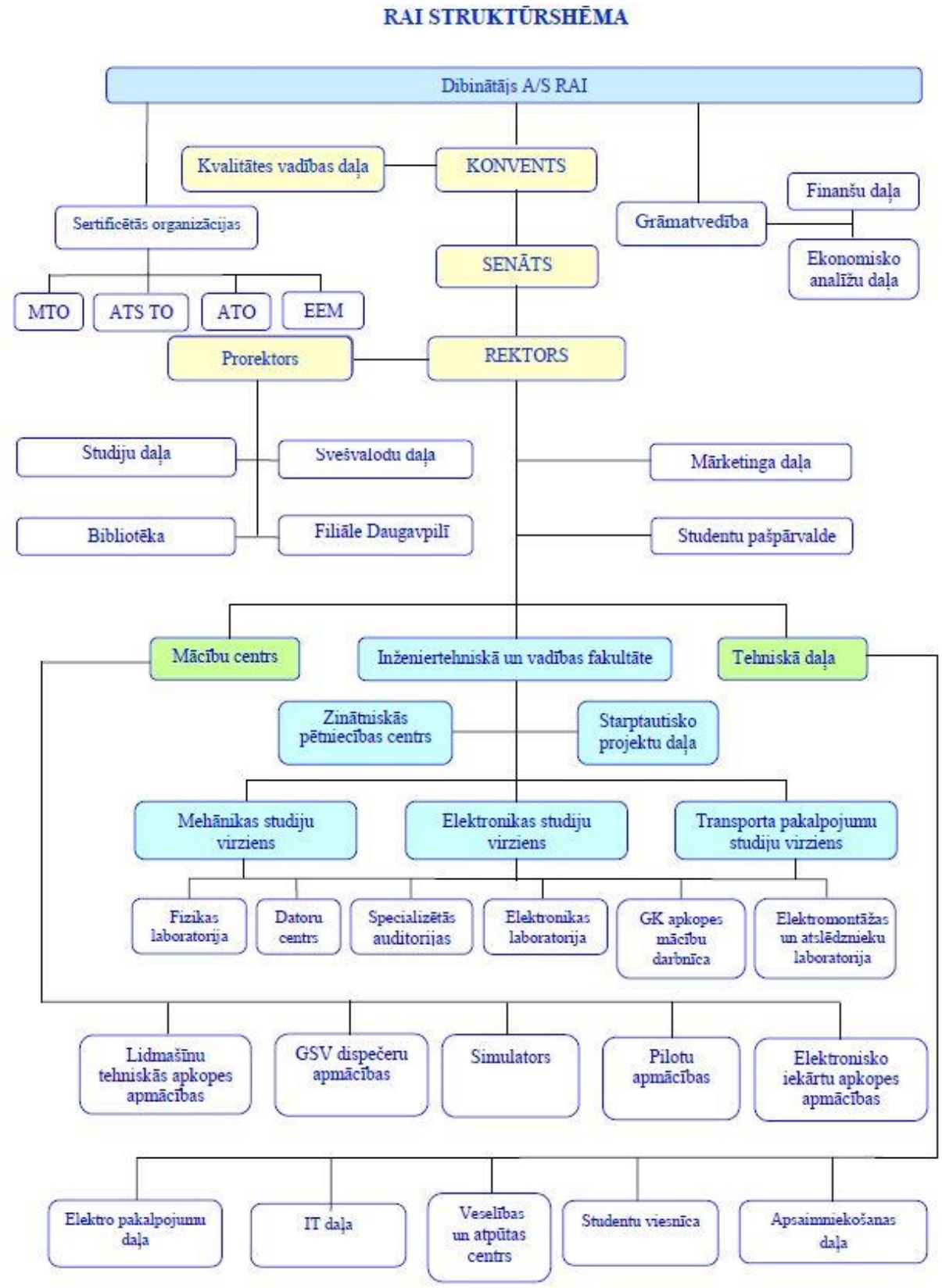
Team

We work as a single team with one aim of providing qualitative training and satisfying our customers. We value the input from all our employees.

Quality

Our Quality System involves all levels of training and management. We constantly improve and upgrade our quality system.

1.4. Organization Structure



1.5. Regulatory Framework

This Quality Manual along with other documents regulating the activities of RAI is based on the requirements of the documents published by EU and the Republic of Latvia.

