External Quality Assurance
Audit Report

Malta ICOM Educational

Carried out between

11th and 18th March 2024

mfhea.mt

Quality education for
confident futures   .

Contents

Abbreviations List

AB	Academic Board
CCP	Clinical Certification Programme
COME	Centre for Osteopathic Medicine Collaboration
CPCM	Council for the Professions Complementary to Medicine
CSC	Curriculum and Standards Committee
CSSEC	Curriculum, Standards and Students Experience Committee
ECTS	European Credit Transfer System
EQA/QA Audit	External Quality Assurance Audit
EQAVET	European Quality Assurance Reference Framework for Vocational Education and Training
ESG	Standards and Guidelines for Quality Assurance in the European Higher Education Area
GDPR	General Data Protection Regulation
ICOM	International College of Osteopathic Medicine
IQA	Internal Quality Assurance
MFHEA	Malta Further and Higher Education Authority
MQF	Malta Qualifications Framework
NCFHE	National Commission for Further and Higher Education
NQAF	National Quality Assurance Framework for Further and Higher Education
QA	Quality Assurance
SAR	Self-Assessment Report
SMT	Senior Management Team
ToR	Terms of Reference

Executive Summary

Institutional Background

Malta ICOM Educational Ltd, established in Malta since January 2019, is a Higher Education Institution previously known as the International College of Osteopathic Medicine (ICOM) based in Milan, Italy. It has offered Osteopathy programmes in association with a UK-based educational entity since 2008 and has graduated over 2,000 students.

As of 2018, Malta ICOM Educational has been focusing on expanding the healthcare programmes it provides. It currently offers five accredited programmes, including Osteopathy, Physiotherapy, Psychology, and Dental Hygiene, catering to more than 850 students for the 2022-23 academic year. However, the Psychology programme is accredited but not yet in operation.

The institution operates from two Teaching Centres in Malta and three Clinical Teaching Centres in Italy. Its main office is on a 3,000 square metre campus in Gzira, Malta, and its administrative office is at a 7,000 square metre site in Milan, Italy. The Milan site also contains substantial training facilities and hosts a student led clinic, with medical supervision. There are plans for further expansion across Europe and internationally.

Malta ICOM Educational's mission is in the health and social care education and research sector, focusing on high-quality undergraduate and postgraduate education, high academic standards, and a supportive learning environment for student development.

By 2028, Malta ICOM Educational envisions becoming a preeminent institution for health and social care education, notably in osteopathy, physiotherapy, and psychology, and becoming the largest European teaching centre for musculoskeletal care.

The strategic plan for 2023-2028 includes programme expansion, quality enhancement in education, collaboration building, research and innovation cultivation, and establishing a multidisciplinary excellence centre. It also aims to increase its international reputation and foster a supportive learning environment.

Overview of the Audit Process

This report is a result of the External Quality Assurance process undertaken by an independent peer review panel. The panel evaluated the documentation submitted by the educational institution and conducted an onsite audit visit. The panel is responsible for reaching conclusions on all Standards. As outlined in the External Quality Audit Manual of Procedures, the Malta Further and Higher Education Authority (MFHEA) sought external expert advice to evaluate the financial capacity of the provider. Through this report, the panel also highlighted areas of good practice which, in its view, make a positive contribution to academic standards and quality of education that are worthy of being emulated and disseminated more widely.

Timeline

The panel received the submission of institutional self-evaluation and additional documentation on 14th November 2023. The MFHEA requested additional information on 12th December 2023, and this was provided by 2nd January 2024. The panel held an induction meeting on 4th January 2024. On 15th February 202, the panel met to undertake a desk-based analysis, including determination of specific terms of reference, aims, objectives and research questions of a particular EQA, and the programme for the audit visit. A scoping visit took place on 19th February 2024 and the audit visit took place between the 11th and 18th March 2024. The site visit was conducted in Malta and Milan.

Summary of the Conclusions Reached by the Peer Review Panel

The panel concluded that two Standards (7 and 11) meet requirements, two Standards (5 and 9) require improvement to meet the Standards, and seven Standards (1, 2, 3, 4, 6, 8 and 10) do not meet the requirements of the Standards.

The panel made 27 mandatory recommendations. Of these, one must be met immediately on publication of this report, eight must be met within 12 months from the date of publication of this report, while four must be met within 6 months, nine must be met within 3 months, and five must be met within 2 months from the date of publication of this report.

The panel also made 16 key recommendations. Of these, four should be met within 12 months from the date of publication of this report, while eight should be met within 6 months, two should be met within 3 months, and two should be met within 2 months from the date of publication of this report.

In addition, the panel made nine other recommendations.

About the External Quality Audit

Aims and Objectives of the EQA

Quality assurance in Malta is underpinned by six principles that determine the remit and function of the National Quality Assurance Framework for Further and Higher Education, and the relationship between internal and external quality assurance to enhance learning outcomes.

i.   The Framework is based on the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and enriched by the European Quality Assurance Reference Framework for Vocational Education and Training (EQAVET) perspective.

ii.   The Framework contributes to a national culture of quality, through:

- increased agency satisfaction and numbers of service users,
- an enhanced international profile and credibility of providers in Malta,
- the promotion of Malta as a regional provider of excellence in further and higher education.

iii.   The Internal Quality Assurance (IQA) is fit for purpose.

iv.   The External Quality Assurance (QA audit) is a tool for both development and accountability. The QA audit shall ensure that the internal quality management system of the provider is:

- fit for purpose according to the provider's courses and service users,
- compliant with Standards and regulations, and contributing to the development of a national quality culture,
- contributing to the fulfilment of the broad goals of Malta's Education Strategy 2014-24,
- implemented with effectiveness, comprehensiveness, and sustainability.

v.   The Quality Improvement Cycle is at the heart of the Framework.

vi.   The integrity and independence of the QA audit process is guaranteed.

The QA audit provides public assurance about the standards of further and higher education programmes and the quality of the learning experience of students. It presents an opportunity for providers to demonstrate that they adhere to the expectations of stakeholders with regard to the programmes of study that they offer and the achievements and capabilities of their students. It also provides a focus for identifying good practices and for the implementation of institutional approaches to the continuous improvement in the quality of educational provision.

The MFHEA has a responsibility to ensure that a comprehensive assessment is conducted for all higher education providers in Malta. The QA audit provides an opportunity to assess the standards and quality of higher education in Malta against the expectations and practices of provision across the European Higher Education Area and internationally.

The QA audit examines how providers manage their own responsibilities for the quality and standards of the programmes they offer. In particular, the following issues are addressed:

- The fitness for purpose and effectiveness of internal quality assurance processes, including an examination of the systems and procedures that have been implemented and the documentation that supports them.
- The compliance with the obligations of licence holders with established regulations and any conditions or restrictions imposed by the MFHEA.
- The governance and financial sustainability of providers, including assurances about the legal status of the provider, the appropriateness of corporate structures, and the competence of staff with senior management responsibilities.

The QA audit benchmarks the QA system and procedures within an institution against 11 Standards:

1. Policy for quality assurance: entities shall have a policy for quality assurance that is made public and forms part of their strategic management.

2. Institutional and financial probity: entities shall ensure that they have appropriate measures and procedures in place to ensure institutional and financial probity.

3. Design and approval of programmes: self-accrediting providers shall have appropriate processes for the design and approval of their programmes of study.

4. Student-centred learning, teaching and assessment: entities shall ensure that programmes are delivered in a way that encourages students to take an active role in the learning process.

5. Student admission, progression, recognition and certification: entities shall consistently apply pre-defined and published regulations covering all phases of the student 'life cycle'.

6. Teaching staff: entities shall assure the competence and effectiveness of their teaching staff.

7. Learning resources and student support: entities shall have appropriate funding for their learning and teaching activities and sufficient learning resources to fully support the students' learning experiences.

8. Information management: entities shall ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

9. Public information: entities shall publish information about their activities which is clear, accurate, objective, up to date and readily accessible.

10. Ongoing monitoring and periodic review of programmes: entities shall implement the 'Quality Cycle' by monitoring and periodically reviewing their programmes to ensure their continuing fitness for purpose.

11. Cyclical external quality assurance: entities should undergo an external quality assurance audit by, or with the approval of, the MFHEA on a cyclical basis, according to the MFHEA guidelines, once every five years.

Peer review panels essentially ask providers the following question about their arrangements for quality management:

'What systems and procedures are in place and what evidence is there that they are working effectively?'

The approach to quality assurance can be encapsulated in a number of key questions which providers should ask themselves about their management of quality.

- What are we trying to do?
- Why are we trying to do it?
- How are we trying to do it?
- Why are we doing it that way?
- Is this the best way of doing it?
- How do we know it works?
- Could it be done better?

Answers to these questions should form the basis of the provider's critical assessment of and response to the self-evaluation questionnaire.

The approach of the QA audit is not simply about checking whether providers adhere to the regulations; it examines how providers are developing their own systems in addressing the expectations of sound management of Educational Standards and the quality of their learning and teaching provision. It does not involve the routine identification and confirmation of criteria – a 'tick-box' approach – but rather a mature and reflective dialogue with providers about the ways in which they discharge their obligations for quality and the identification of existing good practices.

The Peer Review Panel

The peer review panel was composed of:

Chair of Review Panel:	Mr Andy Gibbs
Peer Reviewer:	Ms Veronica Montebello
Student Peer Reviewer:	Ms Tiziana Gatt
QA Managers (MFHEA):	Ms Sibby Xuereb and Ms Bilyana Boshova

Specific Terms of Reference

As defined in the MFHEA Quality Audit Manual of Procedures, the panel was responsible for examining how the institution manages its responsibilities to ensure the provision of the quality and standards of the education they offer. In particular, the following issues were addressed:

1. the fitness for purpose and effectiveness of the Internal Quality Assurance (IQA) processes, including an examination of the systems and procedures that have been implemented, together with the documentation that supports them.

2. the compliance of licensed providers with the established regulations and any conditions or restrictions issued by the MFHEA.

3. the governance and financial sustainability of providers, including assurance about the provider's legal status, the appropriateness of corporate structures and the competence of staff with senior management responsibilities.

These areas have, therefore, been identified as lines of inquiry.

Additionally, the review team decided that, as part of an enhancement-led approach, it would issue recommendations linked to all parts of the operations of the institution. The report therefore distinguishes between:

- Mandatory recommendations (MR) which are crucial to meet a Standard and **shall** be implemented within the timeframes decided by the panel and indicated in this report.

- Key recommendations (KR) which are important to improve a Standard and **should** be implemented expediently by the institution, within the timeframes indicated, to address weaknesses.

- Recommendations (R) for improvement which are merely suggestions based on the panel's analyses and observations; these **could** be implemented by the institution.

Institutional Context

Malta ICOM Educational Ltd, accredited as a Higher Education Institution in Malta in January 2019, was formerly the International College of Osteopathic Medicine (ICOM) with its base in Milan, Italy. It has delivered Osteopathy programmes linked with a UK-registered institution since 2008, with over 2,000 graduates.

Malta ICOM Educational is currently providing the most extensive Osteopathic Education in Europe. Since 2018, it has aimed to increase the availability of its healthcare educational offerings to students across Europe.

For the 2023-24 academic year, the institution offers five accredited programmes, with an enrolment of over 850 students. These programmes cover Osteopathy, Physiotherapy, Psychology, and Dental Hygiene, although the Psychology programme is not yet operational despite its accreditation.

With two Teaching Centres in Malta and three Clinical Teaching Centres in Italy, including a principal office on a 3,000 square metre campus in Gzira, Malta, and an administrative centre and training centre on a 7,000 square metre site in Milan, Italy, the institution is exploring expansion opportunities across Europe and beyond.

The mission of Malta ICOM Educational is centred on health and social care education and research, aiming to provide high-quality education at both undergraduate and postgraduate levels. It strives to merge traditional professional values with contemporary scientific knowledge, creating an environment conducive to students' development.

By 2028, the institution's vision is to be at the forefront of health and social care education, with a focus on individualised care in osteopathy, physiotherapy, and psychology, aspiring to be the most prominent centre for musculoskeletal education in Europe.

Its strategy for 2023-2028 involves expanding educational programmes, elevating educational standards, establishing partnerships, endorsing research, and creating an interdisciplinary centre of excellence, with the aim of improving its global presence and fostering an inclusive educational setting.

Malta ICOM Educational's values guide its interaction with all its stakeholders, including students, patients, practitioners, and partners, which are essential to its functions.

Analysis and Findings of Panel

Standard 1: Policy for Quality Assurance

Policy for quality assurance: entities shall have a policy for quality assurance that is made public and forms part of their strategic management.

Main Findings

As part of the SAR and supporting documentation, the panel was presented with the Malta ICOM Educational Quality Handbook, which suggested that the institution has a formalised and structured quality assurance (QA) policy. The Handbook is available online. During the site visit, the panel reviewed the Malta ICOM Educational Quality Handbook alongside the Self-Assessment Report (SAR), which purported to outline a formalised Quality Assurance (QA) system. On the site visit, the panel wished to test the extent to which this was applied in practice and its fitness for purpose. While a formalised QA policy exists, as per the Malta ICOM Educational Quality Handbook, the accompanying documents did not sufficiently evidence a quality cycle. The policy includes the structure of the QA system but fails to provide clear examples of its application, leading to questions about its efficacy and transparency. Queries about tangible instances of the policy's deployment remained unanswered, casting doubt on the claimed transparency, and questioning the overall effectiveness of the QA strategy. Subsequent analysis exposed discrepancies in both the documentation of the QA policy and its real-world application, with a failure to furnish clear evidence of its operational cycle. This pattern of incomplete disclosure eroded the credibility of the institution's commitment to a transparent QA process.

The policy included information on the organisation of the quality assurance system; however, the supporting and additional information was presented in such a way that made it impossible to easily discern that a quality cycle had been followed. The panel asked on several occasions for examples of where an issue had been identified and addressed, and a solution implemented and evaluated in a systematic way, and the evidence was not forthcoming.

The interrelations among various committees, crucial to governance and oversight, were ambiguous due to the absence of formal records such as minutes from the Senior Management Team (SMT) and various board meetings. The curriculum-related committees did not provide documentation that evidenced their contributions to quality development, raising concerns about the integrity of QA processes. The QA policy indicated that programme self-assessment and development plans are reviewed by the Academic Board and the Management Board, and that the development plan is monitored at subsequent meetings of the Academic Board and the Management Board. The panel requested evidence of this and was provided with, for example, documents related to Osteopathy programme reviews. These were untitled, undated

documents, which contained many action points but lacked detail about attendees and produced no clear plan about how these will be addressed or evaluated, and were not always followed through into the next year's report.

The QA policy indicated that the academic quality of Malta ICOM Educational is monitored and reviewed through various committees with both internal and external input. The structure of the committees within the College is outlined at the beginning of the document. Through the links between the various College committees and sub-committees there is supposedly a continuous line of communication encompassing the various coordinators and management staff. The panel did not find evidence of these links manifesting themselves in any consistent or systematic way. The panel was told that there were no minutes of the SMT meetings. The panel noted mention of a Curriculum, Standards and Student Experience Committee (CSSEC) and a Curriculum and Standards Committee (CSC) and despite requesting minutes of these meetings, could see no evidence that there were regular minuted meetings which contributed to quality development. There were no correctly minuted records of Academic Board meetings available. The panel requested these, and was provided with PowerPoint presentations. Examination Board minutes correctly recorded results, but included no quality plans, despite mentions of students with exams to catch up and other issues. The panel asked for examples of reports from the annual self-assessment process mentioned in the SAR, and amongst other documents, the panel was sent links to three reviews of recruitment/assessment procedures for the French Physiotherapy programme. The unheaded, undated, unsigned programme review BSc (Hons) Physiotherapy 2020-21 did not include an action plan for development nor indications of how student, external examiner, and others' views were considered. Minutes of the Board of Directors meetings provided for years 2022 and 2023 are noted to be strategic boards and appeared to be business development meetings showing little relationship to quality improvement or academic development.

Overall, the information on the annual self-assessment processes lacked detailed reviews and follow-through action plans, as exemplified by the BSc (Hons) Physiotherapy programme documentation. The QA policy does outline mechanisms for stakeholder participation, yet the institution's actual practice does not reflect a system where students and external stakeholders are sufficiently engaged in QA processes.

The panel found that a number of staff had overlapping roles, which often meant that the supervisory and oversight function was unclear or non-existent. For example, one member of staff acted as Vice Principal, Dean, Academic Registrar and Head of Research. The panel noted a lack of clear and effective employment contracts, affecting the formalisation of expectations and responsibilities.

Information gained during interviews left the panel with an impression that the institution operated in programme and language silos with business, rather than academic needs leading the decision-making process. Overall, the institution lacks an effective and representative committee structure, which is pivotal for inclusive decision-making and central to a recognised

academic infrastructure. This in turn impacts upon academic freedom and integrity as business decisions and academic decisions are intertwined and often inseparable.

The panel saw differing strategic aims in the documentation provided and heard differing views during interviews with staff and others as to what the key strategic aims are, and where these arise. There is a clear disconnect between the strategic plan, the QA policy, and the QA plan, indicating a strategic misalignment. While the policy touches on quality initiatives, a more explicit connection between these QA initiatives and the institution's overarching strategic plan wasn't readily apparent. The panel found no clear links between quality assurance goals in the policy to the broader strategic objectives of the institution. The Standard implies a stronger alignment between QA and the broader direction of the institution and there is no indication how quality drives institutional effectiveness.

The QA policy made reference to the relationship between research and learning and teaching, where applicable; procedures for ensuring academic integrity and freedom; procedures for ensuring against academic fraud; procedures for ensuring the integrity, reliability, suitability and continuous availability of the technological infrastructure (including hardware and software); procedures for verifying the identity of all enrolled students; and procedures for ensuring against intolerance of any kind or discrimination against the students or staff. In all these areas, attention should be paid to how these policies are communicated to staff and students and monitored to ensure they are being applied in practice.

