



The institutional accreditation process of Ferenc Rákóczi II Transcarpathian Hungarian College of Higher Education

Resolution no. 2022/4/VI/1. of the MAB Board

As a result of the institutional accreditation process, MAB accredits the Ferenc Rákóczi II Transcarpathian Hungarian College of Higher Education; the accreditation of the college - provided that it continues to meet the accreditation criteria - is valid until **22 April 2027**, with an interim monitoring procedure to be conducted in autumn 2024. With regard to the recommendations made in the report, MAB requests written information from the institution by 1 March 2024.

Justification of the Site-visit Team's report

The internal quality assurance system of the Ferenc Rákóczi II Transcarpathian Hungarian College of Higher Education does not fully comply with the ESG 2015 standards in all its elements. By implementing the recommendations for improvement of this accreditation report, the internal quality assurance system will become complete, and the institution will be able to monitor and assess the quality of its teaching and research activities during the accreditation period, thus contributing to their quality.

The procedures and feedback confirm that the institution has taken significant steps towards PDCA-based operation in the past period, but it is also evident that there are differences in the scope and emphasis of the application of the individual elements. In general, the planning element is strong at all levels of the organisation, but the procedures for follow-up and control and the range of documents produced by each procedure are not clearly identified. Decision-making and impact assessment regarding interventions, measures and modifications deemed necessary based on evaluations (PDCA cycle) are not regulated and documented.

The institution collects information from all relevant areas of its operation to underpin decisions at global and departmental level. However, the institution uses relatively few indicators derived from baseline data e.g. to help measure operational effectiveness or to assess trends over the strategic planning period.

During the site visit, the range of indicators and targets assigned to strategic goals and related quality improvement objectives were not clear, either. It is necessary that the institution consider the possibility of compiling a list of key indicators, including the most important indicators of operation and development results covering the strategic planning period 2021–2025.

Due to the regulation, overlapping responsibilities and competences are also reflected in the way the organisation operates. The subordinate-superior relationships, the persons responsible for and the recipients of the data cannot be clearly identified from the regulations. These overlaps are not clarified by



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the current form of the organogram, either, where the same organisational unit is listed at several points in the hierarchy.

The strengthening of internal professional human resources with an ESG approach is an indispensable prerequisite for the implementation of improvements. To achieve this, the international cooperation presented in the institutional self-assessment report and the experience of institutions which have successfully completed ESG-based institutional accreditation can be of considerable help. The expansion of cooperation in this direction and the mutual learning and exchange of good practices in the field of quality are recommended as a development direction for the institution.

The purpose of the written report and the monitoring process accompanied by a site visit is to monitor whether the institutional measures taken along the lines of the recommendations made by the site-visit team support the development of the internal quality management system and move it in the right direction.

According to the rules of procedure of MAB, accreditation reports adopted by the Board are public and available on the MAB website (www.mab.hu).