

IN THE APPEALS COMMITTEE OF THE MALTA FURTHER AND HIGHER EDUCATION AUTHORITY

Malta ICOM Educational Ltd

vs.

Malta Further and Higher Education Authority

Decision of the Appeals Committee of the Malta Further and Higher Education Authority (hereinafter 'Appeals Committee' or 'Committee')

Delivered today the 9th of July 2025:

1. BACKGROUND AND PROCEDURAL HISTORY

1.1 The Appellant and Its Licensing Framework

Malta ICOM Educational Ltd, bearing company registration number C78436 and operating under the name Malta ICOM (hereinafter "Malta ICOM" or "the Appellant"), is a licensed higher education institution regulated by the Malta Further and Higher Education Authority (hereinafter "MFHEA" or "the Authority"). The Appellant holds provider licence number 2018-003, granted pursuant to the provisions of the Further and Higher Education (Licensing, Accreditation and Quality Assurance) Regulations, Subsidiary Legislation 607.03 of the Laws of Malta. The licence was first issued in 2019, permitting the Appellant to operate within the Maltese and international education sectors, particularly in disciplines related to health and social care.

1.2 The External Quality Assurance Audit

1.2.1 As part of the regulatory cycle established under Subsidiary Legislation 607.03, Malta ICOM was required to undergo a periodic External Quality Assurance (EQA) audit every five years. The MFHEA coordinated the audit in accordance with its Quality Assurance Manual, and appointed an independent Peer Review Panel (PRP) to assess the provider's compliance with the National Quality Assurance Framework (NQAF).

- 1.2.2 The site visit forming part of the EQA was conducted between 11 and 18 March 2024. It encompassed the Appellant’s local and international operations, including teaching venues, administrative processes, governance structures, quality assurance systems, student engagement, and clinical placement arrangements. The PRP subsequently compiled its findings and finalised the EQA report, which was formally published by the MFHEA in October 2024.
- 1.2.3 The EQA report presented a deeply critical assessment. Of the eleven standards prescribed by the NQAF, only two were assessed as “met”, specifically Standard 7 (Learning Resources and Student Support) and Standard 11 (Cyclical External Quality Assurance). Seven standards were found to be “not met”, including Standards 1 (Policy and QA), 2 (Institutional Probity), 3 (Programme Design and Approval), 4 (Student-Centred Learning and Assessment), 6 (Teaching Staff), 8 (Information Management), and 10 (Programme Monitoring and Review). The remaining two standards, 5 (Student Admissions and Certification) and 9 (Public Information), were assessed as “requiring improvement.”
- 1.2.4 The report was accompanied by twenty-seven mandatory recommendations, sixteen key recommendations, and additional suggestions for improvement. Each recommendation was assigned a specific deadline, ranging from two to twelve months. The Panel’s overarching conclusion was that the provider suffered from significant institutional weaknesses, particularly in relation to governance, quality assurance capacity, academic oversight, and the robustness of placement arrangements.

1.3 Initial Measures Taken and the Notice of Revocation

- 1.3.1 Following the release of the EQA report, MFHEA took initial regulatory action. By means of a letter dated 10 October 2024, the Authority notified the Appellant of its decision to impose a restriction on the enrolment of new students with immediate effect. This step was taken as an interim safeguard pending the Authority’s review of the EQA findings and the Appellant’s proposed response.

- 1.3.2 On 11 November 2024, the Appellant submitted a formal Response and Action Plan to the MFHEA. This document addressed each of the mandatory recommendations outlined in the EQA report and presented a sequence of corrective measures, together with proposed timelines for implementation. The plan was supported by internal documentation evidencing structural reforms, revisions to academic governance, adjustments to student feedback mechanisms, and commitments to greater compliance with data management and placement supervision requirements.
- 1.3.3 This submission was formally acknowledged by the Chief Executive Officer of the MFHEA, Dr. Rose Anne Cuschieri, by email dated 12 November 2024. In her message, the CEO expressed satisfaction with the “positive stance” adopted by the Appellant, and indicated that further feedback from the Authority would follow. Notwithstanding this correspondence, the Authority proceeded to finalise its position.
- 1.3.4 On 10 December 2024, the MFHEA served the Appellant with a formal Notice of Revocation of Licence, to take effect as of 1 July 2025. The decision was adopted by the MFHEA Board on the recommendation of the Quality Assurance Committee (QAC), following a meeting held on 6 December 2024. The Notice relied upon Regulation 14 of S.L. 607.03, and further invoked Regulations 38(2) and 40. It imposed an immediate ban on the enrolment of new students and instructed the Appellant to initiate urgent communications with existing students regarding the impact of the decision.
- 1.3.5 The reasoning provided in the Notice was that the Appellant’s Action Plan was lacking in substance and did not reflect the severity of the weaknesses identified in the EQA report. The QAC described portions of the Plan as “platitudes” and concluded that the proposed reforms were not credible or proportionate to the depth of institutional deficiencies observed.