There was no mention of procedures for the quality assurance of any elements of an entity's activities that are governed by a parent provider or subcontracted to or carried out by other parties; and there are a number of subcontracted activities (not all of which were noted in the SAR) for which this needs to be undertaken to ensure alignment with standards and compliance with due diligence. For example, it was noted that recruitment was subcontracted in some instances, as was research support and supervision.

Despite observing commendable teaching practices, dedicated staff, and satisfied students, it is apparent that the QA policy has not been fully implemented, which has led to various areas of concern. As the institution grows, there is no definitive plan detailing how quality standards will be maintained alongside the increases in capacity. The panel believes that corrective action is achievable, and has outlined recommendations to address these deficits. In implementing these recommendations, the institution will be better positioned to enact its QA policy effectively, leading to an enhanced educational environment that maintains high standards even as it expands. The commitment of the staff and the positivity of the student body provide a strong foundation for these improvements.

Good Practice Identified

Nil.

Recommendations for Improvement

MR1   Malta ICOM Educational shall, within 12 months from the date of publication of this report, implement a structured framework to define roles and responsibilities clearly, to eliminate overlap.

MR2   Malta ICOM Educational shall, within 12 months from the date of publication of this report, formalise employment contracts: Develop comprehensive contracts for all parties, including clear descriptions of roles, expectations and deliverables.

MR3   Malta ICOM Educational shall, within 12 months from the date of publication of this report, establish a structured process for student and stakeholder involvement in QA procedures to ensure a broad range of perspectives is considered.

MR4   Malta ICOM Educational shall, within 12 months from the date of publication of this report, strengthen committee relations and create a clear organisational chart and terms of reference to delineate the relationships and hierarchies between committees.

MR5   Malta ICOM Educational shall, within 12 months from the date of publication of this report, provide oversight of all subcontracted activities and introduce a transparent system to monitor and report QA for subcontracted services, ensuring they meet institutional standards.

MR6   Malta ICOM Educational shall, within 12 months from the date of publication of this report, integrate strategic plans and align the strategic plan with the QA policy and the QA plan to ensure cohesive and directed institutional growth.

MR7   Malta ICOM Educational shall, within 12 months from the date of publication of this report, plan for quality maintenance by developing a long-term strategy for maintaining quality that scales with institutional growth, including resource allocation and staff development.

KR1   Malta ICOM Educational should, within 12 months from the date of publication of this report, reconstruct committee structure: Reorganise committees to be more representative of the institution's community, ensuring diverse and inclusive participation.

Conclusion

Malta ICOM Educational does not meet Standard 1.

Standard 2: Institutional Probity

> _Institutional and financial probity_: entities shall ensure that they have appropriate measures and procedures in place to ensure institutional and financial probity.

Main Findings

The SAR did not detail how Standard 2 was addressed/met. The panel heard that Malta ICOM Educational is part of a wider group but could not identify the relationships between various entities. Also, included in the set of additional documents, was a paper indicating that the Company Secretary was resident in Malta. The panel did not meet the Company Secretary.

The SAR provided details of governance and organisational structure of Malta ICOM Educational, including various boards, committees and roles within the institution. The SAR asserted that this structure provides clear lines of authority, responsibilities and accountability, ensuring that Malta ICOM Educational functions effectively and maintains high academic standards. The information also outlines the qualifications and qualities expected of leadership positions within the institution. During the site visit, the panel was unable to discern these clear lines of authority, responsibilities and accountability.

The Board of Directors (BoD) is responsible for providing oversight, guidance and strategic direction to ensure academic excellence and continuous improvement. However, the panel saw no evidence of how this was undertaken and heard that strategic decisions are taken without the involvement of internal stakeholders, highlighting a disconnect between strategic and operational management.

The Senior Management Team (SMT) is responsible for academic leadership, strategic direction and oversight. The SMT, it is claimed, works closely with the BoD. There were no minutes of SMT meetings available, and no evidence provided of how the SMT discharged its responsibilities. On the contrary, when strategic direction was explained to the panel, it was either vague or contradictory.

The Academic Management Structure was described as consisting of two main components: (i) the Academic Board (AB) which serves as the academic governing body responsible for overseeing academic functions, programme development, quality assurance, and student experience and (ii) the Centre Curriculum, Standards and Student Experience Committee (CSSEC), responsible for ensuring academic quality and standards. There were no records and no clear evidence of how these responsibilities were discharged.

The panel was also concerned that many individuals held multiple roles (for example, Vice Principal, Head of Research, Academic Registrar) and that many other roles mentioned were either nonfunctioning (Academic Registrar, Company Secretary, Head of HR) or omitted from the academic structure. Additionally, the Deans are not included in the description of the academic hierarchy and the description of their role provided at the site visit excluded the academic leadership role traditionally associated with such a role. The panel concludes that there is a high level of fluidity around titles and responsibilities of different units and individuals across Malta ICOM Educational and this raises doubts about the human resource capacity and capability.

Although rich in material resources, the institution currently lacks effective governance, leadership and human resources to provide an academic infrastructure that is commensurate with the aims of the organisation. Overall, the panel found no evidence of clear lines of authority, responsibilities and accountability. The existing academic infrastructure or lack thereof, coupled with the lack of evidence of a clear academic strategy, lead the panel to conclude that the mission of Malta ICOM Education Ltd to provide exceptional leadership in health, social care education is not clearly evidenced and that there are no effective procedures to ensure that its leaders are fit for purpose.

In terms of financial probity, as is usual in these reviews, the panel sought advice from accountants with regard to this Standard. They offered the following advice:

"Malta ICOM Educational Ltd is a limited liability company registered in 2016 under registration number C-78436. Two corporate shareholders own the company, namely, Novetude Malta Ltd and M-Five Holdings Ltd, which are in turn owned by two foreign companies, namely, Novetude Sante sas and Icom SRL, respectively. The company is run by a board of directors made up of four individuals, namely, Messrs Alfonso Mandara, Alberto Martini, Olivier Missoffe and Sami Rifai. It provided us with a detailed organigram of the structure of the organisation identifying the roles within such a structure and the individuals holding such posts.

The company's memorandum of association indicates the establishment and operation of universities, colleges, higher education institutions, and other educational institutions including vocational training as the main object of the company. Hence, the company's objects are compliant with requirements.

Malta ICOM Educational Ltd provided us with an official list of employees registered with Jobsplus and hence is considered compliant with employment legislation in this regard.

The company furnished us with the required tax compliance certificates, which showed that there are neither pending returns nor any liabilities due to the Commissioner for Revenue in respect of FSS/NIC and Value Added Tax. Concerning income tax, the company has no pending

tax returns and owes an insubstantial amount to the department. Thus, we concluded that the company is by and large compliant with fiscal compliance requirements.

After making the necessary controls and checks, we found that the company was not fully compliant concerning the submission of annual audited financial statements as the most recent accounts submitted to the Malta Business Registry (MBR) related to 2019. Thus, the accounts for the years 2020, 2021 and 2022 are overdue.

The company's annual return submission profile is also non-compliant as the last one that was submitted refers to 2022, which means that the one for 2023 is missing from the MBR portal. The company furnished us with up-to-date beneficial ownership information showing that the ultimate beneficial owners of the company are Mr Sami Rifai and Mr Alfonso Mandara, who effectively own 50% and 35%, respectively, of Malta ICOM Educational Ltd.

Furthermore, Malta ICOM Educational Ltd provided us with the signed audited financial statements for the year ended 30th September 2022. With regard to our analysis of the financial performance of the company, it transpired that the company reported a small loss in its last year but was profitable in the previous year. Furthermore, an analysis of the financial position of the company showed that it had adequate cash resources and reported positive equity. Its liquid and current ratios were also in positive territory. These statements also contain a clean audit report.

Overall, we concluded that the company possesses adequate financial resources to meet unexpected challenges and uncertainties that arise from time to time.

Concerning budgeting, the Directors of the company provided us with their projected income statement for the next year. These projections envisage the generation of positive EBITDA by the company from its operations.

Given that the company forms part of a group, we have assessed the position of the two companies owning it, in terms of compliance with MBR and fiscal requirements. It transpired that M-Five Holdings Ltd, registered under C-78374, has one pending income tax return (with an outstanding sum owing). The same company also has separate audited financial statements for 2022 and the annual return for 2023 which are missing from the MBR portal. The Company Secretary explained to us that the 2022 annual return was submitted on 3rd February 2024 and that for 2023 is still not showing as it was returned by the MBR to the Company Secretary for corrections.

The other involved company, Novetude Malta Ltd, registered under C-99774, which was set up in July 2021, has as of today not presented the 2022 audited financial statements to the MBR. They also did not furnish us with a tax compliance certificate.

When these recurrent non-compliance issues with MBR requirements were raised, we received an explanatory letter from the Company Secretary of Novetude Malta Ltd, in which he explained to us that they have engaged their accounting firm to submit the 2023 accounts to the MBR. This work is anticipated to be finalised by the end of June 2024. Furthermore, the Company Secretary explained that in the consolidated annual accounts of Novetude Malta Ltd, Malta ICOM Educational Ltd is consolidated under the equity method. They also stated that the auditors did not specifically request it to have the annual accounts of Novetude Malta Ltd audited, but they have, however, committed themselves to regularise their position in this respect. "

Good Practice Identified

Nil.

After due consideration of the evidence presented in the SAR, during the site visit and by the accountants report the panel agreed the following recommendations.

Recommendations for Improvement

MR8   Malta ICOM Educational Ltd shall, within 3 months from the date of publication of this report, produce an action plan detailing how it will establish clear procedures to ensure that leaders are fit for purpose. Such a plan will define and document the roles and responsibilities of all leadership positions, provide clear evidence of the Board of Directors' oversight and strategic guidance, ensure minutes of all meetings (BoD, SMT, AB, CSSEC) are recorded and accessible, and demonstrate how strategic decisions involve internal stakeholders.

MR9   Malta ICOM Educational Ltd shall, within 6 months from the date of publication of this report, revisit and clearly outline and communicate the organisational structure, including all roles and their responsibilities, and ensure there are no overlapping roles that could lead to conflicts of interest or inefficiencies. Additionally, the high level of fluidity around titles and responsibilities must be addressed and critical positions like Deans and Heads, have clear academic leadership functions.

MR10   Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, submit the separate audited financial statements for 2023 of Malta ICOM Educational Ltd or the consolidated financial statements of Novetude Malta Ltd.

MR11   Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, submit a tax compliance certificate for Novetude Malta Ltd.

MR12   Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, ensure that the audited financial statements of Malta ICOM Educational Ltd for the three years, 2020-2022, are duly presented and uploaded on the portal of the Malta Business Registry.

MR13 Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, ensure that the annual return for 2023 of Malta ICOM Educational Ltd is presented and uploaded on the portal of the Malta Business Registry.

MR14 The annual return for 2023 of M-Five Holdings Ltd. shall be duly corrected, presented, and uploaded on the portal of the Malta Business Registry within 2 months from the date of publication of this report.

Conclusion

Malta ICOM Educational Ltd does not meet Standard 2.

Standard 3: Design and Approval of Programmes

> *Design and approval of programmes*: self-accrediting providers shall have appropriate processes for the design and approval of their programmes of study.

Main Findings

Malta ICOM Educational is not a self-accredited entity and for its own internally developed programmes follows the programme accreditation procedures of the MFHEA. All programmes offered by Malta ICOM Educational have undergone submission and approval by the MFHEA and can be found listed in their License documents. The institution offers various degrees, including Osteopathy at MQF Levels 6 and 7, and Physiotherapy, Psychology, and Dental Hygiene, all at MQF Level 6, primarily targeted to French and Italian nationals. Details of the courses and learning outcomes are available on the website for current and prospective students. The workload for each module is delineated in terms of ECTS credits. Clear assessments are outlined for all modules and communicated to students in a timely way.

Malta ICOM Educational has a procedure for programme design and approval. The procedure is also presented in a schematic way which gives a good understanding of the main steps in design and approval of programmes. Notwithstanding, this policy lacks specific details outlined in the National EQA Framework. It is recommended that Malta ICOM Educational revise this policy to involve both internal stakeholders, such as students, and external stakeholders, such as professional experts, clinical internship venues, alumni and future employers, to ensure alignment with industry standards, guidelines and best practices. The procedure only mentions the Council for the Professions Complementary to Medicine (CPCM), the regulatory body in Malta, and DentalPro, an Italian Dental care group, however, this is not sufficient to ensure that all the programmes undergo the same processes to ensure legal conformity, excellence, relevance and effectiveness in terms of both the academic component and the planning of clinical experiences. Also, Malta ICOM Educational should formalise and keep minutes of all meetings which take place during the whole process of course design and approval.

The self-assessment document submitted by Malta ICOM Educational provides an account of the design, development, and approval processes for Malta ICOM Educational programmes. However, it lacks substantial details regarding the challenges encountered or enhancements implemented throughout these processes. The institution should regularly review the process to enhance it. However, student and faculty interviews revealed instances where feedback led to revisions in the Physiotherapy programme, primarily aimed at balancing workload across study years, thus facilitating enhanced learning and progression.

The document outlines two primary steps preceding the submission of a course for accreditation. Initially, market research and a feasibility study are conducted to assess the demand for the courses and their alignment with the Malta ICOM Educational strategic plan. Subsequently, the Project Manager drafts the programme objectives and curriculum, which are then reviewed by the Academic Board, Senior Management Team, relevant Faculty, and external stakeholders. The panel observes limited engagement from external stakeholders and none from students in the course/programme design process. During the interviews, however, the students did share that they were given the possibility to provide their views on the review of the Physiotherapy programme. The panel observed that to align with the MFHEA EQA Standard, student involvement should be formally incorporated into the quality assurance policy, particularly regarding the design and approval of study programmes. Students must be active from the onset of designing the course. Students' insights and diverse perspectives play a crucial role in ensuring that the course content is relevant, engaging and inclusive.

The panel notes that the courses offered by Malta ICOM Educational reflect the rapidly evolving needs of the healthcare industry. The decision as to which courses are taken forward is that of the Principal and the Board of Directors. The panel could not confirm with certainty whether the majority of alumni who have graduated from the Bachelor's and Master's programs in Osteopathy up until the date of the audit have successfully secured employment in their chosen field. Furthermore, it remains uncertain whether these alumni have faced significant challenges in meeting regulatory requirements and gaining acceptance from the relevant authorities in the countries where they plan to work.

Malta ICOM Educational has three venues in Italy approved and registered as training centres by the MFHEA. The panel was informed throughout the interviews that although Turin, Milan and Catania are the main venues where clinical internship of Osteopath students is carried out, there are 270 centres in Italy which host Physiotherapy students from Malta ICOM Educational and another 200+ centres in France for the French Physiotherapy students. – The panel did not see evidence of Catania on the licencing conditions ICOM_LC_2023. . The panel was sent a document with Private Practice Clinic and Hospitals, Rehabilitation Centres, Nursing Homes and Sports Clubs which take on French students from Malta ICOM Educational as interns, and another with clinics all over Italy, which clinics are accredited by the Italian National Health System (Italian SSN - Servizio Sanitario Nazionale). They were also sent examples of agreements with some of these centres which are accepting to accommodate students following the MFHEA accredited courses delivered by Malta ICOM Educational, which agreements have the MFHEA logo and license number indicated in the document, and yet the MFHEA is not aware of these centres/clinical venues. Malta ICOM Educational is to follow MFHEA Communication MFHEA/09/2021 point 4 with regard to use of its logo. The institution has already been cautioned on the use of the MFHEA logo and been referred to this communication in an online review report, following an online and website check carried out by the Compliance Unit of the MFHEA. The panel noted that Malta ICOM Educational is still working on the venues which will cater for the clinical internships of students following the newly launched degree in Dental Hygiene. The panel was told that this clinical placement is planned to commence in April and the clinical centres will all be in Italy, however, Malta ICOM Educational has yet to request approval from the MFHEA. Immediate action is necessary to inform the MFHEA of these centres to comply with licensing regulations.

Malta ICOM Educational has updated its license to include blended delivery of its programmes of study such as that of Dental Hygiene. . The institution is therefore expected to follow the MFHEA Guidelines for QA: for online learning providers, which among other factors mentions that the quality assurance policy must cover online and blended delivery, which it does very superficially. Also, the institution must have a key managerial post or unit dedicated to the management of online and blended learning from an educational point of view, and academic staff should have suitable qualifications and experience in online and blended learning, and engage in continuing professional development in this area of expertise. None of these were noted during the audit visit. Although the panel was presented with a QA handbook of Malta ICOM Educational, which made reference to the QA of Blended Provision, and an elearning policy, the panel was not able to see evidence that these are being actioned in the day-to-day teaching and learning online, and that QA monitoring specifically in the case of online teaching and learning is being carried out.

Good Practice Identified

Nil.

Recommendations for Improvement

MR15 Malta ICOM Educational shall request immediate approval by the MFHEA for additional clinical internship venues, and update licensing conditions to reflect the centres which are used for activities related to the programmes offered by Malta ICOM Educational.

KR2 Malta ICOM Educational should, within 6 months from the date of publication of this report, enhance the procedure used for the design and approval of programmes, by incorporating additional details outlined in the National EQA Framework standards, and keeping documented evidence of the meetings held in relation to this process. This revision should involve both internal stakeholders, such as students, and external stakeholders, including professional experts, clinical placement venues, alumni and representatives from the health industry (possible employers).

MR16 Malta ICOM Educational shall, within 3 months from the date of publication of this report, ensure that all the actions listed in the MFHEA Guidelines for QA: for online learning providers are followed and actioned.

Conclusion

Malta ICOM Educational does not meet Standard 3.

Standard 4: Student-centred Learning, Teaching and Assessment

> _Student-centred learning, teaching and assessment:_ entities shall ensure that programmes are delivered in a way that encourages students to take an active role in the learning process.

Main Findings

Students taking up the courses at this institution are exposed to both theoretical and practical components. Physiotherapy and Osteopathy programmes have a maximum of 15 % online provision. The theoretical and practical teaching aspect are covered in Malta. Osteopathy has a percentage (up to 40%) delivered in Italy. These delivery methods are to align with the Italian and French professional education standards. They are also within the MFHEA requirements. Dental Hygiene is the only active programme with more than 15% online delivery with 30%.. The lessons that take place in Malta entail a practical element, which the tutors convey through the use of the couches, phantom heads, and other resources in order to display the practical features of the science of the occupation being taught. Such teaching methodology aims at equipping the students with a good hands-on approach, piloting their way prior to engaging in the clinical practice, especially since if students fail their Clinical Certification Programme (CCP), they would not be allowed to pursue their clinical placement.