1.6. RAI Clients

RAI has identified its clients which are students, individual and legal persons applying for the higher education and professional training programs.

2. SCOPE AND CONTENT OF THE QUALITY SYSTEM

2.1. Purpose of Quality System

RAI has established, documented and implemented a Quality System, which it maintains and continually improves by:

- Monitoring RAI's activities
- Detecting deviations from set rules and standards
- Taking the necessary corrective actions
- Ensuring compliance with Authority regulations as well as own and mandatory requirements.

2.2. Scope of Quality System

The Quality Policy statement of RAI is formulated by management of RAI. This policy applies to the following area, which includes all licensed and accredited program according Ministry of Higher Education of Latvia (MHE).

Quality policy is explained, appreciated and available for all personnel involved for providing training (forward – personnel). Quality policy is reviewed one time in the year in the Management evaluation report. Quality policy is appropriated to RAI's objectives and safety standards.

2.3. Quality and Safety Policy Statement

We (RAI) ensure continued compliance with MHE requirements and own requirements and standards.
We regularly assess our employees and our work for improving quality of training in RAI.
We protect and enhance RAI's reputation for excellence in quality education and training.
We find out customer and employee needs, designate optimal solutions for these needs and turn them into actions for improving quality of our training.
We train our students, and we pledge to give them the best and efficient training that we can provide in accordance with safety standards.
We promote participation of all personal in improvement processes of RAI

2.4. Quality Objectives

Quality Objectives are stated by the management of RAI and comply with the quality policy. QO are reviewed ones in a year in the Management evaluation report.
We are committed to the following objectives:

- Find out and analyze the needs of clients and employees
- Obtain 80% level of client satisfaction in the area of training
- Increase the knowledge and skills of all personal
- Constantly strive to increase the effectiveness and efficiency of the organization

2.5. Designated Quality Assurance Posts

Rector and one of President or Vise-President (Chair of Convent)has authority to ensure that all training activities can be financed and carried out to the standards required by the MHE.

Rector and one of President or Vise-President (Chair of Convent):

- Is fully responsible for overall management and performs overall supervision of RAI education and training programs
- Convenes Annual Quality Meeting where the Management Evaluation is performed
- Signs Management Evaluation report
- Assures all necessary financial, material and human resources for RAI functioning

Quality Manager

The primary role of the Quality Manager is to verify, by monitoring activities in the field of training, that the standards required by the MHE and any additional requirements as established by RAI, are being carried out properly under the supervision of the Vice-Rector (VR).

The Quality Manager shall:

- Verify that all standards and rules are being complied with,
- Ensure that the Quality Assurance Program, detailed in this document, is properly implemented, maintained and reviewed,
- Plans the required internal audits and monitoring activities
- Conduct those internal audit for those matters where he/she is appropriately qualified
- Monitors the performance of the required corrective, preventive and follow-up actions
- Implement improvements as necessary when found.

The Quality Manager also shall:

- have direct access to Rector and other members of the top management;
- have access to all parts of RAI.

2.6. Quality Assurance

Quality Assurance Program (QAP) includes all planned actions necessary to provide confidence that all training procedures are conducted in accordance with all applicable requirements, standards and procedures due to improve the quality system of RAI or to ensure compliance with relevant documentation. QAP consists of:

Nr	QA component	When the action is performed	Responsible Person
1	Monitoring of the training services and training processes	• During the Annual Internal Audit • When the group is finishing the course and Course Review is performed • Monthly assessment of training progress	VR and QM in cooperation with program directors
2	Monitoring of actual training sessions	• During the quality inspections	VR, QM
3	Monitoring of training standards	• During the quality inspections	VR, QM
4	Monitoring of the assessment and testing methods	• During the Annual Internal Audit • When the content of training program is changed • When the group is finishing the course and Course Review is performed • When there are new requirements on behalf of the Authorities	VR and QM in cooperation with program directors
5	Monitoring of personnel qualifications and ratings	• During the Annual Internal Audit • When a new instructor/examiner/employee is hired • In case the Instructor/Examiner qualification form expires	Rector, VR, QM
6	Monitoring of training devices/equipment qualification, calibration and functionality	• During the Annual Internal Audit • In case of adding new functionality	VR in cooperation with Technical department