1.4 Lodging of Appeal

- 1.4.1 By letter dated 27 December 2024, Malta ICOM lodged an appeal against the revocation decision, pursuant to the MFHEA’s Policy and Procedure for Appeals. In its appeal submissions, the Appellant raised four principal grounds. First, it alleged that

the MFHEA had committed procedural irregularities by failing to follow its own internal processes, particularly those pertaining to post-audit dialogue and remediation. Second, it argued that the enforcement decision was premature and disproportionate in view of the timelines for compliance embedded in the EQA recommendations. Third, the Appellant claimed that the Authority had misapplied the regulatory criteria and disregarded the genuine corrective measures being implemented. Fourth, it asserted that the MFHEA's decision lacked a sound evidentiary basis and did not reflect the documentary material submitted in response to the audit.

1.4.2 The appeal was supported by an extensive set of documents, including the final EQA report (Doc MI 1), the Appellant's initial Response and Action Plan (Doc MI 2), the published version of the report incorporating the Appellant's plan (Doc MI 3), and the email from the MFHEA CEO acknowledging receipt of the plan (Doc MI 4). The appeal also included the Notice of Revocation (Doc MI 5), a subsequent update to the Action Plan dated 10 December 2024 (Doc MI 7), historic correspondence between the parties concerning premises, clinical placements and compliance (Doc MI 8), and a letter of support signed by students and parents (Doc MI 6).

1.4.3 The Appeals Committee was formally constituted in accordance with the policy, and its members declared no conflicts of interest. It proceeded to examine the appeal in line with the procedural timeline set out in Procedural Order No. 1, which included deadlines for written submissions, oral hearings, and a determination of the matter within the prescribed timeframe.

2. LEGAL AND REGULATORY FRAMEWORK

2.1 Governing Legislation

2.1.1 This appeal arises under the legal and regulatory regime governing further and higher education in Malta, and in particular under the provisions of the Further and Higher Education (Licensing, Accreditation and Quality Assurance) Regulations, Subsidiary Legislation 607.03 of the Laws of Malta (hereinafter "the Regulations"). These Regulations, *inter alia*, establish the powers and responsibilities of the Malta Further and Higher Education Authority (MFHEA) in the licensing, quality assurance,

monitoring, and enforcement of standards applicable to further and higher education institutions.

- 2.1.2 Under this regulatory framework, MFHEA is vested with the authority to grant and revoke provider licences, monitor ongoing compliance with accreditation standards, and evaluate institutions through periodic quality audits. Regulation 14 empowers the Authority to revoke a provider's licence in cases where it is satisfied that the licensee has failed to comply with the conditions of its licence, where it is declared bankrupt, makes a composition with its creditors or ceases to operate, or severely violates any requirements imposed by or under the Regulations or guidelines of the MFHEA.
- 2.1.3 Regulation 38 sets out the process for periodic provider and programme quality audits (External Quality Assurance (EQA)) and obliges all licensed providers to undergo such an audit at least once every five years. Under Regulation 38(2), the Authority is required, on the basis of the audit findings, to make a determination either to confirm or to revoke accreditation status.
- 2.1.4 Regulation 40, which complements Regulation 38, provides the procedural framework for the formulation of audit reports and introduces the possibility of corrective enforcement measures. In particular, Regulation 40(2) addresses situations where fundamental defects are identified in the audit, and envisages that the provider shall be allowed a reasonable time, as the Authority determines, within which to undertake remedial measures.