During their course of studies, students partake in modules about professional practice, which units encompass topics such as ethics, patient-handling skills (in terms of social-emotional adroitness), and also essay writing and presentation skills; thus offering students insights into how to go about being humane when handling patients, and improving their critical thinking and communication skills set, adding value to their programme of studies.

The panel heard that the portfolio, which is submitted during each year of study, and the professional practice components are carried out in English. These are good opportunities for students to expose themselves to the English language, since it allows them to broaden their horizon, and also increases their opportunity for future academic writing in an international setting.

Indemnity insurance on technical sites is covered by the institution.

Students are well represented, as a number of students from each cohort and from different nationalities (Italian and French) are present in the meetings which the institution holds periodically. This allows the student body to convey any queries, complaints or suggestions to the academics and management through different student representatives.

During the interviews, students expressed their desire to have more revision lessons, mostly during their first year of studies, in order that they could better grasp certain topics, especially the ones related to anatomy. In fact, some students also feel that they ought to have (i) more resit opportunities during their first year of studies, and (ii) exposure to looking into a real body, in order to better understand the anatomy of the body. The institution, notwithstanding that it does not offer dissection opportunities or open human bodies, currently has a state-of-the art online programme called 'Medicine online' that provides students with a digital experience of how the body operates when certain movements are being performed. Also, the panel heard how the students would be appreciative of having extra modules that would allow them to delve deeper into specialised areas, namely paediatrics and sports.

The panel heard that it would be ideal if examinations were to be more spread out, and with a study period in between the last lectures and the commencement of examinations in order that students could be given the opportunity to better revise the content for the upcoming exams.

Students are appreciative of the ongoing support that the different members within the institution offer them, even on a one-to-one level. Moreover, they expressed how easily staff can be reached, and the promptness by which their queries and/or concerns are tackled through the use of various platforms, namely, verbal communication, MS teams and emails.

Assessment arrangements are granted based on documented justification endorsed by a health/medical professional. Such assessment accommodations would be based upon the learning agreement agreed upon commencing their course of studies. What is of concern to the panel with regard to assessments, is the way that exam papers are compiled and shared among the Exam Board, whereby exam papers are drafted in English, and then translated into French and Italian for the respective nationalities, and examination papers are circulated via email. The panel noted that there was no online monitoring applications for online examinations, examination papers were recycled and the panel were told that tutors/mentors at the different placements around Italy assess but this was inconsistent. Moreover, the panel deems that the institution should find alternative means and arrangements of how to hold both online and in-person examinations, as the current practices are not reliable, consistent and transparent, and therefore, the current examination set up does not offer a fair opportunity to all the students.

Student feedback is gathered by the institution through verbal discussions at the end of every seminar, whereby the lecturers, the course leaders, the administrative directors or deans are present. Also, formal meetings amongst class representatives, administration and lecturers take place, during which meetings feedback is also gathered. Notwithstanding the language challenges that there might be between students of different nationalities, the student representatives expressed their wish to come together in order that they could discuss student matters, regardless of their nationality. Perhaps a student forum can be organised by the institution whereby students can exchange ideas and concerns.

Students are subject to different channels and platforms in order to access different portals (lecture schedule, marks, internship requests, MS Teams, and other online tools that are needed thought the course of studies), and although all these are necessary, the panel deems that a centralised portal should be considered by the institution.

The Osteopathy course is promoted mainly as a BSc + MSc study package, but the choice to pursue the course to a Masters level is optional; however, the institution, all throughout the BSc programme, assists the students in becoming acquainted with research methods, tools and methods in order that they can submit their dissertation for the BSc and eventually for the MSc. Moreover, during the MSc programme, students are equipped with skills for the academic profession, should they wish to pursue lecturing endeavours.

Good Practice Identified

Nil.

Recommendations for Improvement

MR17 Malta ICOM Educational shall, within 3 months from the date of publication of this report, implement a system that is reliable and secure in terms of compiling and circulating exam papers.

MR18 Malta ICOM Educational shall, within 3 months from the date of publication of this report, implement a dedicated system that ensures transparent, reliable, consistent and fair examination procedures.

R1 Malta ICOM Educational is to better schedule its examinations for the students to have enough time to prepare themselves for the examinations.

R2 Malta ICOM Educational is to consider offering specialised modules, for students to specialise in their professional route.

R3 Malta ICOM Educational could create a centralised portal where the student can find all the relevant information.

R4 Malta ICOM Educational could create platforms where students of different nationalities can meet and exchange ideas and concerns.

Conclusion

Malta ICOM Educational does not meet Standard 4.

Standard 5: Student Admission, Progression, Recognition and Certification

> _Student admission, progression, recognition and certification:_ entities shall consistently apply pre-defined and published regulations covering all phases of the student 'life cycle'.

Main Findings

Interested candidates can find the information pertaining to the courses offered by the institution on the website, in either the Italian, English or French language. On the website one can find a contact form, should potential students need to put forward any queries. Moreover, the institution organises online open days on a regular basis, during which information about the specific training offers would be conveyed. Also, personalised private interviews with the Orientation Manager or one of her staff can be set up. The panel noted that currently the institution does not promote the courses it offers to the local market, however, the management of the institution informed the panel that they would offer it for free to local students, and should they wish to pursue their studies with them.

Prior to being accepted, potential candidates need to be medically screened, which medical visit costs are covered by the institution, and they need to carry out basic life support training, which training is also covered by the institution. These form part of the entry requirements.

A Recognition of Prior Learning (RPL) policy is available on the website.

Candidates who qualify to pursue their studies with the institution and have an impairment, for which they would require particular arrangements (access or teaching/learning/assessment), need to submit evidence provided by a professional to sustain the learning agreement, which is tailor-made to cater for the specific needs of the student. The Academic Board validates the learning agreement, which is endorsed by the respective Dean, and the needs outlined will be communicated to the academics concerned. An email is circulated annually, at the beginning of the year, to reach out to students and let them know that if they need any specific support, they are to speak to their respective Dean, in order that arrangements can be made to accommodate their needs.

An induction session, whereby the documentation and procedures are explained, is carried out on the initial day of the course, which orientation is recorded. A student handbook is also distributed to students.

Students' progression is monitored by the respective Deans. Moreover, students have access to a specific platform, whereby they can find the results for their respective study units.

Upon successful completion of their studies, students are conferred with a degree certificate but are not provided a copy of a student transcript. The certificates viewed by the panel were in line with the requirements issued by the MFHEA, however, the panel deems that the signatories' names and surnames on the certificates issued should be clearly defined.

Good Practice Identified

Nil.

Recommendations for Improvement

MR19 Malta ICOM Educational shall, within 6 months from the date of publication of this report, clearly define the signatories' names and surnames on the certificates issued.

KR3 Malta ICOM Education should, within 6 months from the date of publication of this report, make student transcripts available to all students on completion of their studies.

Conclusion

Malta ICOM Educational requires improvement to meet Standard 5.

Standard 6: Teaching Staff

<u>Teaching staff</u>: entities shall assure the competence and effectiveness of their teaching staff.

Main Findings

The panel observed that the lecturing staff and clinical tutors at Malta ICOM Educational are predominantly practicing health professionals and experts in their respective fields. However, they generally lack formal training in academic pedagogy or clinical teaching methods. While a defined recruitment procedure for lecturing staff at Malta ICOM Educational was provided, the panel noted its incompleteness, particularly regarding the stages of the recruitment process. Details such as who will conduct interviews, handle job postings and screen applications, assessment tool used and how final selections are made were not adequately specified. Moreover, the panel observed that the recruitment process was not consistently implemented.

To address these concerns, it is recommended that standardised procedures explicitly outline the interviewing process for recruiting and selecting lecturers to deliver programmes at Malta ICOM Educational. Additionally, it is advised to establish terms of reference and require signed contracts/agreements with lecturers and clinical tutors. These documents would clarify expectations, ensuring accountability, transparency, and effective management of teaching and clinical supervision activities, and mitigate risk.

Typically, job vacancies are initially promoted internally or through networking channels. Only when no suitable candidates are identified internally does the institution consider advertising the position externally. However, this procedure has not been followed thus far. Clinical tutors are often engaged on an ad hoc basis, with some working within Malta ICOM Educational's licensed clinical venues. However, most are independent clinicians with their own practices or are affiliated with clinics/hospitals.The panel found limited evidence of service level agreements or contracts with the various clinical venues used for clinical placements. Such agreements would outline the terms of reference and ensure the quality of the placements, as well as the safety of both students and patients.. Students typically choose a clinic for their placements based on proximity to their residence. The clinical coordinator then communicates with the selected clinic and makes necessary arrangements. It is worth noting that all academic and clinical staff are freelancers and do not have employment contracts with Malta ICOM Educational. Additionally, clinical tutors do not receive compensation for supervising students since in France and Italy this practice is mandatory within their scope of professional practice.

The panel noted that newly recruited lecturers and clinical tutors are assigned a mentor during the first few months of teaching at Malta ICOM Educational. This practice facilitates the onboarding process, thus enabling the smooth transition within the lecturing/clinical tutoring team, and alignment of practices. However, the panel noted that there is no formal procedure

which is followed and documented, thus reducing effectiveness, efficiency and consistency. Clinical tutors are first junior clinical tutors who work under the supervision of a senior clinical tutor who has more than 5 years of experience in the clinical field, and Malta ICOM Educational also has Superior Senior Clinical tutors who can take groups of students for clinical supervision (the ratio of clinical tutors to students is never more that 1:8). Lecturers teach MQF Level 6 or MQF Level 7 modules according to their qualifications and experience. The programme leaders are those who are responsible for the overall monitoring and evaluation of the programme of study including curriculum, assessments and the contact person for both students and lecturers.

The panel was informed that clinic coordinators are responsible for the clinical placements and ensure that clinical tutors are guided by the learning outcomes of the student placement. They are the persons responsible to monitor student performance and collect tutor and patient feedback. The panel noted that this process differs by course and differences are also evident between the Italian and French teams. Malta ICOM Educational must work on standardising the clinical experiences of students. This ensures that all students receive a consistent level of supervision regardless of the clinical tutor or clinical site. This consistency ensures quality assurance is maintained throughout, and that students are receiving adequate support, guidance, and feedback to develop their skills and competencies. Malta ICOM Educational must establish a standardised internship system that undergoes continuous monitoring, with records maintained to uphold student and patient safety and minimise the potential for ethical breaches and legal issues. The panel noted that all students maintain a clinical portfolio, which serves to document their clinical hours and track their competence in various clinical activities. This portfolio provides a structured record of each student's progress and development in practical skills.

From the interviews held, the panel noted that lecturer observation is sporadic and inconsistent. Although the SAR does include a description of staff peer observation and related documents, the panel noted the absence of a structured formal process for class observation and a consistent follow-up system for such observations. The panel emphasises that feedback provided by the coordinator to the lecturer must be formalised and followed up accordingly. This practice ensures that tutors consistently assess their teaching methods and maintain appropriate delivery of teaching and learning. The institution has expressed intentions to introduce a more comprehensive annual appraisal review for all staff members.

The panel noted that although the documentation submitted by Malta ICOM Educational includes a Staff Development policy and procedure this is not being implemented. Lecturers at Malta ICOM Educational do at times participate in continuing professional development (CPD) opportunities which they come across in their professional practices. Malta ICOM Educational, however, needs to invest more in further developing the skills and competences of all its staff, such as teaching pedagogy, assessment methods, online teaching and learning, and clinical education methods, to mention but a few.

The SAR provided to the panel states '*Malta ICOM Educational's research strategy plays a crucial role in enhancing the evocativeness of its teaching standards in several ways...'.* It is not clear to the panel that this is being achieved and that Malta ICOM Educational encourages research and scholarly activities among its teaching staff. The panel does note the pivotal role of the MoU which Malta ICOM Educational has with the Centre for Osteopathic Medicine Collaboration (COME) in postgraduate research at Malta ICOM Educational, but this is not available for lecturers and clinical tutors. Malta ICOM Educational does not encourage collaboration and communication between teaching staff and COME. This can facilitate the sharing of resources, expertise, and best practices to support research-informed teaching across Malta ICOM Educational.

The panel was informed that besides exam boards and the Annual Programme Review, some formal and informal meetings between the lecturing staff and management do happen to share good practices and discuss students' progress. Lecturers offer full support to the students and genuinely help them to plan and prepare well for their examinations. Lecturers are also available on a one-to-one basis after normal lecturing hours and are very responsive via email.

Good Practice Identified

Nil.

Recommendations for Improvement

MR20 Malta ICOM Educational shall, within 6 months from the date of publication of this report, establish a standardised internship system implemented across all courses offered by Malta ICOM Educational. This must undergo regular monitoring, with records maintained. This will ensure student and patient safety and minimise the potential for ethical breaches and legal issues.

KR4 Malta ICOM Educational should, within 6 months from the date of publication of this report, review its recruitment and selection procedure to include more specific details, ensuring consistency and transparency of the process.

KR5 Malta ICOM Educational should, within 2 months from the date of publication of this report, formally structure class observation through the compilation of an adequate observation form and document follow-up.

KR6 Malta ICOM Educational should, within 2 months from the date of publication of this report, provide a structured systematic system for CPD for all lecturing staff.

KR7 Malta ICOM Educational should, within 6 months from the date of publication of this report, formalise the engagement of clinical tutors/lecturers with a signed contract/agreement clearly defining the terms of reference, ensuring accountability, transparency and effective management of teaching and clinical supervision arrangements.

KR8 Malta ICOM Educational should, within 12 months from the date of publication of this report, provide more opportunities and support teaching staff to engage in research and scholarly activities.

R5 Malta ICOM Educational could have a recorded formal procedure for the onboarding of all new teaching/clinical tutors, to enhance effectiveness, efficiency and consistency within the institution.

Conclusion

Malta ICOM Educational does not meet Standard 6.

Standard 7: Learning Resources and Student Support

> _Learning resources and student support_: entities shall have appropriate funding for their learning and teaching activities and sufficient learning resources to fully support the students' learning experiences.

Main Findings

Students are given PowerPoint presentation slides, together with other material distributed by the lecturers. Online lessons are recorded, and students can refer to them until their viewing availability expires.

Students can avail themselves of a physical library which is located at the Gzira site, and they can make use of an online library.

For the theoretical component of the course, which happens in Malta, students pursuing the Physiotherapy and Osteopathy courses, have couches and other resources (gym balls, mats) that aid them to materialise the theory in a practical manner. Whereas for the Dental Hygiene course, students have the phantom heads at their disposition.

Within the lecture rooms, interactive white boards and multiple screens are available for the teaching and learning.

The panel heard that students deem they would benefit from more opportunities to practice functional human anatomy theory-related concepts; moreover, some students think that looking into a real human body would give them the opportunity/possibility to broaden their knowledge about the human body in a tangible manner.

Different recreational areas are available to the students at the campuses in Malta, namely, the gym, and two canteens at the Gzira site, and a roof terrace at the St Venera site. In Milan, students have a gym and an outdoor space. Such avenues are a space where students can take a break or work on an assignment, especially since the lecture rooms within the Gzira and St Venera premises lack fresh air, and so it can get tiring for students to stay in such rooms for a stretch of time.

Student support

The panel heard multiple times during the interviews with staff and students that the institution offers 'tailor made programmes', based on the needs of the specific students, especially those that have a physical and/or learning impairment.

Students have a very good representation via their student representatives, and they deem this representation vital during their course of studies.

Students have a good rapport with the different tutors, and with the management of the institution.

A doctor is on duty during teaching clinics to ensure the safety of the patient being treated by the students.

Good Practice Identified

Nil.

Recommendations for Improvement

R6   The institution could install a good ventilation system, for their venues to circulate air.

Conclusion

Malta ICOM Educational meets Standard 7.

Standard 8: Information Management

> *Information management:* entities shall ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

Main Findings

The SAR outlined a clear protocol for maintaining, retaining and archiving student records on SharePoint. During the site visit, interviewees highlighted the role of Sharepoint in storing data and mentioned data security and access. The protocol needs to be further developed to provide additional details in these areas, in particular access and security. For example, it was mentioned that some recruitment and research activity is outsourced, and no information is available on how data security issues are evaluated and monitored during these contracted out activities to ensure compliance with the standard. Additionally, it may provide further levels of reassurance that the Standard is met if available additional Sharepoint features are adopted.

The College demonstrated mechanisms for student support and the involvement of staff in data analysis. Nonetheless, the practice of potentially or monitoring users without explicit consent raises concerns about privacy. Furthermore, the College must ensure that those with access to student and other sensitive information are aware of the requirements of the General Data Protection Regulation (GDPR) and the need for not sharing more data than is necessary to be of use.

The SAR provided a detailed protocol for document management; however, this was not evident in practice. Despite the protocol, documents provided to the panel were often undated and lacked subject headings, review dates and details of authorship or ownership. Although there appears to be a cycle of policy review and risk identification, the difficulties in document navigation and lack of clarity on document ownership indicate a need for better management of information. The lack of labelling and follow-up on critical documents, including those pertaining to external examiner reports and agreements with students with disabilities, requires immediate attention.

The awareness of the need to keep data for 40 years was noted and the panel was shown the storage facilities for physical documents, but the lack of a log sheet for tracking data retention is a significant omission that must be rectified. Many of the information management functions would normally be overseen by an academic registrar and maintained within an academic registry. This position and this function were described in the SAR but did not exist. The discrepancy between what was presented to the panel in the SAR and reality undermines the credibility of the College's claims for effective document management.

Good Practice Identified

Nil.

Recommendations for Improvement

MR21   Malta ICOM Educational shall, within 3 months from the date of publication of this report, expand the existing document management protocol to include detailed procedures on access and security, especially in relation to outsourced activities such as recruitment and research, to ensure data security compliance. Information on how third-party contractors manage and secure data must be documented and regularly reviewed.