		• In case of purchasing new facilities	
7	Monitoring of technical standards	• During the Quality Inspections	VR, QM, Technical division representative
8	Performance of internal audits	• In accordance with the Audit Schedule (as described below in this paragraph) • After the approval of new versions of OM and QM • In case of introduction of new processes and procedures	Rector, QM, VR
9	Performance of external audits	As indicated by the Authority	External Authority
10	Development, implementation and monitoring of corrective actions	• If and when non-conformances are discovered during the external audit • If and when non-conformances are discovered during an internal audit	Rector, QM, VR
11	Development, implementation and monitoring of preventive actions	• In the process of Course Review Analysis • During the Annual Quality Meetings • During the Customer Satisfaction analysis	Rector, QM, VR

Schedule of monitoring process is made by Quality manager for one year period and covers all audit scope. Audit Schedule is approved by Rector and Chair of Convent. Audit scope is included in Audit Schedule and QM monitors all this scope in a planned period. If there are changes (staff unavailability, organizational changes or other problems) in Audit Schedule during the planned period, which is the reason of impossibility to audit, QM has to record the changes and reasons. Rector and Chair of Convent have to authorize the changes to the Audit Schedule.

2.7. Quality Audits

An audit is a systematic and independent comparison between the way in which training is being conducted and the way in which it should be conducted according to the published training procedures. The quality audits (further in the text – audits) are to ensure that quality assurance program is implemented and the quality system is effective by achieving the defined quality policy and stated objectives as well as ensures continued compliance with MHE regulations and own requirements and standards. Audits are planned and can be unplanned if there is a suspicion of deviations of requirements, standards and procedures. Audits and inspections are conducted by the quality manager. In case there is a necessity, experts could be invited to attend the audits and inspections. Quality manager cannot audit the area in which he is involved therefore the independence of the audit is provided.
Audits should include at least the following quality procedures and processes:

- a description of the scope of the audit, which should be explained to the personnel to be audited;
- planning and preparation;
- gathering and recording evidence; and
- analysis of the evidence.

Audit scope or monitoring subject for Theoretical and Practical training:
- Audit of theoretical & practical training;
- Audit of theoretical & practical examinations.

Audit process consists of following phases:
- Audit planning – Quality Manager due to Audit Schedule informs Vice-Rector at least one week before about audit and submits the Audit plan;
- Preparation – Quality Manager prepares necessary Checklists for the audit;
- On-site audit - This audit phase will be implemented in accordance with the Audit plan. The purpose of this phase is to verify conformance with regulatory requirements and own standards/procedures;
- Gathering and recording evidence - activities including completion of administrative details and production of the Audit report which is a part of the checklist form and Non-conformance forms as well as acceptance of corrective actions;
- Reporting – Quality manager reports about results (findings) of audit to Rector and Chair of Convent and to the person responsible for taking corrective action and records them in the **Corrective action data base;**
- Follow-up audit - verifies full implementation of corrective actions and formal closure of the audit by the recording about closure date in the Non-conformance form and in the Corrective action data base**.** Quality manager evaluates effectiveness of implemented corrective action by making record in the Non-conformance form .Auditee has to inform Quality manager about implementation of corrective action;
- Data saving – all information got during the audit is confidential. The records (Audit plan, Audit report, Non-conformance form) regarding the audit are put in the audit file and are kept in an iron locked cabinet by the QM.

The following techniques can be used during the audit:

- a review of published documents;
- interviews or discussions with personnel;
- the examination of an adequate sample of records;
- the witnessing of the activities which make up the training; and
- preservation of documents and the recording of observations.

2.8. Quality Inspections

The primary purpose of a Quality Inspection is to review a document or observe a particular event or action in order to verify whether established training procedures and requirements are followed during the conduct of the inspection and whether the required standards are achieved. The following spheres are subject to Quality Inspections in as indicated in QA plan in p.2.5:

- Actual training sessions;
- Technical standards
- Training standards

Inspection process consists of the same phases as audit process. If an unplanned audit or inspection takes place, they are organized in the same way as audit process except audit planning phase.

Techniques that can be used in audit/inspection process are the following:

- interviews or discussions with personnel;
- a review of published documents;
- the examination of an adequate sample of records;
- the witnessing of the activities which make up the training;
- the preservation of documents and the recording of observations.

2.9. Findings

Findings are classified into three groups:

- Level 1, represents major Non – conformances;
- Level 2, represents minor Non – conformances;
- Level 3, represents information observation.