2.2 External Quality Assurance Process

- 2.2.1 The description of the External Quality Assurance (EQA) process adopted in this decision is based on the procedures and principles set out in the MFHEA's External Quality Assurance: Provider Audit Manual of Procedures, as well as the structure of findings and recommendations applied under the National Quality Assurance Framework (NQAF).
- 2.2.2 The PRP is typically composed of qualified experts in higher education and quality assurance and is mandated to assess the provider's conformity with the eleven

standards of the NQAF. The process includes both a desk-based analysis of internal policies, academic documentation, and governance materials, as well as interviews and observational assessments carried out during an on-site visit.

- 2.2.3 Following the conclusion of the audit, the PRP issues a formal EQA report outlining its findings in relation to each standard. Each standard is assessed on the basis of whether it is deemed to be fully met, requires improvement, or is not met. Accompanying the evaluative judgments, the report includes a series of recommendations: mandatory recommendations (which must be addressed within specific timeframes), key recommendations (which reflect more structural or strategic improvements), and general suggestions (which are advisory in nature).

2.3 The Appeals Process

- 2.3.1 In cases where a provider is dissatisfied with a decision of the Authority, including a decision to revoke a licence or restrict operations, the regulatory regime provides for an internal appeal mechanism administered by the MFHEA Appeals Committee. The framework for such appeals is governed by the MFHEA's publicly available Policy and Procedure for Appeals. This policy delineates the grounds upon which an appeal may be lodged, the composition and duties of the Appeals Committee, and the procedural framework to be followed.
- 2.3.2 A licensee may appeal on grounds that include, inter alia, procedural irregularity, misapplication or misinterpretation of evaluation criteria, inconsistency between the decision and the facts or materials presented, or lack of evidentiary basis. Once the Authority confirms that the appeal satisfies the eligibility conditions, the matter is referred to an Appeals Committee composed of three members selected from an internal pool. The Committee must include two individuals with expertise in quality assurance and one student representative external to the appellant institution. The Committee elects a Chairperson and proceeds to regulate its own procedures for hearings, submissions, and deliberations.
- 2.3.3 In accordance with the Appeals Policy, the Committee is tasked with analysing the administrative record, reviewing all documents and representations submitted by both

the appellant and the Authority, and rendering a decision. The Committee may uphold the appeal in full or in part, dismiss it, or order that a new evaluation be conducted. Its decisions are by simple majority and are formally communicated in a reasoned written report. The Committee's determination is final within the framework of the MFHEA and may only be challenged before a court of law through judicial review. Throughout the process, the Committee is bound to act in accordance with the principles of good administration, procedural fairness, impartiality, and proportionality, as recognised under general principles of Maltese administrative law and reflected in the MFHEA's Code of Ethics.

3. THE APPELLANT'S GROUNDS OF APPEAL AND SUBMISSIONS

3.1 By means of its appeal dated 27 December 2024, Malta ICOM Educational Ltd contested the decision of the Malta Further and Higher Education Authority to revoke its provider licence with effect from 1 July 2025. The Appellant's submission sets out a structured challenge to the Authority's decision, invoking a range of legal, procedural, and factual grounds, all of which fall within the typologies of appealable matters recognised under the MFHEA's Policy and Procedure for Appeals. The Committee notes that the appeal was supported by a considerable documentation, and the grounds raised reflect both specific objections to the regulatory process and broader arguments concerning fairness, proportionality, and consistency.

3.2 The Appellant's first principal ground of appeal relates to what it describes as a breach of procedural safeguards and a failure by the MFHEA to adhere to its own internal processes. It contends that the Authority did not respect the post-audit engagement procedures that, according to the Appellant, are integral to the regulatory design. Specifically, Malta ICOM argues that it was not afforded a reasonable opportunity to implement the corrective measures proposed by the Peer Review Panel (PRP), whose report envisaged timelines for remediation extending up to August 2025. The Appellant further alleges that the MFHEA Board reached its decision to revoke the licence without providing the Appellant with advance notice of its intention, and without affording a right of audience or further opportunity for representation prior to the meeting of 6 December 2024. It also points to the absence of meaningful follow-up communication after the submission of the Response and Action Plan on 11 November 2024, notwithstanding the formal and apparently

positive acknowledgement of the same by the MFHEA’s Chief Executive Officer on 12 November 2024. In the Appellant’s view, this sequence of omissions constitutes a deviation from the procedural framework established by the Authority and amounts to a denial of a fair and transparent process.