MR22   Malta ICOM Educational shall, within 3 months from the date of publication of this report, revisit practices involving the potential for user monitoring without explicit consent. The College must establish clear policies in accordance with GDPR, ensuring that explicit consent is obtained before any monitoring activities are conducted.

MR23   Despite the SAR's outline of a detailed document management protocol, its application appears to be lacking. Malta ICOM Educational shall, within 3 months from the date of publication of this report, strictly adhere to labelling documents with dates, subject headings, review dates, and details of authorship or ownership. A clear and consistent policy should be established for document management and followed diligently.

MR24   Malta ICOM Educational shall, within 3 months from the date of publication of this report, implement a log sheet or digital tracking system for the 40-year data retention requirement. This should include both physical and digital records, ensuring that all data is accounted for and can be accessed or audited when required.

KR9   Malta ICOM Educational shall, within twelve (12) months from the date of publication of this report, actualise the role of an academic registrar as described in the SAR. This position is crucial for overseeing information management functions and maintaining an academic registry, thereby ensuring consistent and effective document management.

Conclusion

Malta ICOM Educational does not meet Standard 8.

Standard 9: Public Information

> _Public information_: entities shall publish information about their activities which is clear, accurate, objective, up to date and readily accessible.

Main Findings

Malta ICOM Educational has a "Public Information Policy and Procedure" which governs the dissemination of information to the public in line with Malta ICOM Educational values and legal obligations. The Principal or his assigned delegate is responsible for monitoring public information. Malta ICOM Educational uses several platforms for marketing including Instagram, Facebook, LinkedIn and YouTube. Malta ICOM Educational courses are not promoted within the Maltese market. Although this has been discussed, this is a direction from the Board of Directors thus far. Nonetheless, Malta ICOM Educational intends to broaden the clinical placement options to include venues in Malta. An online review (21/6/023) was carried out by the Compliance Unit of the MFHEA which led to several changes to information and material available for the public on the website and other social network platforms of Malta ICOM Educational.

The panel noted a difference in branding - the institution logo Malta ICOM Educational and MiE (Malta ICOM Educational), the former used only for the French Physiotherapy bachelor's degree programme. Although the panel understands that this is referring to the same institution, the same logo needs to be used consistently. This helps to maintain a unified brand identity and avoids confusion among website visitors. The structure of the way information is presented also varies for each course. Malta ICOM Educational should create a standardised template for presenting information about each course or programme offered by the institution. This template should include consistent sections such as programme overview, curriculum, admission requirements, faculty profiles, and contact information. By maintaining a uniform structure, prospective students and the public will find it easier to navigate the website and compare different programmes.

The website fulfills most of the requirements indicated in this Standard by providing essential information, with the exception of course pass rates, which encompass completion data. Details regarding MQF Level, entry prerequisites, intended learning outcomes, ECTS/ECVET credits, and the teaching process are accessible within the comprehensive study programme descriptions. Nonetheless, while this information exists on the website, accessing it can sometimes prove challenging. While certain details are conveniently accessible within a few clicks from the homepage, navigation can become more convoluted and time-consuming for other information. This inconsistency in accessibility varies among different courses.

As per MFHEA/09/2021 'Where the pertinent Regulatory Body/Competent Authority has not approved the academic qualification obtained at the end of the Educational programme as giving access to the regulated profession, a clear statement explaining this should be clearly published'.

The statement which the Compliance Unit of the MFHEA (online review, 21/6/2023) instructed Malta ICOM Educational to include on the website is found in a very obscure area at the far bottom of the web pages after you select *Legal notice*. This is at best not readily accessible and does not allow students to have full visibility of all the relevant information related to their studies. The institution is urged to provide a clear statement elucidating this issue, particularly where Malta ICOM Educational offers details on career progression, professional registration, employment, and references to CPCM, the Regulatory Body overseeing these professions in Malta. The panel, however, notes that there is clear reference to the contact details of the pertinent Competent Authority, CPCM in the case of the professions covered by Malta ICOM Educational courses, thus enabling the prospective students and the public to have visibility of regulatory information.

Good Practice Identified

Nil.

Recommendations for Improvement

KR10   Malta ICOM Educational should, within 3 months from the date of publication of this report, ensure consistent branding on its website and on social media platforms.

KR11   Malta ICOM Educational should, within 6 months from the date of publication of this report, create a standardised template for presenting information about each course or programme offered by the institution.

KR12   Malta ICOM Educational should, within 6 months from the date of publication of this report, publish the pass rates for all courses.

KR13   Malta ICOM Educational should, within 3 months from the date of publication of this report, provide a clear statement in an easily accessible area on the website, as indicated in the online report of the MFHEA, regarding the positioning of Malta ICOM Educational courses concerning the regulatory body of Malta.

R7   Malta ICOM Educational could consider improving the user interface of the Malta ICOM Educational website to make it more user-friendly and intuitive to use.

Conclusion

Malta ICOM Educational requires improvement to meet Standard 9.

Standard 10: Ongoing Monitoring and Periodic Review of Programmes

> *Ongoing monitoring and periodic review of programmes*: entities shall implement the 'Quality Cycle' by monitoring and periodically reviewing their programmes to ensure their continuing fitness for purpose.

Main Findings

The SAR advised the panel that Malta ICOM Educational has established clear responsibility for quality assurance through the Curriculum and Standards Committee, Academic Board, and Senior Management Teams. These bodies oversee the implementation of procedures and policies to ensure the quality of programmes. Despite repeated requests for clear information, the panel could not see any clear indication of systematic and regular programme monitoring and review. The panel saw a few reports and heard a few examples of changes that had taken place in programmes but saw no minutes of the meetings mentioned above which have oversight of programme monitoring. Additionally, the panel could see no evidence that information gathered, or issues identified, were addressed and although action plans were referred to, the panel did not see any. The panel concluded that the clear responsibility and oversight alluded to in the SAR was absent.

Furthermore, the SAR indicated that the involvement of students and stakeholders and their representation on various committees, such as the Curriculum, Standards and Student Experience Committee, ensures that student and stakeholder perspectives are considered in the review process. This aligns with the requirement for input from students and other stakeholders. The panel heard that student views are considered in any evaluation of the programme and were also told that students do not meet across different cohorts and groups, and the panel saw no minutes nor heard examples of students participating in committees focussed on quality enhancement. Similarly, the panel saw no minutes, neither did they hear of examples of stakeholder involvement nor of stakeholders participating in committees focussed on quality enhancement. The panel concluded that programme monitoring would be enhanced by more systematic and evident student and stakeholder involvement.

In various interviews the panel heard that student issues, stakeholder involvement and lecturer input were addressed on a programme-by-programme basis with no institutional perspective generated or evident in documented minutes. Coupled with the limited presentation of external examiner reports and absence of committee oversight, the panel concluded that the level of scrutiny by anyone not directly connected with the programme was minimal and that even within the institution programmes were reviewed in isolation, with institutional perspectives unminuted and understood by a small group of managers. The panel believes that the needs of the students and stakeholders would be better met by creating a system which generated an objective institutional oversight.

Good Practice Identified

Nil.

Recommendations for Improvement

MR25 Malta ICOM Educational shall, within 6 months from the date of publication of this report, establish a robust protocol for the systematic and regular monitoring and review of programmes. This should include the creation of detailed minutes for all meetings of the Curriculum and Standards Committee, Academic Board, and Senior Management Teams, specifically focusing on programme monitoring.

MR26 Malta ICOM Educational shall, within 3 months from the date of publication of this report, develop clear action plans to address issues identified during programme reviews and establish a system for tracking the implementation of these plans.

MR27 Malta ICOM Educational shall, within 12 months from the date of publication of this report, implement structured methods for student and stakeholder participation in the quality review process. This could include regular, minuted meetings of the Curriculum, Standards and Student Experience Committee, with mandatory student and stakeholder representation.

KR14 Malta ICOM Educational should, within 12 months from the date of publication of this report, address the lack of an institutional perspective in programme reviews by establishing a centralised system of documentation and feedback that includes input from a broader range of institutional representatives and stakeholders.

KR15 Malta ICOM Educational should, within 6 months from the date of publication of this report, improve the presentation and utilisation of external examiner reports, ensuring they are discussed within the appropriate committees and are part of the institutional quality assurance process.

KR16 Malta ICOM Educational should, within 6 months from the date of publication of this report, create a system to generate objective institutional oversight, possibly through an independent body or enhanced internal audit mechanisms, to ensure that programme quality is evaluated from an institutional perspective, not just at the programme level.

R8 Malta ICOM Educational could consider establishing a regular forum for student representatives from differing groups and disciplines, to address common concerns and issues of common interest.

Conclusion

Malta ICOM Educational does not meet Standard 10.

Standard 11: Cyclical External Quality Assurance

> _Cyclical external quality assurance_: entities should undergo an external quality assurance audit by, or with the approval of, the MFHEA on a cyclical basis, according to the MFHEA guidelines, once every five years.

Main Findings

This is the first cycle of audit for the institution and the panel welcomes the co-operation of the institution. The panel found the presentation of the SAR and supporting documents challenging. The copious documentation provided was difficult to follow as there was no consistency in the records kept by the institution, and so year by year and programme by programme comparison was impossible and often obscured rather than illuminated its activities.

Additionally it is noted that the Director of the institution did not attend the final feedback meeting.

Recommendations for Improvement

R9   Malta ICOM Educational could reflect on how it presents information relevant to cyclical external quality assurance.

Conclusion

Malta ICOM Educational meets Standard 11.

Response by the Provider

Preamble

Critical reflection and strategic response to external quality assurance audit

Malta ICOM Educational, as a relatively new academic institution, has undergone considerable growth since its inception. The institution acknowledges and welcomes the insights provided by its recent external quality assurance audit. It appreciates the thorough review conducted by the peer review panel, whose findings have highlighted both the benefits and challenges associated with sustaining such rapid growth. The audit underscores the need for ongoing development in our structures and processes to maintain high standards and ensure operational resilience.

While the audit has identified several key areas for improvement, Malta ICOM Educational views this feedback as a valuable opportunity for structured development. The institution recognises the importance of consolidating its growth through the establishment of stronger governance frameworks and enhanced quality assurance measures to effectively support its expanding operations and academic provision.

Strategic response to the audit findings

In response to the audit findings, Malta ICOM Educational promptly embarked on a process of in-depth critical self-reflection, rigorously evaluating its governance, academic management, and operational practices. This process was undertaken with the intent to address root causes of inefficiencies, rather than implementing superficial fixes. This comprehensive review has led to significant reforms at all organisational levels.

A key focus of the institution's response is the integration of quality assurance as an intrinsic element within its organisational framework. This approach seeks to influence not only formal policies but also the daily practices of staff and the educational experience of students. To this end, a thorough restructuring of the governance model, the Board of Directors, and the academic management system was launched to align with best practices and to ensure full compliance with the standards set forth by the Malta Further and Higher Education Authority (MFHEA).

This restructuring initiative forms part of a broader strategic vision, which aims to cultivate a culture of continuous improvement and rigorous accountability. Within this framework, a detailed action plan has been developed to address the Mandatory Recommendations (MR), Key Recommendations (KR), and supplementary suggestions identified in the audit report.

Malta ICOM Educational is pleased to report that many recommended changes have already been implemented, with others progressing ahead of schedule. This proactive approach reflects the institution's commitment not only to meet but to exceed the standards set in the audit, ensuring sustainable and long-term growth in academic quality and operational integrity.

Conclusion

Despite its youth, Malta ICOM Educational has achieved substantial growth in academic provision and institutional development. However, this rapid expansion has inevitably presented challenges, as outlined in the recent audit. The institution views these challenges not as setbacks but as natural steps in the growth trajectory of an ambitious academic entity. The response to the audit findings has been systematic and reflective, ensuring that governance, quality assurance, and academic frameworks grow in strength alongside the institution's expansion.

The measures taken—and those currently underway—demonstrate a firm commitment to comprehensively addressing the audit's recommendations. It is anticipated that these initiatives will not only consolidate the institution's achievements but also establish a strong foundation for sustained excellence.

Malta ICOM Educational highly values the insights provided by this quality assurance review, recognising its importance in guiding the institution towards greater maturity in both academic and administrative dimensions. Confident in the reforms and strategic measures implemented, the institution looks forward to continued delivery of high-quality education that meets and exceeds the expectations of students and stakeholders alike. Additionally, Malta ICOM Educational is committed to ongoing collaboration with the MFHEA and other partners, ensuring its sustained contribution to the higher education landscape both locally and internationally.

Response to Key Recommendations and Recommendations Made by the Peer Review Panel

Action plan		
Recommendations	Actions to be taken to address the recommendations	Date for completion
Standard 1:	Thank you for these recommendations we hope that by meeting them we can create a more inclusive, and effective governance structure within MIE.	

KR 1. Malta ICOM Educational should, within 12 months from the date of publication of this report, reconstruct committee structure: Reorganise committees to be more representative of the institution's community, ensuring diverse and inclusive participation.	Following from our External Quality Audit (EQA) in March 2024 MIE decided to comprehensively restructure both the senior management roles and update accordingly the academic structure. Leading to the following actions:	June 2025
	1. Reorganisation of Committee Structures: We reviewed the composition of the 3 main committees; the Curriculum, Standards, Student Experience Committee (CSSEC), , the Curriculum and Standards Committee (CSC) and the Quality Assurance Committee (QAC)1. We have updated and clarified their respective terms of reference. This restructuring was designed to improve efficiency and ensure alignment with MIE's academic and strategic goals2. Linking to the recommendations in MR3.	Completed
		Completed
	2. Diverse and Inclusive Participation: As part of our commitment to diversity and inclusion, each committee will now reflect a wider range of opinions. We are currently actively recruiting members. Committees are now designed to be more representative of our internal and external stakeholders, including staff, students, alumni, and professionals from relevant industries. This will ensure that a variety of perspectives are considered and incorporated into decision-making processes.	September 2025
	3. Recruitment of Committee Members: With the beginning of the new academic year, MIE is actively in the process of recruiting committee members from all parts of its community. We are involving staff, students, and external stakeholders to	

	participate in the CSSEC, , the CSC and the QAC , and the Academic Management Board (AMB).	
	4. Organisation and Presentation: To ensure transparency and clarity, the individual committee structures have been updated. This includes clear reporting lines and responsibilities, as shown in our internal documentation3. The aim is to facilitate more effective governance and decision-making processes.	

Standard 3:	Thank you for the recommendation. We acknowledge the importance of enhancing the procedure for the design and approval of programmes in line with the National EQA Framework standards.	
KR 2. Malta ICOM Educational should, within 6 months from the date of publication of this report, enhance the procedure used for the design and approval of programmes, by incorporating additional details outlined in the National EQA Framework standards, and keeping documented evidence of the meetings held in relation to this process. This revision should involve both internal stakeholders, such as students, and external stakeholders, including professional experts, clinical placement venues,	We are committed to implementing these improvements over the next six months and have taken the following actions: 1. Re-instatement of the Curriculum and Standards Committee4: Responsible for curriculum oversight, approving new programme proposals, incorporating the National EQA Framework standards and ensuring curricula meet academic and industry standards. Evaluates programmes and recommends changes to enhance alignment with institutional goals and regulatory standards. It will include representatives from internal stakeholders (faculty, administration, and students) and external stakeholders (professional experts, clinical placement venues, alumni, and representatives from the health industry).The reinstatement of the regular termly meeting of the Curriculum Standards and Student Experience Committee 5will also allow for additional scrutiny and feedback on programme creation. 2. New Programme Design and Approval Policy: We have also developed and implemented a new policy document, "Programme Design and Approval Policy and Procedures6" which is aligned with the National Quality Assurance Framework for Malta and the European Quality Assurance in Vocational Education and Training (EQAVET) standards. This policy outlines the procedures for programme design, stakeholder consultation, feedback integration, and final approval processes. Additionally, it mandates documented evidence of meetings and decisions	June 2025 Completed Completed

	made during this process to ensure transparency and accountability. 3. Documented Evidence: As per our new policy, all meetings, consultations, and decisions will be fully documented and archived electronically in a specified shared location. This will include minutes of meetings and records of feedback received from all stakeholders to ensure compliance with quality standards.	
alumni and representatives from the health industry (possible employers).		
Standard 4:	We would like to thank the review team for their valuable feedback and recommendations. We are committed to addressing these points thoughtfully and effectively, and we look forward to implementing the suggested improvements in collaboration with all relevant stakeholders.	
R 1.Malta ICOM Educational is to better schedule its examinations for the students to have enough time to prepare themselves for the examinations.	Since the end of the 2023-24 and beginning of the 2024-25 academic years the Department Managers, Programme Leaders, and AMB have worked collaboratively in reviewing and optimising the exam scheduling process. During the 2024-25 academic year we will gather feedback from students through regular student surveys overseen by CSSEC , we aim to ensure that examination timetables are student-friendly, offering ample time for preparation.	Completed June 2025
R 2. Malta ICOM Educational is to consider offering specialised modules, for students to specialise in their professional route.	Specialised modules are already offered by MIE, within the Osteopathy MSc and the elective modules in the 2024 revalidated BSc physiotherapy. We further enhance specialism in the form of extracurricular, vocational, elective, or online material in collaboration with the CSSEC and Department Managers. Continuous monitoring and updates will be facilitated by the Programme Leaders to ensure relevance to the professional market. Programme leaders will identify the addition of potential specialised delivery within existing modules in consultation with industry experts, allowing students to gain deeper expertise in their professional fields.	Completed June 2025

R 3. Malta ICOM Educational could create a centralised	In line with our ongoing commitment to enhance student support (as outlined in KR4 and MR15), the	June 2025
portal where the student can find all the relevant information.	Registrar's Office and IT Department are collaborating to improve our existing digital portal. Configure Document Storage and Access Controls Location: We intend to Store all documents in designated SharePoint libraries organised by department or project. Permissions: these have set access controls using Microsoft 365 Groups, managed by role, with periodic reviews to ensure access aligns with roles. Responsibility : Head of Academic Affairs and Quality Assurance It manager, Registrar's office . This portal will leverage our Microsoft license to provide students with easy access to essential resources, such as programme materials, schedules, and announcements, within a single, user-friendly platform. Oversight of this integration will be managed by Head of Academic Affairs and Quality Assurance to ensure alignment with our strategic goals of accessibility and improved student experience. This action also complements our work on MR6 (aligning strategic plans with QA policies), as the portal will support transparency and streamlined access to academic resources. Furthermore, it builds on our progress with MR16 (enhancing online learning provisions), providing a more cohesive digital learning environment for students7. Additionally, we have launched a dedicated webpage for applicants to provide prospective students with all necessary course information in a clear and accessible format.8 This initiative was overseen by the Head of Admissions & Recruitment and the Head of the Marketing & Communication Office, supporting our objective of clear communication channels and streamlined access to institutional information as highlighted in KR14.	January 2025

R 4. Malta ICOM Educational could create platforms where students of different nationalities can	The Vice Dean has initiated the process to join the Erasmus Programme. We looking at ways to create an action group, overseen by the Head of Marketing and Communication, to create a forum and discussion group within our existing digital infrastructure. We	December 2025
meet and exchange ideas and concerns.	already use Teams groups for student/ student and student/ staff interaction and collaboration forums effectively we are going to expand on these groups over the next academic year. This platforms will provide spaces for students from all academic programmes at MIE to exchange ideas, voice concerns, and engage in cross-cultural collaboration, fostering a more inclusive and diverse community.	
Standard 5:	We would like to thank the review team for their recommendation. We appreciate the valuable feedback and are committed to ensuring that all students receive their transcripts promptly upon completing their studies.	
KR 3 Malta ICOM Education should, within 6 months from the date of publication of this report, make student transcripts available to all students on completion of their studies.	We confirm that all students will be provided with their transcripts following their final exam board. This initiative has been implemented in collaboration with the Registrar's Office, the Board of Examiners, and the Head of Academic Affairs and Quality Assurance, ensuring alignment with our institutional quality standards.	Completed
Standard 6:	We would like to extend our sincere thanks to the review team for their insightful recommendations. We appreciate how these recommendations align with our ongoing organisational improvements and governance strategies.	