Level 1 – any non-conformance with regulations which would lower the training standard and probably affect the safety factors. Corrective action has to be completed within the period of two weeks since non-conformance was disclosed.

Level 2 - any non-conformance with regulations which could lower the training standard and possible the acceptable level of safety. Corrective action has to be completed within the period of two months since non-conformance was disclosed.

Level 3 – an observation which could be a potential risk factor of the non-conformance in the future. No action is necessary regarding this level of finding.

The samples of forms as well as date base used in the process of audit/inspection are shown in the attachments.

2.10. Management Evaluation Report

The Management Evaluation Report is made by QM once in a year and includes the following information:

- Information and results of quality audits and inspections, non-conformances and status of corrective actions;
- Information and results of external audits, non-conformances and status of corrective actions;
- Information about customer satisfaction;
- Review of quality policy;
- Attainment of stated objectives;
- Recommendations for necessary improvements.

Management evaluation report is made one time in the year by Quality Manager and is reviewed in the quality meetings by management of RAI. After the quality meetings QM prepares the Minutes of Meetings and makes necessary changes in the Management Evaluation Report. Minutes of Meetings and documents include all the decisions made during the quality meetings.

2.11. Annual Planning

During the Annual Quality Meeting the participants of the meeting together with the Rector and Chair of Convent discuss the prospects for the coming year and the results for the previous year. As a result of a joint discussion:

- Existing long-term objectives are reviewed and new long-term objectives are elaborated;
- Short-term objectives are elaborated (1 year period).

2.12. Customer Satisfaction and Processing of Customer Claims

Customer satisfaction analysis is performed on a regular basis after finalizing the appropriate course. The results are processed by the Vice-Rector and reported to Rector and Chair of Convent. After that the decision on remedial actions to be performed is taken and the responsible person designated.

2.13. Transparency and Feedback

Quality procedures elaborated by RAI are to be known and understood by the personnel. That is why the following actions are performed:

1. When a quality manual is elaborated, a new procedure is elaborated or a revision is made, the information is sent by e-mail to each stakeholder in the quality system
2. Once in a year Vice-Rector and Quality Manager are convening special training sessions on the basic quality procedures, requirements and documentation. This training can be performed both for the group and individual participants.

Stakeholders are encouraged to present their offers and ideas about eliminating the shortcomings and improvement of the system.

2.14. Preventive Actions

The objective of the preventive action process shall be to ensure that a process is utilized to identify and systematically resolve potential problems. The results of the corrective action process shall be to reduce internal operating costs, eliminate potential problems, improve product quality and improve the overall effectiveness of the quality management system. This procedure applies to all processes and products of RAI.

The identification of a potential nonconformance may come from any number of sources. By way of example, but not all inclusive:

- Customer representatives
- Students
- RAI personnel
- Internal and External Audits
- Expert input

As a next step appropriate management personnel are notified of the potential nonconformance. QM and other assigned personnel gather data and interview appropriate personnel in order to gather pertinent information that will lead to a complete understanding of the potential nonconformance. Management personnel will evaluate the need for preventive action when potential root cause is determined. If the root cause assumption is correct, a preventive action plan is developed. QM and/or appropriate management personnel shall implement the preventive action plan. Process will be monitored to determine if preventive action plan has eliminated the potential source of the anticipated nonconformance. Preventive actions shall be reviewed at the management review meeting.