KR 4. Malta ICOM Educational should, within 6 months from the date of publication of this report, review its recruitment and selection procedure to include more specific details, ensuring consistency and	Malta ICOM Educational is committed to refining its recruitment and selection procedures, aligning them with our broader organisational goals as outlined in MR1 and MR6. Our review focuses on: Adherence to our existing Staff Recruitment and Selection Policy and Procedure9 and the Performance Enabling Policy	Completed
	Clarification of Roles and Responsibilities: We are defining the roles of HR personnel and other stakeholders involved in the recruitment process, ensuring consistency in interview protocols, application screening, and candidate selection. This	Completed

transparency of the process.	also complements our actions under MR1 (clarifying institutional roles) and MR9 (reducing role overlaps and ambiguities), supporting a streamlined and effective recruitment process3.	
	Updated Contracts and Agreements: To ensure transparency and accountability, we are formalising contracts and agreements with lecturers and clinical tutors, specifying expectations around teaching, clinical duties, and supervision10. This is in line with MR2 (formalising employment contracts) and MR20 (establishing a standardised internship system)11, supporting clear, consistent expectations for all teaching and supervisory roles.	In progress completion June 2025
	Recruitment Documentation and Paper Trail: A robust documentation process is being implemented to record all recruitment decisions, assessments, and criteria used. This strengthens transparency and aligns with MR23 (adhering to documentation standards), creating a reliable paper trail that enhances accountability throughout our recruitment practices.	Completed

| KR 5. Malta ICOM Educational should, within 2 months from the date of publication of this report, formally structure class observation through the compilation of an adequate observation form and document follow-up. | We acknowledge the importance of formalising the class observation process and are committed to implementing these changes within the specified timeframe. Our approach, in alignment with recommendations MR6 (integrating strategic and QA plans) and MR3 (involving stakeholders in QA processes), focuses on the following actions:

Institution-wide Implementation: We are increasing and standardising class observations across all faculties scheduling them within the academic calendar. This ensures regular, systematic review of teaching staff, supporting an institution-wide commitment to quality. All completed observations and appraisals will be documented, contributing to our overarching quality assurance strategy as outlined in MR6.

Use of Standardised Observation Tools: Existing observation sheets12 from our policies and procedures folder will be employed consistently. This approach aligns with MR23 (standardising documentation) by using a unified format for all class observations, ensuring evaluations are based on clear, uniform criteria across departments. | Completed |
| | Staff Appraisal13 and Follow-up Schedule: After each observation, structured appraisals will provide feedback and professional development guidance. This follow-up will be documented to create a clear development path for teaching staff, supporting MR7 (staff development aligned with institutional growth). By allowing remote follow-ups, we enhance flexibility and responsiveness without disrupting teaching schedules. | |

KR 6 Malta ICOM Educational should, within 2 months from the date of publication of this report, provide a structured systematic system for CPD for all lecturing staff.	Malta ICOM Educational is committed to implementing a structured Continuing Professional Development (CPD) programme for all lecturing and clinical staff. This initiative, aligning with MR7 (staff development strategy) and MR6 (alignment of strategic and QA plans), will ensure our teaching staff continuously enhance their skills and knowledge. To meet this recommendation, we are currently working on the following:	Done
	Collaborative CPD Development: In partnership with the Heads of Department, Department Coordinators, Programme Leaders, and HR, we are working with the Clinical Education Coordinator to design a comprehensive CPD system. This collaboration ensures that CPD activities meet the diverse professional needs of our academic team and supports the institution's growth strategy outlined in MR6.

Structured Calendar of CPD Events: A CPD calendar is being developed to provide lecturers with scheduled opportunities for both in-person and online learning. This calendar will align with our ongoing efforts in KR5 (structured class observation) by ensuring lecturers have planned development activities that enhance teaching quality14.

Documentation and Evidence of CPD: We will maintain a clear record of participation, including course bookings, completion certificates, and evidence of online activity. This documentation aligns with MR23 (document management and tracking) and ensures accountability and transparency in tracking staff development efforts. | January 2025 |

	Institutional Support for CPD Activities: Recognising the need for financial backing, Malta ICOM Educational is committed to contributing towards CPD costs where feasible, ensuring our lecturers have access to quality development opportunities. This supports MR7, which emphasises resource allocation for sustained quality and growth.	

KR 7. Malta ICOM Educational should, within 6 months from the date of publication of this report, formalise the engagement of clinical tutors/lecturers with a signed contract/agreement clearly defining the terms of reference, ensuring accountability, transparency, and effective management of teaching and clinical supervision arrangements.	We are actively working on this recommendation, building upon efforts already underway to improve our recruitment and staff management processes. This is closely aligned with KR4 (review of recruitment procedures for consistency and transparency) and supports our broader efforts to create a cohesive and structured approach to staff management. Key actions include: Clear Roles and Responsibilities: As part of the broader review of HR roles and responsibilities (as outlined in KR4), we are revising the recruitment procedure to include clearly defined roles for clinical tutors and lecturers3. This will ensure that all duties related to teaching and clinical supervision are well understood 10.This will provide clarity in expectations and align with our overarching goal to standardise our HR practices. Contracts and Agreements: In line with our recruitment improvements in KR4, we are formalising contracts for all clinical tutors and lecturers. Each contract includes a clear terms of reference, detailing responsibilities and performance expectations to ensure accountability and transparency. These formal agreements support a structured and professional engagement process. Documentation and Consistency: To support transparency and accountability across all processes (a focus in KR4 and MR23), we are implementing a detailed documentation trail. This will cover recruitment stages, contract formalisation, and ongoing responsibilities, ensuring that our engagement with clinical tutors and lecturers remains clear and consistent.	In progress June 2025 Done

	Review of Roles and Compensation: As part of our ongoing staffing review (also linked to KR4 and the salary review considerations in MR7), we are evaluating roles and compensation for clinical tutors and lecturers. This may include role adjustments or salary modifications to ensure alignment with newly formalised expectations and to maintain staff support and motivation.	In progress May 2025

KR 8. Malta ICOM Educational should, within 12 months from the date of publication of this report, provide more opportunities and support teaching staff to engage in research and scholarly activities.	We are committed to expanding the opportunities for teaching staff to participate in research and scholarly activities14 . We are organising prerecorded sessions that will be released weekly to all academic staff at MIE over the course of April, May, and June 2025, ensuring broad accessibility and structured progression throughout the programme. This aligns with KR6, integrating research into our CPD framework. Key actions include: Research and Erasmus Initiatives: In conjunction with efforts to comply with MR8 (establishing clear leadership responsibilities) and MR9 (clarifying roles within academic leadership), the Vice Principal and Vice Dean are developing research initiatives tied to Erasmus collaborations. This aligns with our goals for structured academic leadership and provides clear roles and opportunities for staff to engage in joint research projects. Structured CPD and Research Support: Consistent with MR7 (long-term strategy for maintaining quality2), we are including research and scholarly activities in the structured CPD plan for teaching staff (KR6). This ensures a comprehensive approach to quality that incorporates ongoing academic and professional development. Support for Research and Staff: In support of MR20 (standardising staff roles and responsibilities in teaching and clinical supervision), we are also standardising the allocation of resources and incentives for research activities. This ensures transparency and accountability in managing staff roles and recognises their contributions to research alongside teaching and clinical duties.	In progress December 2025 In progress December 2025 December 2025 December 2025

	Monitoring and Evaluation: In line with MR26 (establishing action plans for programme reviews) and MR27 (increasing student and stakeholder participation5), we are incorporating regular feedback and monitoring processes for research activities. This includes tracking progress in scholarly engagement and collecting feedback from staff on the effectiveness of research support structures.	
R5. Malta ICOM Educational could have a recorded formal procedure for the onboarding of all new teaching/clinical tutors, to enhance effectiveness, efficiency and consistency within the institution.	Malta ICOM Educational is committed to improving the onboarding experience for new teaching and clinical tutors. In response to R5, we have implemented a formalised induction process that supports consistency and transparency across all faculties15. This onboarding process integrates several key elements: Structured Induction Programme: We have developed a standardised induction programme that includes yearly CPD opportunities and a mentorship or buddy system. This programme is designed to ensure that all new teaching and clinical staff have access to resources and support as they adapt to their roles16. This aligns with the CPD initiatives discussed in KR6, providing new staff with continuous professional development from the outset. Consistency Across Roles and Contracts: The induction process includes clear, standardised materials that ensure alignment with role clarifications and expectations set forth in KR7. This approach standardises the integration of new staff, linking back to the recruitment improvements under KR4, which focus on defining responsibilities and enhancing transparency across all staffing levels.	Completed Done
Standard 7:	We thank the review panel for the recommendation	

R6: The institution could install a good ventilation system for their venues to circulate air.	We acknowledge the importance of improving air circulation in our venues. We are currently reviewing options to install an effective ventilation system that meets both health and safety standards while ensuring a comfortable learning environment. This will contribute to the overall	September 2025

	well-being of staff and students and align with our commitment to maintaining high-quality facilities.	
Standard 8:	We would like to extend our sincere thanks to the review team for the valuable recommendation in KR9. The appointment of the academic registrar will be crucial in ensuring effective information management and consistent document oversight.	

KR9: Malta ICOM Educational shall, within twelve (12) months from the date of publication of this report, actualise the role of an academic registrar as described in the SAR. This position is crucial for overseeing information management functions and maintaining an academic registry, thereby ensuring consistent and effective document management.	We are pleased to confirm that we have at the present time appointed an assistant academic registrar17 and are in the process of recruiting a Registrar. We have established the Registrar office which plays a central role in managing information processes and maintaining the academic registry, ensuring that document management is both consistent and efficient. Actions: Establishing a Consistent Records Management System: The Registrar Office will oversee the accuracy and consistency of student records, institutional documents, and information management20. This aligns with our broader objectives from KR4, where we aimed to standardise contract documentation for clinical and teaching staff, promoting transparency and accountability across all departments. Enhancing Information Management: The registrar's role will be integral to reinforcing comprehensive information governance18. By working closely with relevant departments, the registrar will ensure that documentation for recruitment, onboarding, class observations, and CPD activities are maintained systematically. These actions directly fulfil the requirements outlined in KR5 and KR6, ensuring that information related to staff and academic processes is accurate and accessible. Improving Document Management Standards: With the registrar's office in place, we are committed to ensuring that institutional documents are managed to the highest standards. This includes establishing clear processes for data handling, storage, and retrieval19 as per MR20 and MR21.	September 2025

Standard 9:	We would like to extend our sincere thanks to the review team. We are confident that these improvements will strengthen our institution's commitment to transparency, consistency, and quality in both academic and administrative functions.

KR10.Malta ICOM Educational should, within 3 months from the date of publication of this report, ensure consistent branding on its website and on social media platforms.	This effort is already underway, with new guidelines for visual and messaging consistency being applied across all public-facing content This process it is being led by the Head of Marketing and Communication and QAC . Their teams will ensure consistent branding across all platforms, aligning with our ongoing efforts for transparency and consistency, as highlighted in KR4. https://icomedicine.com/en/home-en/ Stakeholder Engagement and Accessibility: Consistent branding will improve accessibility and aligns well with KR3 and MR27 by reinforcing a professional and user-friendly interface on our centralised student portal. The more cohesive design and organisation of information will make it easier for stakeholders to navigate and access essential resources.	In progress January 2025:
KR11. Malta ICOM Educational should, within 6 months from the date of publication of this report, create a standardised template for presenting information about each course or programme offered by the institution.	To meet KR11, we have initiated the development of a standardised template for presenting comprehensive information about each programme offered by Malta ICOM Educational. This project is led by the Head of Marketing and Communication, ensuring alignment with our broader branding and transparency goals. Template Design and Content Standardisation: We are in the process of creating a detailed template that will cover all essential information in a consistent format, including learning outcomes, course structure, assessment methods, costs, clinical training, CPL, and Professional Recognition. This template is designed to make it easier for prospective students to access all relevant details at a glance. https://www.icom-kine.fr/transparence/ Collaboration for Accuracy and Consistency: The template is being developed in collaboration with academic departments to ensure that all information is accurate. This step ensures	January 2025

	consistency across all programmes, aligning with KR4 and KR7 by formalising how we present programme details.	
	Integration with Branding Standards (KR10): We will ensure that the design and presentation style align with our updated branding standards as outlined in KR10, reinforcing a cohesive institutional identity across all communication platforms.	
KR12: Malta ICOM Educational should, within 6 months from the date of publication of this report, publish the pass rates for all courses.	We have now compiled pass rate data from previous programmes. https://icomedicine.com/vision/ We have gathered pass rate data for all courses, ensuring accuracy and relevance. This process involved close collaboration between the academic departments and the Registrar's office to guarantee that all figures are up-to-date and reflect actual outcomes. The pass rates will be integrated into our standardised course information templates (as per KR11) and shared on our website, ensuring that this information is easy to find for all stakeholders. Ongoing Updates: Pass rate data will be updated annually to reflect the latest information, maintaining consistency with our broader transparency goals.	Completed
KR13 Malta ICOM Educational should, within 3 months from the date of publication of this report, provide a clear statement in an easily accessible area on the website, as indicated in the online report of the MFHEA, regarding the positioning of Malta ICOM Educational courses concerning	To address KR13, Malta ICOM Educational has reviewed and updated the statement regarding the accreditation and regulatory position of our courses, ensuring it aligns with MFHEA guidelines. This statement clarifies the distinction between academic accreditation and professional recognition, providing prospective students and stakeholders with an accurate understanding of our programmes' standing within Malta's regulatory framework. The updated statement, which reads: "While the academic qualification has received accreditation from the Malta Further and Higher Education Authority, it is important to highlight that accomplishing the programme successfully does not inherently grant professional recognition. However, it does provide graduates with the opportunity to	Completed

the regulatory body of Malta.	seek registration with the Council for Professional Complementary to Medicine (CPCM) in Malta" . This statement will be prominently displayed on our website's transparency page, ensuring that prospective students and other stakeholders can easily access this critical information. DENTAL HYGIENE – MIE – Bachelor of Dental Hygiene (icomedicine.com) OSTEOPATHY - MIE Malta Icom Educational (icomedicine.com) Degree in Physiotherapy	Become a Physiotherapist (icom-fisioterapia.it) MIE – Malta Icom Educational (icomedicine.com) Additionally, this action is aligned with our broader commitment to transparency and consistency across our communications, as highlighted in KR10 (branding consistency) and KR11 (clear programme information).	
R7. Malta ICOM Educational could consider improving the user interface of the Malta ICOM Educational website to make it more user-friendly and intuitive to use.	We appreciate the recommendation and are reviewing the website's user interface as part of our ongoing efforts to ensure consistency and accessibility across all platforms. This aligns with the work outlined in KR11 on standardising programme information presentation and KR13 on publishing regulatory compliance details clearly.	September 2025
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Standard 10:	We would like to express our sincere thanks to the review team for the valuable recommendations .The feedback has been instrumental in guiding our efforts to improve institutional oversight, programme evaluation, and quality assurance processes.	

KR 14. Malta ICOM Educational should, within 12 months from the date of publication of this report, address the lack of an institutional perspective in programme reviews by establishing a centralised system of documentation	To meet this recommendation, we are implementing a Centralised Documentation System20, serving as a unified repository for all key documents, including meeting minutes, review reports, and action plans. Oversight for this system is provided by the Registrar's Office and the QAC, with specific responsibilities assigned to the Registrar and the Dean. The Registrar18, as part of our institutional governance efforts (KR9), will ensure the proper centralisation and organisation of all documentation. Additionally, the Dean of Faculty will coordinate input from diverse academic and	September 2025
and feedback that includes input from a broader range of institutional representatives and stakeholders.	faculty members, while external advisors will be able to review and provide valuable feedback. The Centralised Documentation System will support actions taken in response to MR23 (consistent document management protocols), ensuring that all programme reviews and records are accurately labelled, dated, and consistently maintained. By broadening the range of stakeholder input and reinforcing document consistency, we aim to enhance the transparency, quality, and accountability of our programme reviews. This aligns with our commitment to consistent branding and communication, as indicated in KR10, ensuring that the institutional perspective is well-represented across all academic and administrative processes.	

| KR 15. Malta ICOM Educational should, within 6 months from the date of publication of this report, improve the presentation and utilisation of external examiner reports, ensuring they are discussed within the appropriate committees and are part of the institutional quality assurance process. | Before the EQA, the handling of External Examiner (EE) reports was inconsistent, and it was often unclear whether the feedback from these reports had been fully integrated into programme reviews. Recognising this as a critical area for improvement, we have since developed and implemented a standardised template for EE reports, ensuring uniformity in presentation and content across all programmes. This template also includes guidelines for both examiners and programme leaders, outlining expectations and key areas for feedback, in line with the enhanced documentation practices we initiated in KR4 for recruitment and documentation management.

To ensure these reports are embedded in our quality assurance framework, we have mandated that all EE reports be systematically included in the agendas of the CSC and AMB meetings and not solely exam boards, as part of our broader committee structuring efforts outlined in MR25 and MR26. This ensures that external feedback is discussed at the institutional level and incorporated into programme evaluations, further supporting our goals in KR14 to bring a consistent institutional perspective to programme reviews.

Review and Feedback Cycles: We are developing cycles where EE reports can feed directly into CPD planning for teaching staff, supporting the objectives in KR6 to offer structured professional development opportunities. These feedback cycles also align with our commitment in KR11 to provide | March 2025 |
|---|---|---|
| | comprehensive information about our courses and their academic standards.
Regular Review Cycles: Over the next few months, we will establish a schedule of review cycles for EE reports, incorporating them into annual programme reviews, ensuring the integration of EE reports within the quality assurance framework. | |

| KR16. Malta ICOM Educational should, within 6 months from the date of publication of this report, create a system to generate objective institutional oversight, possibly through an independent body or enhanced internal audit mechanisms, to ensure that programme quality is evaluated from an institutional perspective, not just at the programme level. | To address KR16, MIE is implementing a robust framework for institutional oversight, ensuring that programme quality is rigorously evaluated from an institutional perspective. Building on our recent organisational reviews and quality enhancements, we have already taken significant strides in this direction:

Comprehensive Organisational Review: We have restructured our academic and governance frameworks, including establishing a governing body and formalising the roles of staff with clear contracts (linked to KR4, KR7). This overhaul provides a strong foundation for institutional oversight and transparent management across the organisation.

Website & Digital Compliance Review: Our website and GDPR compliance were reviewed recently, led by our GDPR/POD review team and the website development team, to ensure user-friendly access to information and adherence to regulatory requirements. These changes contribute to transparency and are aligned with KR10 (branding consistency) and R7 (user-friendly interface).

Enhanced Documentation & Centralised System: In line with KR4, KR5, and KR9, we have centralised documentation processes, creating standardised templates for recording and tracking actions. This system is managed by the Academic Registrar's Office ensuring consistent, accessible records that support quality assurance and transparency.

Implementation of Regular Audits: We are initiating regular annual internal reviews to assess quality adherence and institutional practices. This includes tracking the effectiveness of actions taken in response to programme reviews. To enhance objectivity, in the mid-term of our EQA cycle we plan to bring in independent auditors to provide a | Completed |

	third-party perspective, reinforcing accountability and institutional quality standards. Digital Audit Tracking System: Building on our GDPR review and document management improvements (as outlined in MR21-24), we are implementing a digital tracking system for institutional audits. This tool will streamline oversight by offering real-time monitoring and reporting on quality assurance activities across all programmes. Stakeholder Engagement & Structured Feedback: In alignment with KR5 and KR13, we have formalised stakeholder input from students, alumni, and external partners. This input will be a core component of our programme evaluations and quality improvements, allowing for diverse perspectives that enhance our institutional review process. Continuous Staff Development: Supporting KR6 and KR15, we are rolling out professional development and training sessions for staff involved in quality assurance. standards effectively.	
Standard 11:	Thank you for this recommendation

R 9. Malta ICOM Educational could reflect on how it presents information relevant to cyclical external quality assurance	We are currently reviewing how information related to cyclical external quality assurance is presented, ensuring that it is clear, accessible, and comprehensive. This initiative is part of our ongoing commitment to transparency and effective documentation, as outlined in previous actions: Centralised Documentation System: Building on KR4 (formalising documentation practices) and KR11 (standardising programme information presentation), we are implementing a centralised system for storing and organising quality assurance documents. This system, managed by the Registrar and accessible through upgraded Microsoft tools, allows us to maintain accurate, consistent records for both internal and external review processes. Enhanced Use of Microsoft Tools: In line with KR10 and MR21-24, we are leveraging advanced features	September 2025
	within our Microsoft suite to secure and organise documents, ensuring that all quality assurance data, including reports, evaluations, and assessments, is systematically stored and easily retrievable. This supports efficient oversight and facilitates compliance with external quality standards. Quality Assurance Committee and Registrar Collaboration: The Quality Assurance Committee, working closely with the Registrar and Senior Management Team (SMT), will oversee the structured presentation of all cyclical quality assurance information. This collaboration ensures that quality data is presented comprehensively and transparently, reinforcing our commitment to high standards of external accountability. Alignment with Stakeholder and Regulatory Expectations: Reflecting on KR13 (regulatory information) and KR5 (onboarding of teaching staff), we are refining how we communicate key quality assurance details to align with MFHEA and other external bodies' expectations. This includes clear statements on our website and centralised access points for stakeholders to review quality assurance cycles and results.	

Response to Mandatory Recommendations Made by the Peer Review Panel

Action plan		
Mandatory recommendations	Actions to be taken to address the recommendation	Date for completion
Standard 1	We would like to extend our sincere thanks to the External Quality Assurance (EQA) panel for their insightful recommendations regarding Standard 1. These recommendations have provided valuable guidance, and we are committed to integrating them into our ongoing improvement efforts.	

| MR1. Malta ICOM Educational shall, within 12 months from the date of publication of this report, implement a structured framework to define roles and responsibilities clearly, to eliminate overlap. | Relevant Evidence will be in Folder Standard 1.

One of the most pressing issues identified during the audit was the clear lack of clarity regarding senior roles and responsibilities within our institution, which led to inefficiencies and accountability gaps across departments. To address this, we conducted a thorough review of all positions within the institution from April 2024 to July 224, aimed at eliminating replication and ensuring that every role was contributing effectively to the institution's mission. We have created a new structure for our SMT alongside a new a Terms of Reference (ToR) for the Senior Management Team (SMT)1.

As part of this process, we have worked to clearly define job descriptions and expectations across the institution. This reorganisation not only enhanced operational efficiency but also fostered a culture of accountability, ensuring that every member of staff in the academic management team was fully aware of their responsibilities and how their performance directly impacted the institutional outcomes.2

This work is aligned with the institutional reforms addressed in KR4, where recruitment and selection procedures were updated to ensure clarity in HR roles. It also complements the committee restructuring carried out under KR1, which helped create a more diverse and inclusive management structure.3

To ensure transparency, the updated roles and responsibilities will be documented in our centralised documentation system being developed under KR14, ensuring that role definitions are easily accessible and regularly updated as necessary. | June 2025

Done

Done |

| MR2: Malta ICOM Educational shall, within 12 months from the date of publication of this report, formalise employment contracts by developing comprehensive contracts for all parties, including clear descriptions of roles, expectations, and deliverables. | The process of formalising employment contracts is currently underway. We are developing and implementing formal employment contracts for both academic and management staff recognising the importance of legal compliance and clear communication. These contracts will include clear, detailed descriptions of roles and performance expectations for each position. This ensures staff clearly understand their responsibilities and that professional relationships are managed transparently and fairly.
By formalising these agreements, we are fostering a culture of mutual respect and accountability, which in turn contributes to the overall effectiveness and integrity of our institution.

This initiative builds on our broader efforts to establish a structured framework for roles and responsibilities, as outlined in MR1, where we focused on eliminating overlapping roles and clarifying responsibilities across the institution.

The Senior Management Team (SMT) and the HR Manager are overseeing the drafting of these contracts to ensure alignment with our institutional mission and goals. This ties into the work on developing a centralised documentation system, as referenced in KR14, which will store and manage these contracts, allowing for easy access and regular updates as necessary. | June 2025 |

MR3. Malta ICOM Educational shall, within 12 months from the date of publication of this report, establish a structured process for student and stakeholder involvement in QA procedures to ensure a broad range of perspectives is considered..	We understand from the findings in the EQA report that Quality Assurance (QA) cannot be achieved in isolation it requires input from a diverse range of stakeholders. Recognising this, we have introduced a structured process that facilitates the recruitment and active participation of students, faculty, and external stakeholders in our QA activities. To support this, we have reinstated the Curriculum, Standards, Student Experience Committee (CSSEC), the Curriculum and Standards Committee (CSC)3 and the Quality Assurance Committee2all with new terms of references. These Committees directly addresses MR3 by creating a structured process for broad-based participation in QA procedures. These committees will facilitate the inclusion of diverse perspectives by engaging students, faculty, and external stakeholders in curriculum review and academic standards evaluation.4 This initiative also connects with our efforts in KR1 and KR15, where we restructured committees to ensure greater stakeholder participation and broadened external	September 2025
	input in institutional quality reviews. Regular feedback sessions and meetings are already in the academic calendar .	

| MR4: Malta ICOM Educational shall, within 12 months from the date of publication of this report, strengthen committee relations and create a clear organisational chart and terms of reference to delineate the relationships and hierarchies between committees. | The EQA report highlighted that prior to its findings, Malta ICOM Educational had too few committees to effectively manage its governance and decision-making processes. This led to inefficiencies , a lack of clarity regarding responsibilities and a lack of diversity in the decision making. Effective governance is contingent upon a clear and transparent committee structure. Recognising this, we have undertaken a review and restructuring of the CSC and reinstated the CSSEC both with new terms of references3 with clearly define roles, responsibilities, and reporting lines. This initiative is currently underway, with the design of a detailed organisational chart that outlines the relationships and hierarchies between different committees4.

This process builds our actions to KR1, where we restructured the senior management roles and committees to promote greater diversity and inclusion, and to KR4, where we focused on clarifying roles and responsibilities to eliminate overlap and ensure accountability.

The Academic Management Board (AMB) and Senior Management Team (SMT) will oversee the completion of this organisational chart and the distribution of the terms of reference. These efforts align with our commitment to transparent and effective governance, ensuring that all committees function efficiently and are well-coordinated across the institution. | January 2025

September 2025 |
| MR5. Malta ICOM Educational shall, within 12 months from the date of publication of this report, provide oversight of all subcontracted activities and introduce a transparent system to monitor and report QA for subcontracted services, ensuring | The EQA highlighted inconsistencies between our programmes in how internships and subcontracted services were monitored. This lack of uniform oversight could lead to variations in the quality and outcomes of these external placements, particularly in relation to clinical placements and other subcontracted activities.

To address this, we are implementing a transparent system for monitoring and reporting on all subcontracted services. This system will ensure that every subcontracted activity, including internships, meets our own institutional QA standards. The oversight of this is with the Head of Clinical Education and the Clinical Education Co-Ordinators for clinical education matters | September 2025 |

they meet institutional standards.	and the IT manager for technology based issues , both working with the QAC.5		
	The new QA monitoring system will involve regular audits, performance evaluations, and compliance checks across all programmes, ensuring that subcontracted services adhere to the same rigorous standards, regardless of the programme. This ties into our efforts under KR16 and KR14, where we are enhancing institutional oversight and adherence to quality standards through annual reviews.		
	Additionally, we are conducting a thorough review of our storage facilities' compliance with GDPR regulations6, ensuring that all data related to subcontracted services— particularly student and external stakeholder information—is securely managed and in full compliance with data protection laws. We have created a new GDPR policy and Compliance Acknowledgment Form7 for inhouse use and for Third-Party Service Providers and External Contractors in collaboration with our newly appointed Data Protection Officer (DPO).This complements work on KR14, where we are improving the documentation and storage of key records in line with QA8.		
	The Head of Clinical Education, the Quality Assurance Committee , Registrar and DPO will oversee these efforts, ensuring consistency and alignment with the broader institutional goals of transparency and compliance, as highlighted in KR16, where we are improving institutional oversight and ensuring adherence to quality standards.		
	By formalising this QA system and ensuring GDPR compliance, we are addressing the gaps identified in the audit and reinforcing the integrity of our programmes, maintaining the high standards of performance, accountability, and data security across all subcontracted services.		

MR 6. Malta ICOM Educational shall, within 12 months from the date of publication of this report, integrate strategic plans and align the strategic plan with the QA policy and the QA plan to ensure	A critical component of institutional growth is ensuring that strategic planning and QA are aligned. The EQA report highlighted a disconnect between the MIE strategic plan and the understanding among staff and stakeholders of its purpose and direction. To address this, we are updating and adapting our strategic plan9 and risk register10 to reflect the findings of the EQA report. This adaptation ensures that our strategy is informed by external recommendations and now closely aligned with the institution's long-term QA policy.	September 2025

cohesive and directed institutional growth.	We are currently reviewing and integrating strategic plans to ensure alignment with both the QA policy and the QA plan. This process will guarantee that all departments work collaboratively towards common goals, with QA acting as a guiding principle in enhancing our academic provisions, student services, and administrative operations. The Senior Management Team (SMT), in collaboration with the CSSEC, is responsible for overseeing this alignment. This integration will also address the disconnect identified in the audit, ensuring that objectives are effectively communicated to all involve so they understand the strategic plan and how it informs roles and contributions to MIE institutional growth. These efforts build on actions outlined in KR16, which focused on improving institutional oversight and aligning internal processes with quality standards.	

| MR7. Malta ICOM Educational shall, within 12 months from the date of publication of this report, plan for quality maintenance by developing a longterm strategy for maintaining quality that scales with institutional growth, including resource allocation and staff development. | Quality maintenance is an ongoing challenge, particularly in an institution like MIE that has grown and evolved rapidly over the last 6 years. The EQA report identified a lack of formalised forward planning. This could be partly due to the rapid expansion of MIE and also the challenges posed by the COVID-19 pandemic. We are now actively addressing this shortcoming through the development of a long-term strategy that will ensure quality is maintained that is scaled alongside institutional growth. This response is linked to MR6 by ensuring that the strategic plan9 incorporates clear benchmarks for quality assurance, directly influencing our long-term planning and operational efficiency.

The strategy, includes provisions for:

Resource allocation: Ensuring resources are effectively scaled and allocated across all departments to support the institution's growing needs.
KPI: Increase annual budget allocation for departmental resources by 10% to support enhanced learning environments and technological upgrades.

Staff development: Building on the staff development KR4 and KR15, we have begun to formalising staff CPD and implementing staff mentorship and buddy systems.

These initiatives are being expanded and tracked to ensure our growing staff body has the necessary support, | September 2025 |

| | training, and opportunities for professional development in line with institutional growth.

This response links into KR16, by improving institutional oversight to ensure quality standards are consistently met, and ties with MR6, in ensuring our strategic plans are cohesively aligned with our QA goals.

The Senior Management Team (SMT), together with the Quality Assurance Committee and the HR Department, are responsible for the development and implementation of this strategy. Their leadership ensures that resource allocation and staff development are at the forefront of our planning to maintain and enhance quality as we grow. | |

Standard 2	We would like to express our thanks to the EQA panel for their recommendations under Standard 2, specifically MR8 to MR14. These recommendations have been invaluable in guiding our efforts to enhance leadership, governance, financial transparency, and organisational clarity. Each recommendation has helped us take significant steps toward aligning our operational procedures with best practices, ensuring our institution continues to grow with a strong foundation of accountability and strategic oversight. Financial integrity is a non-negotiable aspect of institutional governance. In response to the audit, we have taken immediate steps to address all identified financial compliance issues. These actions demonstrate our commitment to financial transparency and accountability, which are essential to maintaining the trust of our students, staff, and external stakeholders.	
MR8 Malta ICOM Educational Ltd shall, within 3 months from the date of publication of this report, produce an action plan detailing how it will establish clear procedures to ensure that leaders are fit for purpose. Such a plan will define and document the roles and responsibilities of all leadership positions, provide clear evidence of the Board of Directors' oversight and strategic	As a relatively young academic institution, Malta ICOM Educational is still developing its academic maturity and understanding of EQA processes and their long-term implications. This relative inexperience may have contributed to initial gaps in leadership roles and a lack of clarity in the governance structures. However, the institution is committed to addressing these challenges as part of its growth trajectory.

The Head of Recruitment will now be responsible to ensure that leaders are fit for purpose based on the requirements agreed on a yearly basis (prior to the commencement of each academic year) with the AMB together with the department leaders and thereafter report to the SMT on a regular basis every six months about the attainment and maintenance of such standards by the various leaders. | January 2025

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guidance, ensure minutes of all meetings (BoD, SMT, AB, CSSEC) are recorded and accessible, and demonstrate how strategic decisions involve internal stakeholders.	The action plan we are producing under MR8 builds on the internal reorganisation4 highlighted in KR1 and KR4, where leadership roles within academic and administrative teams were clarified. This plan will formalise the changes by ensuring all leadership positions, such as those outlined in the Academic Management Board (AMB) and Senior Management Team (SMT), are well-defined, with clear accountability measures in place. The ToR for the SMT11 have also been reviewed and updated.

We will also update the ToR of the Board of Directors (BoD), ensuring they play an active role in providing strategic guidance. To promote transparency, minutes from all key strategic meetings—BoD, SMT, Academic Board (AB), and all committees will be accessible to internal stakeholders, reinforcing the importance of inclusive decision-making and accountability.

A notable development is the enhancement of the role of the Company Secretary who will now act as a point of contact amongst different committees and the Board of Directors by ensuring alignment with the BoD's strategic objectives in a third and impartial manner thus avoiding any conflict of interest with any other role or function within the company. This will ensure a clear separation between operational leadership of the SMT and strategic oversight of the BoD. The Company Secretary will ensure that each body is informed in a timely manner at least once a month (or more often if so required) of all discussions and decisions taken by the BoD and different committees.