2.15. RAI continuous improvement process

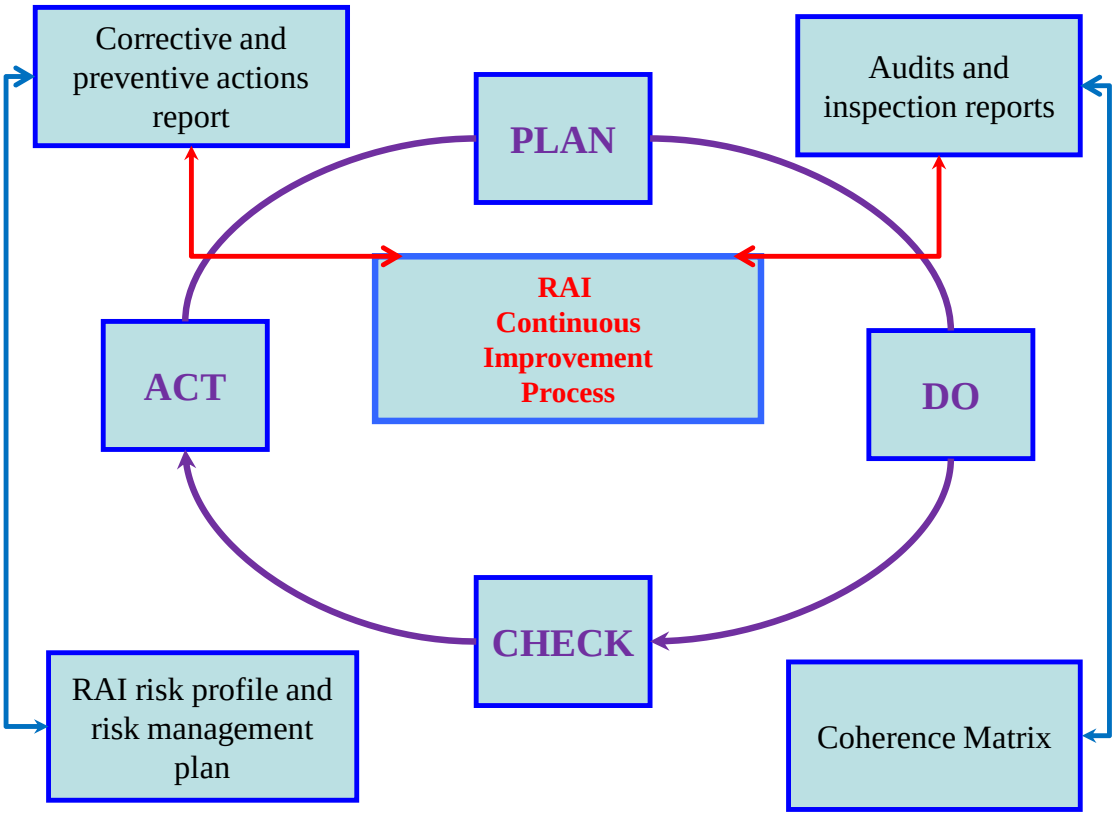
RAI improvement process is based on the classical “Quality Loop” and includes the following steps:

Plan: The plan for the implementation of the necessary change or improvements made, indicating the people to be affected by the change, quality measures to mitigate the risk, desired outcome and intended consequences

Do: Acceptance and understanding of all affected groups followed by change or improvement implementation

Check: QM throughout the implementation phase monitors the possible deviations, identifies them and monitors the implementation of the corrective actions

Act: Analysis of the results, followed by a new quality loop if necessary.



3. RAI QUALITY DOCUMENTATION

3.1. List of Quality Documentation

Nr	Code	Document Title
1	A1	Annual Internal Audit Checklist
2	A2	Quality monitoring / Audit/Inspection schedule
3	A3	Audit/Inspection Plan
4	A4	Audit Non-Conformance Form
5	A5	Corrective Action Data Base
6	A6	Annual Management Report
7	A7	Customer's satisfaction Information
8	A8	Customer Claim Register
9	A9	Outgoing Documentation Register
10	A10	Incoming Documentation Register
11	A11	Archive Record

Quality documentation forms are present in the Annex 1 to this Manual.

4. TERMINOLOGY

Audit - a systematic and independent comparison of the way in which a training being conducted against the way in which the published training procedures say it should be conducted as well as to determine whether quality activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve objectives.

Quality inspection – observe a particular event/action/document etc., in order to verify whether established training procedures and requirements are followed during accomplishment of that event and whether the required standard is achieved.

Audit scope - the number of functional areas, and specialty areas therein, that will be audited/ inspected.

Auditee - the organization (document holder, process etc.) to be audited.

Finding - a conformance or non-conformance to the requirements or own approved procedures.

Non-conformance - the failure to meet requirements or approved procedures.

Observation – potential non-conformances.