Information will be shared amongst different committees and BoD in a circular manner and upwards so to allow the BoD to be aware of decisions being taken at lower ranks and meanwhile ratifying (if needed) decisions adopted. This will further allow the BoD to provide constant and strategic guidance downwards and address any deficiencies which might arise from time to time.

The Company Secretary will be dealing with the preparation of each and every meeting, define the Agenda, take minutes of such meetings, make sure that action points adopted are followed up in a timely manner and update other committees and Board of |

		Directors about their progress. The Company Secretary will therefore become the liaison between various committees in order to ensure a flow of information between topmost committees and the Board of Directors.	

	Key actions already underway include: • Defining leadership roles and responsibilities across the institution, building on KR1 and KR4. • Ensuring oversight mechanisms are robust, with the BoD overseeing strategic decisions while leaving daily operational matters to the SMT. • Documenting oversight by the BoD, with transparent processes for recording and distributing minutes from BoD, SMT, AB, and CSSEC meetings to all internal stakeholders. • Recruiting independent members and industry experts to provide objective advice and ensure that decision-making aligns with best practices in governance and industry standards. The adoption of such decisions reflects the institution's evolving academic maturity and a stronger understanding of the EQA process. As a relatively young institution, we are now better positioned to formalise our leadership structures and governance frameworks, ensuring that the Board's strategic oversight is clearly delineated from dayto-day operational management. This action plan reflects our growing understanding of the EQA process and its critical importance to institutional development. The institution is now better equipped to implement mechanisms for strategic leadership oversight and to involve internal stakeholders in these processes, addressing gaps identified in previous audits. These actions build on the organisational presentation and existing response to external recommendations, further aligning governance structures with the institution's mission and long-term goals. By formalising these roles and responsibilities, we are not only addressing the audit's findings but also ensuring that our leadership is equipped to guide the institution towards sustainable academic growth.	

MR9.Malta ICOM Educational Ltd shall, within 6 months from the date of publication of this report, revisit and clearly outline and communicate the organisational	The audit identified several ambiguities in our organisational structure, particularly concerning academic leadership and the fluidity of titles. In response, we are revisiting the entire organisational structure to ensure that roles and responsibilities4 are clearly outlined and communicated to all stakeholders. This review is underway and aligns with the broader restructuring initiated under KR1 and KR4. Key actions include:	March 2025

structure, including all roles and their responsibilities, and ensure there are no overlapping roles that could lead to conflicts of interest or inefficiencies. Additionally, the high level of fluidity around titles and responsibilities must be addressed and critical positions like Deans and Heads, have clear academic leadership functions.	Clarifying roles: We are ensuring that critical academic positions, such as the Dean, Vice-Dean of Faculty, Heads of Department, and Programme Leaders2, have clearly defined leadership functions that support the effective management of their respective faculties, departments, and programmes. This will prevent any overlap or conflicts of interest between roles and promote a more streamlined organisational framework. Removing role overlap: To avoid potential conflicts of interest or inefficiencies, the review process focused on eliminating overlapping roles across both academic and administrative teams, ensuring each position has a distinct function. Addressing fluidity of titles: The fluidity around titles and roles identified in the audit has been addressed by formalising titles and leadership structures, particularly in academic areas. This step ensures academic leadership roles are well-defined and aligned with the institution's long-term goals for faculty and departmental management. Once the updated structure is finalised, it will be communicated to all relevant stakeholders, ensuring transparency and promoting better collaboration within the institution. This revised structure will also reflect changes initiated in our efforts to strengthen leadership accountability under KR1 and MR4, reinforcing the governance frameworks and ensuring a consistent approach across all leadership levels. The responsibility for overseeing the review and communication of the new organisational structure lies with the Senior Management Team (SMT) and HR Department, in consultation with the Academic Management Team. This process ensures that both academic and administrative functions are managed with clarity and integrity, thereby fostering a more cohesive and efficient working environment.	

MR10. Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, submit the separate audited financial statements	We are pleased to confirm that the audited financial statements12 for 2023 have been successfully submitted in compliance with the specified deadline. This submission includes the separate financial statements for Malta ICOM Educational Ltd as per the request.	Done
for 2023 of Malta ICOM Educational Ltd or the consolidated financial statements of Novétude Malta Ltd.		
MR11. Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, submit a tax compliance certificate for Novétude Malta Ltd.	We are currently awaiting confirmation on whether a tax compliance certificate can be accepted with pending tax returns showing as due, as the audits of Novétude Malta Ltd are still in progress. Once the audits are finalised, any pending tax return submissions will be promptly filed to ensure full compliance. We remain in communication with the relevant tax authorities to confirm the procedure for issuing the compliance certificate under these circumstances.	December 2024
MR12: Submission of Audited Financial Statements for 20202022 Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, ensure that the audited financial statements of Malta ICOM Educational Ltd for the three years, 2020-2022, are duly presented and uploaded on the portal of the Malta Business Registry.	We confirm that the audited financial statements for Malta ICOM Educational Ltd for the years 2020-2022 have been successfully uploaded on the portal of the Malta Business Registry13 within the required timeframe.	Done

MR13 Malta ICOM Educational Ltd shall, within 2 months from the date of publication of this report, ensure that the annual return for 2023 of Malta ICOM Educational Ltd is presented and uploaded on the portal of the Malta Business Registry.	We confirm that the annual return for 2023 of Malta ICOM Educational Ltd has been successfully presented and uploaded on the portal of the Malta Business Registry14 within the required timeframe.	Done
MR14 The annual return for 2023 of M-	We confirm that the annual return for 2023 of M-Five Holdings Ltd. has been duly corrected, presented, and	

Five Holdings Ltd. shall be duly corrected, presented, and uploaded on the portal of the Malta Business Registry within 2 months from the date of publication of this report.	uploaded on the portal of the Malta Business Registry15 within the required timeframe.	
Standard 3	We would like to express our sincere thanks for the recommendations outlined in MR15 and MR16 under Standard 3. These recommendations have given us a clear path to strengthen both our clinical placements and our online learning offerings.	

| MR15. Malta ICOM Educational shall request immediate approval by the MFHEA for additional clinical internship venues, and update licensing conditions to reflect the centres which are used for activities related to the programmes offered by Malta ICOM Educational | We appreciate the recommendation regarding the approval of clinical internship venues. Although our internship sites are already listed within each programme application, and approved as internship sites by their local authority, we have taken proactive steps to ensure compliance and address the points raised in the audit.

Specifically, we have:
Updated the Dental Hygiene internship sites, with a revised programme application submitted to the MFHEA accreditation officer in October 2024.
Revised and updated our current teaching centres on the institutional licensing application in august 2023 to ensure full alignment with regulatory requirements.

Recognising the importance of clinical placements to our healthcare programmes, we are committed to securing MFHEA approval for any additional internship venues. This ensures that our students receive a high-quality clinical education in regulated environments that support their academic and personal development.

To ensure the effectiveness and sustainability of these efforts, we have implemented the following:

The Head of Clinical Education16 working with the Clinical Education Coordinators 17 is responsible for overseeing the submission of requests for MFHEA approval for additional internship venues, ensuring all placements meet regulatory standards and institutional goals.

The Quality Assurance Committee (QAC), in collaboration with Programme Leaders18 and the Clinical Education Coordinators, will continuously monitor the quality of all clinical placements and have created a Clinical Placement | Done |

| | Benchmark statement and Matrix19 for all departments to use . This ensures that they adhere to both regulatory standards and the quality benchmarks. The QAC will also integrate feedback from students and stakeholders to ensure continuous improvement.

Head of Clinical Education will be responsible for ensuring that all necessary licensing conditions and placement agreements are accurately documented and updated, in line with both institutional policies and regulatory requirements.

Additionally, this process complements and builds on:

KR4: Our commitment to formalising roles and responsibilities within the organisation, particularly with regard to external placements, ensuring consistent oversight and accountability.

MR8: Our development of a comprehensive action plan for leadership and strategic oversight, which includes the monitoring and quality assurance of internship venues. The SMT, together with the AMB, will provide oversight to ensure these processes remain transparent, efficient, and aligned with both internal and external standards. Through these actions, we aim to not only meet but exceed the standards expected by the MFHEA, reinforcing the integrity of our programmes and the quality of clinical education our students receive. | |

MR16. Malta ICOM Educational shall, within 3 months from the date of publication of this report, ensure that all the actions listed in the MFHEA Guidelines for QA: for online learning providers are followed and actioned.	The EQA panel identified several areas where our institution should take immediate action to meet the MFHEA Guidelines for QA regarding online learning providers. We therefore instigated a review of the online teaching and assessment activities shortly after the EQA visit these highlighted areas of possible improvement20. Specifically, the need for a dedicated managerial post for online and blended learning, continuous professional development (CPD) for academic staff, and enhanced QA monitoring were highlighted. To address these points, we have established a comprehensive plan21 that aligns with our broader institutional governance, QA systems, and strategic planning efforts, as outlined in MR8 and MR4. 1. Establishment of a Managerial Unit22 for Online and Blended Learning Responsibility: The creation of this unit will be led by Senior Management (SMT) in collaboration with the	January 2025

Quality Assurance Committee (QAC) and overseen by the Vice Dean.

Action: We created a dedicated managerial post specifically responsible for overseeing all aspects of online and blended learning from an educational standpoint.

This role will:

Coordinate online learning activities, ensuring that teaching methods, learning outcomes, and student support services align with regulatory guidelines.

Oversee the implementation of eLearning policies and integrate online learning into our broader QA framework, ensuring continuous monitoring and evaluation of these programmes.

Ensure that licensing and accreditation requirements for all online courses are met and updated regularly.

2. Professional Development for Academic Staff
Responsibility: The Human Resources (HR) department, in collaboration Programme Leaders and the Managerial Unit for Online and Blended Learning will oversee the upskilling of academic staff involved in online learning.

Action:

We will initiate CPD training programmes tailored for staff engaged in online and blended learning.

The training activities will be in added to the academic timetable, staff will be allocated time to complete the training.

Staff participation in CPD activities will be tracked and monitored, ensuring that all educators remain compliant with MFHEA guidelines. We will use this monitoring as a KPI. We will survey the staff post activity completion to continuously build on the training.

This training will be reviewed during staff appraisals.

3. Strengthening QA Processes for Online Learning
Responsibility:

This initiative will be led by the QAC, in collaboration with the Online and Blended Learning Unit.

Action:

The QA monitoring system specific to online and blended learning will be integrated into our existing QA processes, ensuring that online teaching meets the same standards as face-to-face learning.

	We will implement regular audits of online programmes, which will be conducted by the QAC and the Online and Blended Learning Unit, ensuring that student feedback,	

assessment methods, and learning outcomes are consistently evaluated.

The Online Learning Unit will ensure that best practices in online education are followed, and any gaps in the current system are addressed proactively.

4. Review and Update of Existing eLearning Policies23
Responsibility: The QAC and Head of Online Learning will work closely with SMT to ensure alignment with MFHEA standards.

Action: A full review of our policies linked to eLearning policy was conducted24 during the summer break leading to:

Complete updating of the Online Learning Policy25/Academic Integrity Policy/ E-safety policy/Learning Support Policy/ E-Learning Checklist26 . These are now aligned to the MFHEA guidelines for Quality Assurance for Online Learning Providers in Malta. The policies now include clear guidelines for teaching methodologies, staff qualifications, and support services.

Monitoring and documenting the actioning of policies occurs through regular reports submitted to the Board of Directors (BoD).

5. Integration with Existing Institutional Frameworks
Responsibility:
The Quality Assurance Committee (QAC) and the Managerial Unit for Online and Blended Learning will ensure that this initiative aligns with our broader QA efforts and reporting mechanisms, as outlined in MR4, MR8, and MR9.
The Managerial Unit will regularly report to the QAC and the Senior Management Team (SMT) on the progress of online and blended learning QA. These updates will be integrated into institutional strategic planning to ensure that all actions and policies regarding online learning are consistent with long-term institutional growth plans.

These efforts are closely aligned with other critical initiatives, such as MR6, which focuses on aligning strategic planning with QA processes, and MR7, which calls for a long-term strategy for maintaining quality

		amidst institutional growth. Additionally, this work ties into MR8 and MR9, where we are improving oversight	

	and clearly defining leadership roles across academic and administrative levels. With the continued support of the SMT, QAC, and Online and Blended Learning Unit , we will ensure that MIE remains compliant with all online learning standards, fostering an environment of academic integrity and student-centred learning.	
Standard 4	We would like to thank The EQA recommendations provided under Standard 4. The implementation of secure, consistent, and transparent systems for compiling, circulating, and monitoring exam papers will ensure the reliability and fairness of our assessments moving forward. We are committed to acting on these recommendations and ensuring that our examination processes meet the highest standards of academic integrity. Thank you once again for your guidance.	

| MR17. Malta ICOM Educational shall, within 3 months from the date of publication of this report, implement a system that is reliable and secure in terms of compiling and circulating exam papers. | To uphold the integrity of our assessment processes, we are actively implementing a secure system for compiling and circulating exam papers. After the audit we reviewed our processes and procedures relating to assessments papers in general and created an action plan27 specific to MR17/18 and created a review cycle28 . This addressed the inconsistencies noted in the audit regarding the circulation of exam papers in multiple languages and the absence of secure online monitoring tools. Additionally, we are ensuring that all exams, whether conducted online or in person, meet the required standards of fairness, reliability, and transparency29.

Actions Taken:

System Review: A thorough review of our current processes for the compilation and distribution of exam papers has been conducted during the summer recess to identify areas of vulnerability, particularly regarding translation and electronic distribution.

Data Security: We are implementing secure digital tools for distributing exam papers to prevent data breaches and ensure compliance with GDPR30 requirements. This aligns with our broader institutional focus on data protection, as addressed in KR14 and MR5.

Standardisation Across Programmes: To ensure consistency, we are standardising the process across all programmes, including Italian and French streams, with clear oversight to prevent discrepancies.

Roles and Responsibilities:
Quality Assurance Committee (QAC) & IT Department are responsible for overseeing the implementation of secure | January 2025

Done |

	digital systems for exam paper compilation and distribution. Dean and Vice Dean: Will ensure that exams are prepared in line with institutional policies and ensure a secure process for both paper-based and online exams. Heads of Department: Will collaborate to ensure consistency in the distribution and translation of exam papers across all languages, ensuring compliance with institutional QA standards. QAC: Will monitor the effectiveness of the new system through periodic reviews, ensuring that student feedback and external examiner reports are integrated into the continuous improvement of the process.	
MR18. Malta ICOM Educational shall, within 3 months from the date of publication of this report, implement a dedicated system that ensures transparent, reliable, consistent and fair examination procedures.	Following the audit recommendations, Malta ICOM Educational conducted its own internal review of the assessment process 27as stated in MR17 demonstrating that we are committed to implementing a robust, dedicated system that ensures all examinations are transparent, reliable, consistent, and fair. The examination process is being overhauled to address inconsistencies, ensuring that both online and in-person assessments adhere to high standards of integrity and security. Actions Taken: Development of Secure Exam Management System: A dedicated secure digital repository that will centralise all exam-related activities, including exam creation, secure distribution, monitoring, and grading. This system will specifically address the inconsistencies flagged during the audit regarding translated exam papers and the circulation process. Initially for 2024-25 academic year will use an enhanced Microsoft platform to ensure that both online and in-person exams meet institutional and regulatory standards, in the long term we are evaluating other platforms. This will also allow for a circulation tracking system to log and monitor the distribution and return of exam papers. Introduction of Standardised Exam Procedures28: Exam procedures will be standardised across all programmes and language streams. This includes formal processes for compiling, translating, distributing and storing exam papers, ensuring that students across different regions and languages are assessed consistently.	January 2025

Enhanced Monitoring for Online Exams: We have very few online assessments these are mainly in the form of presentation which reduces the possibility of academic misconduct. For the written assessments we are implementing secure Microsoft online proctoring tools and online monitoring systems to ensure that online examinations are conducted transparently, mitigating academic dishonesty and ensuring fairness in the exam process.

Set Up Microsoft Lists for Document Tracking: Microsoft Lists to track essential document details (title, upload date, owner, version, approval status, and review dates).

Dean and Vice Dean Oversight: Given the audit's findings about the inconsistencies in the examination process, the Dean and Vice Dean will assume direct oversight of the new system to ensure institutional standards are met.
They will:
- Oversee the implementation of the new exam management system and ensure alignment with academic goals across all programmes.
- Conduct regular reviews of exam practices, working closely with programme leaders to ensure fairness and consistency in the assessment process.
- Ensure exam procedures meet the standards of integrity, particularly regarding translation and online assessment, guaranteeing that students across different regions are assessed equally.

Roles and Responsibilities:
Heads of Departments and the Programme Administrators: Will work under the supervision of the Dean and Vice Dean to ensure that exam papers are compiled, translated, and distributed consistently across all programmes and that the procedures are implemented effectively.
Quality Assurance Committee (QAC): Will work with the Dean and Vice Dean to continuously monitor and improve the examination processes, ensuring they align with broader quality assurance goals.
Teaching staff induction and training:
Organise induction sessions are being organise for all teaching staff to familiarise them with the secure exam paper management system, including digital tools and best practices.

	Responsible parties: Programme Leaders and Administrative Staff.	

Standard 5	Thank you for your valuable recommendation.	

MR19 Malta ICOM Educational shall, within 6 months from the date of publication of this report, clearly define the signatories' names and surnames on the certificates issued.	We are pleased to confirm that the recommendation under MR19 has been fully implemented. The signatories' names and surnames on the certificates issued by Malta ICOM Educational have been clearly defined, ensuring transparency and compliance with the specified standards.	Done
Standard 6	We would like to thank the EQA for the valuable recommendation provided in MR20. The guidance has been instrumental in helping us enhance our internship programmes, ensuring they are safe, ethical, and consistent across all courses.	

MR20 Malta ICOM Educational shall, within 6 months from the date of publication of this report, establish a standardised internship system implemented across all courses offered by Malta ICOM Educational. This must undergo regular monitoring, with records maintained. This will ensure student and patient safety and minimise the potential for ethical breaches and legal issues.	We acknowledge the importance of implementing a standardised internship system across all courses offered by Malta ICOM Educational to ensure student and patient safety, and to minimise potential ethical breaches and legal issues. We have developed a comprehensive plan that aligns with our previous actions and recommendations19, specifically linking back to KR7, MR5, MR7, and MR15. Actions Taken: 1. Review and Consolidation of Internship Processes: Action: MIE conducted a thorough review of existing internship procedures31 to identify inconsistencies and areas for improvement across all programmes. In September 2024 we created an action Plan32 and created a set of KPIs to measure effectiveness33. We consolidated on KR7, where we formalised the engagement of clinical tutors and lecturers with signed contracts and clear terms of reference, ensuring accountability and transparency in clinical supervision arrangements. 2. Development of a Standardised Internship Policy: We updated our procedures to standardises internship processes. This aligns with MR5, where we introduced a transparent system to monitor and report QA for subcontracted services, ensuring they met institutional standards. 3. Review of the roles and responsibilities: Action: Head of Clinical Education and Clinical Education Co-Ordinators, to oversee the consistent implementation and monitoring of the standardised internship system. 4. Regular Monitoring and Record-Keeping: Action: Implemented an institutional system for regular monitoring of internships, with standardise detailed	June 2025

	records maintained to ensure compliance, safety, and ethical standards33&19. This will reinforce MR15, where we updated licensing conditions for all clinical internship venues, ensuring regulatory compliance. 5. Resource Allocation and Staff Development: Action: Assessed staffing needs and potential salary adjustments to accommodate the added responsibilities, ensuring the Manager of Internships role is adequately supported.	
Standard 8	We would like to extend our sincere thanks to the panel for their recommendations outlined in MR21-MR24. These recommendations have greatly assisted us in enhancing our data management protocols, GDPR compliance, and overall document security. The action points provided have guided us in making necessary improvements and ensuring we meet regulatory standards. We are committed to continuing this work and maintaining a high level of accountability across all our systems.	

MR21 Malta ICOM Educational shall, within 3 months from the date of publication of this report, expand the existing document management protocol to include detailed procedures on access and security, especially in relation to outsourced activities such as recruitment and research, to ensure data security compliance. Information on how third-party contractors manage and secure data must be documented and regularly reviewed.	We have already started the review of our practices to meet the requirements of MR21: SharePoint Security Enhancements Action Taken: Updated SharePoint to a version with better encryption and enhanced access control protocols. New Procedures: All files and documents are now sent via SharePoint instead of shared links or email attachments to ensure secure access and data protection. Creation of new Data Retention Policy34 and updated our existing Core document management policy and procedures35.linked GDPR, Maltese law, and the requirements set by the EQA. Staff induction for the new protocols is well underway. Third-Party Protocols Action Taken: Created and updated GDPR compliance protocols and forms for all third-party service providers. New Forms & Procedures7: Established agreements to ensure third parties comply with data security policies, including the handling of sensitive data. GDPR Policy Updates Action Taken: Comprehensive updates to GDPR policies30, including new procedures for data handling, consent, and third-party management8. Ongoing Staff Training Action Taken: Rolling out mandatory GDPR and SharePoint security training for all staff during the current academic term. Focussing on secure data handling,	January 2025

	updated SharePoint protocols, third-party compliance procedures, and GDPR awareness8. We will ensure 100% staff completion by the end of the term and implement refresher courses annually to keep staff updated on best practices. DPO Audit The Data Protection Officer (DPO) is currently auditing all data management processes, including third-party compliance and document sharing practices. We have already adjusted our policies and procedures following on from the DPO advice. The DPO will conduct regular follow-up audits to ensure compliance. We will use the percentage of documents processed within compliance standards as a KPI.	

MR22 Malta ICOM Educational shall, within 3 months from the date of publication of this report, revisit practices involving the potential for user monitoring without explicit consent. The College must establish clear policies in accordance with GDPR, ensuring that explicit consent is obtained before any monitoring activities are conducted	We have already started the review of our practices to meet the requirements of MR22: Actions Taken: Policy Development: A new policy on user monitoring has been drafted, outlining clear protocols for data protection and consent in accordance with GDPR6 Protocol Creation: A detailed protocol7 is being developed and implemented to govern user monitoring practices, specifying when and how monitoring can take place and ensuring that explicit consent is obtained from all users. DPO Appointment: A Data Protection Officer (DPO) has been appointed to oversee all data protection practices, including compliance with user monitoring policies. Service Review: The DPO is currently reviewing all user monitoring services8 to ensure they are in full compliance with GDPR regulations, identifying any gaps in the current practices.	Jan 2025 in progress
MR23 Despite the SAR's outline of a detailed document management protocol, its application appears to be lacking. Malta ICOM Educational shall, within 3 months from the date of publication of this report, strictly adhere to labelling documents with	In response to the findings of MR23, Actions: Updated Policy Implementation: The Core Documentation Management Policy8 ,35 & 34 has been redrafted to ensure compliance with both EU and Malta-specific data protection regulations. New guidelines have been implemented for labelling all core documents8 with: Date of creation and last review. Subject headings to ensure clarity. Review dates for timely updates. Details of authorship or ownership for accountability.	

dates, subject headings, review dates, and details of authorship or ownership. A clear and consistent policy should be established for document management and followed diligently.	**Staff Training:** All relevant staff are receiving training on the updated policy to ensure consistent application. Training will include instruction on how to correctly label documents and handle confidential or sensitive materials in compliance with GDPR. **Monitoring and Compliance:** Regular audits will be conducted to ensure that all documents adhere to the updated policy. A tracking system will be developed to monitor the review and update status of each core document to ensure they are updated regularly. **Assigning Responsibilities:** Clear roles have been established to oversee the policy's execution, ensuring full compliance with the updated labelling and document management protocols. Registrar: Oversees document compliance and proper labelling/storage in line with GDPR. IT Department: Manages digital document systems and ensures secure access. Data Protection Officer (DPO): Ensures GDPR compliance and conducts regular audits. Head of Academic Affairs and Quality Assurance: Ensures institutional and academic documents are properly reviewed and stored. Academic Staff: Responsible for proper labelling and storage of course-related documents.	

MR24 Malta ICOM Educational shall, within 3 months from the date of publication of this report, implement a log sheet or digital tracking system for the 40-year data retention requirement. This should include both physical and digital records, ensuring that all data is accounted for and can be accessed or audited when required.	To meet MR24 we reviewed our recording of data system. We are implementing: The IT department is creating a digital tracking system for physical and digital records8. Configure Document Storage and Access Controls Storing: all documents in designated SharePoint libraries organised by department or project. Microsoft Lists for Document Tracking List Creation: Establish Microsoft Lists to track essential document details (title, upload date, owner, version, approval status, and review dates). Enable and Configure Microsoft 365 Compliance Audit Logging: Enable audit logging in the Microsoft 365 Compliance Centre to track document creation, editing, deletion, sharing, and access. Implement Document Versioning and Retention Policies in SharePoint: Enable version history to track document changes and allow rollbacks if necessary.	February 2025
	Establish a Document Review Workflow Review Process: Use Microsoft Lists and Power Automate to set up workflows for alerts on required document reviews and approvals. Develop a Compliance Reporting Schedule Regular Audits: Begin audits with Microsoft 365 Compliance tools to verify document access and changes. Training and Communication Training: Schedule sessions to train staff on document management best practices, including using Microsoft Lists, access control, and compliance. Our DPO is in the process of internally auditing the system for GDPR compliance and proper data handling. Administrative staff have had training to maintain an upto-date log of all records, ensuring accessibility for audits. The QAC will oversee regular reviews of the tracking system to ensure ongoing compliance with the 40-year retention policy. They will lead the implementation and compliance with the 40-year retention requirement.	
Standard 10	Thank you for the recommendations	

MR25 Malta ICOM Educational shall, within 6 months from the date of publication of this report, establish a robust protocol for the systematic and regular monitoring and review of programmes. This should include the creation of detailed minutes for all meetings of the Curriculum and Standards Committee, Academic Board, and Senior Management Teams, specifically focusing on programme monitoring.	In response to MR25, we are in the process of formalising a robust protocol for the systematic monitoring and review of programmes. This includes ensuring that detailed minutes are recorded for all meetings of the Committees, Academic Board, and Senior Management Teams, with a particular focus on programme monitoring. The storage of these minutes is the responsibility of the registrar's office. We have reinstated the Curriculum and Standards Committee (CSC)36, that is responsible for curriculum oversight, approving new programme proposals, and ensuring curricula meet academic and industry standards. Evaluating programmes and recommending changes to enhance alignment with institutional goals and regulatory standards. This committee will reports to the AMB. The membership will include the Vice Principal (Chair), Heads of Department, Programme Leaders, Student Representatives, and Industry Stakeholders. We have also enhanced our meeting structures, and all minutes are now consistently recorded, whether meetings are conducted in person or online.	March 2025

| | We are in the process of actively increasing student and stakeholder participation in our decision-making processes to ensure broader input into programme development.

Additionally, we have started the process of recruiting new external and internal members to our various committees as part of our commitment to enhancing governance structures and ensuring alignment with recommendations regarding leadership and oversight (MR8).
Our document management protocols have been updated, with improvements in labelling, tracking, and secure storage for both physical and digital records (MR23, MR24).
We have implemented updated protocols for SharePoint, enhancing security and access controls, particularly for outsourced activities. This encryption measures to ensure data security (MR21)35.

We will monitor the frequency of programme review meetings and implementation rate of recommended changes as KPIs. This will ensure that programme monitoring is systematic and can results in tangible improvements based on stakeholder feedback. | |

MR26 Malta ICOM Educational shall, within 3 months from the date of publication of this report, develop clear action plans to address issues identified during programme reviews and establish a system for tracking the implementation of these plans.	Our annual programme reviews will take place in Decemberr 2024. Actions Taken since EQA visit: Establish Protocols: Systematic protocols for monitoring, reviewing, and enhancing educational programmes are being established, consistent with improvements initiated under MR25 (programme monitoring and student/stakeholder participation) and MR27 (structured student and stakeholder involvement in quality review processes). Identification of Issues: In line with MR24, the implementation of digital tracking for the 40-year data retention34 requirement ensures that all records related to programme reviews and monitoring are easily accessible, ensuring a transparent and accountable review process. This aligns with our broader goal of maintaining comprehensive and accurate records across the institution. Action Plan Creation: As part of KR1 and KR4, where programme improvement plans were discussed, we continue to develop specific, measurable action plans that	January 2025

| | will address both student and staff feedback, as well as performance data, post-programme review.

Tracking and Reporting: Our tracking system will not only support MR26 but also reinforce ongoing efforts outlined in MR21, where we have upgraded our document management system and SharePoint protocols to ensure that all monitoring reports, feedback, and review outcomes are securely tracked and accessed by relevant stakeholders.

Responsible Staff:

Programme Leaders: For overseeing programme-specific monitoring and reporting.
Quality Assurance Committee: To ensure that action plans are aligned with institutional QA policies as highlighted in MR25.
KPI:
The completion rate of action items on schedule will be used as a KLI to monitor action plan implementations following programme reviews.
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| MR27 Malta ICOM Educational shall, within 12 months from the date of publication of this report, implement structured methods for student and stakeholder participation in the quality review process. This could include regular, minuted meetings of the Curriculum, Standards and Student Experience Committee, with mandatory student and stakeholder representation | We have reinstated regular rather than Adhoc Curriculum, Standards, and Student Experience Committee meetings37, ensuring mandatory student and stakeholder involvement in our quality assurance process. These meeting are in the MIE academic calendar to allow for continuous participation and tracking of progress.

The first meeting of the academic year 2024-25 will be in December 2024 where there will be formalised minutekeeping to ensure transparency.
We aim to offer ongoing training and guidance for committee members on how to create action plans following each meeting, outlining individual responsibilities and next steps to be taken. We are actively working on formalising the role of students and stakeholders within the governance structure, ensuring their feedback informs programme development and review.
These steps will work in conjunction with MR21-MR24, relating to data tracking and documentation protocols to maintain accurate records of these reviews, ensuring accountability and transparent decision-making. | |

Annexes

Annex 1: Review Panel Bio Notes

In the setting up of the review panel for Malta ICOM Educational, the MFHEA sought to maintain a high degree of diligence in the process of selection of the members of the peer review panel. The panel sought to be composed of specialists in quality assurance to act as external peers, professionals and practitioners of quality assurance frameworks, as well as students who, prior to the audits, attended professional training seminars organised by the MFHEA.

The following bio notes present the profiles of the members of the peer review panel. The bio notes are correct as at the time the QA audit was carried out, i.e., between 11th and 18th March 2024.

Chair of Review Panel: Mr Andy Gibbs

Mr Gibbs is a teacher, facilitator and consultant with expertise in curriculum development, quality assurance, recognition, internationalisation and mobility. As European HE Expert and former Bologna Expert, he was a member of the BFUG Working Group on recognition, and adviser to the European Commission's HE reform experts training seminars led by UNICA/Brussels Education Foundation. Mr Gibbs is a member of UK NARIC Quality and Standards Group, Scotland's Global Citizens Steering Group and inaugural co-chair of UK Outward Mobility Community of Practice. He has led workshops, conferences, events and projects on HE Reforms at national and regional levels, with Ministries and universities, on curriculum development, Qualifications Frameworks, Programme and Module Development. Mr Gibbs has recently published on Learning Outcomes, Degree Profiles, Tuning Project and Competences.

Peer Reviewer: Ms Veronica Montebello

Ms Montebello is a visiting senior lecturer at the University of Malta teaching both online and face to face and also is a clinical supervisor with the Faculty of Dental Surgery and the Faculty of Health Science, University of Malta. She is a registered dental hygienist by profession who works in the public and private sectors. Ms Montebello held the position of Director designate at the Department of Programme Implementation, MFH and currently works at the Directorate Allied Health Care Services. She is the project leader of an ambitious ESF project. She has a degree in Dental Hygiene, Health Sciences, a Masters in Blended and Online Education (Edinburgh) and is pursuing a Doctoral degree.

Ms Montebello is a Senior Fellow with the Higher Education Academy UK. She is involved in the development, delivery and evaluation of a number of online modules at UM and collaborates with various foreign universities to enhance Educational programmes of study. Ms Montebello is actively involved with a number of European and international federations, committees and associations. She sits on the Council for the Professions Complementary to Medicine. Since 2016, Ms Montebello has been an expert panel reviewer and chairperson of several External Quality Assurance audits and programme evaluations for MFHEA.

Student Peer Reviewer: Ms Tiziana Gatt

Ms Gatt is currently pursuing an Award in Pastoral Care and Chaplaincy in Schools. Ms Gatt is a University of Malta graduate, awarded with a Master of Arts in Health, Medicine and Society. She also holds a BSc (Hons) in Sport and Active Lifestyles, a Diploma in Management Studies, an Award Certificate in Teaching Adults, and other certifications pertaining mainly to the management and education sphere. Ms Gatt has experience in the volunteering realm, education sector, and in the hospitality and tourism industry. She has been auditing various Educational institutions offering accredited courses in relation to quality assurance for the past years.

Onsite Audit Visit Agenda:
Malta ICOM Educational
Date: 11th - 18th March 2024

Venue: 16 Triq Sir Frederick C. Ponsonby, Il-Gzira, GZR 1075

Day 1

08.30 – 09.00	Arrival and preparation
09.00 – 10.00	Meeting with Vice Principal
10.00 – 10.15	Panel discussion
10.15 – 10.45	Meeting with Principal
10.45 – 11.00	Panel discussion
11.00 – 12.00	Meeting with Quality Manager
12.00 – 13.00	Working lunch
13.00 – 14.30	Meeting with students following the Bachelor of Science (Honours) Osteopathy
14.30 – 14.45	Panel discussion
14.45 – 16.15	Meeting with Bachelor of Science Physiotherapy students
16.15 – 16.30	Conclusions of Day 1

Day 2

08.30– 09.00	Arrival and preparation
09.00 – 10.00	Meeting with Deans
10.00 – 10.15	Panel discussion
10.15 – 11.15	Meeting with Clinical Coordinators
11.15 – 11.30	Panel discussion
11.30 – 12.30	Meeting with Course Leaders (from all courses)
12.30 – 13.30	Working lunch
13.30 – 14.15	Meeting with Alumni
14.15 – 14.30	Panel discussion
14.30 – 16.00	Meeting with Academic Staff (from all courses)
16.00 – 16.15	Conclusions of Day 2

Day 3

08.30 – 09.00	Arrival and preparation
09.00 – 09.45	Meeting with Head of Recruitment, Admissions and Student Support
09.45 – 10.00	Panel discussion
10.00 – 11.00	Meeting with Clinical Tutors
11.00 – 11.15	Panel discussion
11.15 – 11.45	Interview with student representatives across all courses
11.45 – 12.30	Working lunch
12.30 – 14.00	Meeting with students following Bachelor's Degree (Honours) in Dental Hygiene
14.15 – 14.30	Panel discussion
14.30 – 16.00	Meeting with students following MSc Osteopathy
16.00 – 16.15	Conclusions of Day 3

Day 4

08.30 – 09.00	Arrival and preparation
09.00 – 09.30	Meeting with Student Support Manager
09.30 – 09.45	Panel discussion
09.45 – 10.15	Meeting with Head of Communications and Marketing
10.15 – 10.30	Panel discussion
10.30 – 11.15	Meeting with Head of Human Resources
11.15 – 11.30	Panel discussion
11.30 – 12.30	Meeting with external stakeholders
12.30 – 13.30	Working lunch
13.30 – 14.30	Tour of digital platforms and data management
14.30 – 14.45	Tour of premises
14.45 – 15.15	Panel discussion

Date – 18th March 2024

Day 5

Venue: *ICOM Milan Teaching Centre, Via Giacomo Matteotti, 62, 20092 Cinisello Balsamo MI,*
Italy

10.00 – 10.30	Panel meets
10.30– 12.00	Tour of clinical premises
12.00 – 13.00	Lunch
13.00 – 14.00	Visiting students during working practice
14.00 – 15.00	Panel discussion
15.00 – 15.30	Presentation of initial findings of the EQA Audit to Malta ICOM Educational

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