5. ANNEX 1 TO QUALITY MANUAL QUALITY DOCUMENTATION

Form A1

Annual Internal Audit Checklist

Audit date:

Nr.	Subject	Compliance	Remarks
1.	Does the organization have the infrastructure to deliver the training?	**Yes** / No	
1.1.	*Lecture Rooms*	**Yes** / No	-
1.2.	*HT Office*	**Yes** / No	
1.3.	*Instructors' Room*	**Yes** / No	
1.4.	*Instructional Equipment*	**Yes** / No	
1.5.	*Student Lounge*	**Yes** / No	
1.6.	*Lavatories*	**Yes** / No	
1.7.	*Admin Office*	**Yes** / No	
1.8.	*Do the lecture rooms have:* *Adequate heating and ventilation* *Protection from noise* *Adequate equipment*	**Yes** / No	
2.	Does the organization have the personnel with necessary qualifications to deliver the course?	**Yes** / No	
2.1.	*Lecturers*	**Yes** / No	
2.2.	*Theoretical Training Instructors*	**Yes** / No	
2.3.	*Practical Training Instructors*	**Yes** / No	
2.4.	*Examiners*	**Yes** / No	

3.	Is the training process properly organized?	**Yes** / No	
3.1.	*Conduct of theoretical training*	**Yes** / No	
3.2.	*Conduct of practical training*	**Yes** / No	
3.3.	*Records of training carried out*	**Yes** / No	
3.4.	*Program material records*	**Yes** / No	
3.5.	*Storage of training records*	**Yes** / No	
5.	Are the tests and exams properly organized?	**Yes** / No	
5.1.	*Conduct of tests and examinations*	**Yes** / No	
5.2.	*Security of the examination materials*	**Yes** / No	
5.3.	*Records of examinations carried out*	**Yes** / No	
5.4.	*Candidate's right to appeal after the examinations*	**Yes** / No	
5.5.	*Storage of examination records*	**Yes** / No	
5.6.	*Conduct of tests and examinations*	**Yes** / No	
6.	Quality Policy	**Yes** / No	
6.1.	Is the Quality policy applicable?	**Yes** / No	
6.2.	Is the Quality policy available and explained to the staff?	**Yes** / No	
6.3.	Is there a procedure for customer satisfaction in the QM or OM?	**Yes** / No	
6.4.	Have the Customer Satisfaction Standards been correctly monitored and remedial action taken where necessary?	**Yes** / No	
7.	Business processes		
7.1.	Elaboration/Update of the Program Material	Satisfactory/ **Unsatisfactory**	
7.2.	Conduct of Examinations	Satisfactory/**Unsatisfactory**	
7.3.	Training Records Storage	Satisfactory/**Unsatisfactory**	
7.4.	Examination Records Storage	Satisfactory/**Unsatisfactory**	

7.5.	Elaboration/Update/Approval of Examination Questions	Satisfactory/**Unsatisfactory**	
7.6.	Provision of Security for Examination Materials	Satisfactory/**Unsatisfactory**	
7.7.	Analysis and Record of Examinations	Satisfactory/**Unsatisfactory**	
7.8.	Storage of Examinations	Satisfactory/**Unsatisfactory**	
7.9.	Appeal after Examination Failure	Satisfactory/**Unsatisfactory**	
7.10.	Qualification of Lecturers/Instructors	Satisfactory/**Unsatisfactory**	
7.11.	Qualification of Examiners/Assessors	Satisfactory/**Unsatisfactory**	
7.12.	Qualification of Temporary and Part-Time Lecturers/ Instructors	Satisfactory/**Unsatisfactory**	
7.13.	Professional Development of Lecturers/Instructors/Examiners/Assessors	Satisfactory/**Unsatisfactory**	
7.14.	Equipment Fault Reporting	Satisfactory/**Unsatisfactory**	
7.15.	Equipment Repair	Satisfactory/**Unsatisfactory**	
7.16.	Processing of Incoming Correspondence	Satisfactory/**Unsatisfactory**	
7.17.	Processing of Outgoing Correspondence	Satisfactory/**Unsatisfactory**	
7.18.	Elaboration of Documents and Approval before Issue	Satisfactory/**Unsatisfactory**	
7.19.	Archivation of Documents	Satisfactory/**Unsatisfactory**	
7.20.	Registration/Storage/Archivation of Protocols	Satisfactory/**Unsatisfactory**	
7.21.	External Regulative Documentation Management	Satisfactory/**Unsatisfactory**	
7.22.	Library Documentation Registration and Identification	Satisfactory/**Unsatisfactory**	
7.23.	Library Documentation Archivation	Satisfactory/**Unsatisfactory**	
	Name of Auditor:	Date:	Position: Quality Manager
	Audit Report Signed: _____		

Form A2

Quality monitoring / Audit/Inspection schedule

QUALITY MONITORING / AUDIT SCHEDULE												
Year _____												
Abbreviations: A – Audit; I – Inspection; N/A – Not Applicable												
Audit scope/ Monitoring subject	**Jan.**	**Feb.**	**Mar**	**Apr**	**May**	**Jun.**	**Jul.**	**Aug**	**Sep.**	**Oct.**	**Nov**	**Dec.**

Form A3

Audit/Inspection Plan

Planned dates:

Audit Scope			
Number	**Audit/inspection item**	**Responsible Persons**	**Time and Venue**

Signed by:

Quality Manager

Form A4

Audit Non-Conformance Form

Non-Conformance Form	
Department	
Date	
Identification number	
Non-Conformance	
Corrective Action	
Person responsible for implementation	
Signature of responsible person	
Closing date	
Signed by Quality Manager:	

Form A5

Corrective Action Data Base

Number	Date	Non-conformance	Level of Non-conformance	Corrective action	Responsible for implementation	Closure date

Form A6

Annual Management Report

Date:

Nr.	Report Item	Information
1.	Information and results of quality audits and inspections, non-conformances and status of corrective actions	
2.	Information and results of external audits, non-conformances and status of corrective actions	
3.	Information about customer satisfaction	
4.	Training in progress	
5.	Training output standards	
6.	Instructional standards	
7.	Instructional standardization	
8.	Review of quality policy	
9.	Attainment of stated objectives	
10.	Recommendations for necessary improvements	

Signed:

Quality Manager

Annual Quality Meeting
Date:
Participants:
Subjects for discussion:
Decisions made:

Signed by:

Form A7

Customer's satisfaction Information LV

Aptaujas dalībniek!

Studiju programmas vadību un mācībspēkus interesē, kā Jūs novērtējiet studijus aturu, kvalitāti un organizāciju, un tādēļ lūdzam atbildēt uz aptaujas jautājumiem, paužot savu viedokli par studiju procesu.
Jūsu vērtējums – pēc 10 ballu sistēmas Atzīmējiet attiecīgo rūtiņu

Vai pavadītie studiju gadi sekmējuši Jūsu ieinteresētību mācīties, apgūt jaunas zināšanas?

1	2	3	4	5	6	7	8	9	10

Kā vērtējat studiju vidi?

☐ Labas attiecības un sadarbība ar mācībspēkiem

☐ attiecības un sadarbība jāuzlabo

☐ Nepietiekami labas attiecības

Ieteikumi attiecību un sadarbības ar mācībspēkiem uzlabošanai

_____

Kā Jūs novērtējiet studiju programmu kopumā?

☐ Priekšmetu sadalījums mani apmierina

☐ Jāpalielina praktisko nodarbību īpatsvars

☐ Jāpalielina speciālo priekšmetu īpatsvars

Paldies par atbildēm

EN

Dear student!

The managers of the training course and the instructors are interested in your evaluation of the content, quality and organization of training. Taking into account the above said, we kindly ask you to fill in this questionnare thus presenting your view point in respect of the training course.
The evaluation is made according to 10 point system. Please, check the appropriate box.

Did the study years stimulate your interest to learn and acquire new knowledge?

1	2	3	4	5	6	7	8	9	10

How would you evaluate the cooperation and relationships between the students and instructors?

☐ Good relationships and cooperation with instructors

☐ It is necessary to improve the relationships and cooperation

☐ Not sufficiently good relationships

Recommendations for improving relationship and cooperation with instructors

_____

How would you evaluate the training/education program in general?

☐ I am satisfied with the distribution of subjects

☐ It is necessary to increase the amount of practical training

☐ It is necessary to increase the amount of training in special subjects

We thank you for your answers

Form A8

Customer Claim Register

Nr.	Description of the claim	Date of claim receipt	Claim originator	Remedial actions required	Remedial actions performed (date)	Results accepted (VR) signature)	Answer to customer (date, signature by VR)

Form A9

Outgoing Documentation Register

Nr.	Originator	Date	Addressee	Number of pages	Content	Date of dispatch

Form A10

Incoming Documentation Register

Nr.	Originator	Date	Addressee	Number of pages	Content	Actions to be taken	Result

Form A11

Archive Record

Date of archiving:

Submitted documents:

Nr.	Type of documents	Number of documents
	Training records, group	
1.		
2.		
3.		
4.		

Transferred:

_____

Accepted:

_____