3.3 The second ground of appeal advanced by the Appellant concerns the alleged misapplication of the regulatory criteria. Malta ICOM asserts that the MFHEA failed to adopt a proportionate and context-sensitive approach when evaluating the EQA findings and the proposed remedial actions. It contends that the Authority treated the audit outcome in an overly binary manner, without due regard to the qualitative distinctions embedded in the PRP’s own report, particularly the differentiated ratings between “not met” and “requires improvement”. The Appellant maintains that certain standards—such as those relating to programme design, academic oversight, and placement arrangements—were subject to active reform, and that the documentation submitted post-audit was demonstrative of commitment to compliance. It further claims that the MFHEA did not adequately engage with the updated implementation matrix submitted in December 2024, and that the Authority ignored the PRP’s own recognition of the proactive stance adopted by the institution.

3.4 The third ground of appeal centres on the inconsistency between the decision taken and the documentary evidence presented. Malta ICOM emphasises that its initial Response and Action Plan, dated 11 November 2024, and the subsequent update submitted on 10 December 2024, provided a coherent and structured response to each of the twenty-seven mandatory recommendations made by the PRP. The Appellant maintains that numerous remedial measures had already been implemented at the time of submission, including the formalisation of academic leadership positions, revisions to institutional governance instruments, enhanced data protection compliance, and restructured committee procedures. It argues that the MFHEA’s decision failed to take into account these tangible actions and instead proceeded on the basis of an abstract and generalised assessment. Reference is also made to the 12 November 2024 email from the MFHEA CEO, which, in the Appellant’s view, created a legitimate expectation of continued engagement and constructive regulatory dialogue.

3.5 The fourth and final ground raised by the Appellant relates to the evidentiary basis upon which the revocation decision was taken. It contends that the Quality Assurance Committee's evaluation of its Response and Action Plan lacked analytical rigour and failed to engage with the substance of the documentation submitted. According to the Appellant, no systematic point-by-point rebuttal of its corrective matrix was ever provided by the Authority, nor was there any formal scoring exercise, supplementary site verification, or post-submission consultation. This, the Appellant argues, deprived it of a reasoned decision and rendered the Authority's conclusion arbitrary, opaque, and legally deficient.

3.6 On the basis of the foregoing, Malta ICOM has requested that the Appeals Committee annul the MFHEA's decision in its entirety. It seeks reinstatement of its provider licence, the lifting of the restriction on new student enrolments, and the initiation of a structured monitoring process to verify implementation of the Action Plan within the timeframes originally established by the PRP. The Appellant submits that such an outcome would reflect the principles of fairness, legality, and procedural propriety which the Authority is legally and ethically bound to uphold.

4. APPEAL PROCEDURE

4.1 Subsequent to the formal registration of the appeal on 27 December 2024, the Malta Further and Higher Education Authority appointed three members to serve on the Appeals Committee for this case. The composition of the Committee was as follows: Dr. John L. Gauci, who was elected as Chairperson; Professor Milan Pol, an academic expert serving as Peer Reviewer; and Mr. Matthew Kitching, the appointed Student Reviewer. Each member formally declared the absence of any conflict of interest and confirmed their availability to serve throughout the duration of the proceedings.

4.2 On 18 March 2025, the Appeals Committee issued Procedural Order No. 1, which defined the procedural timetable and regulatory structure under which the appeal would be processed. This Order was issued pursuant to the authority conferred upon the Committee by the MFHEA Appeals Policy, which expressly allows the Committee to regulate its own procedure within the bounds of the applicable rules.

- 4.3 Procedural Order No. 1 established a sequenced approach to the administration of the appeal. First, it directed the MFHEA, as the respondent Authority, to submit a comprehensive reply to the grounds of appeal within a period of twenty (20) running days from the date of issuance of the order. This reply was to address each of the Appellant’s arguments on both procedural and substantive grounds.
- 4.3.1 Following the submission of the Authority’s reply, the Order stipulated that the Appellant would be granted an additional period of twenty (20) running days to file further documentary material in support of its appeal.
- 4.3.2 Thereafter, the Committee scheduled a first oral hearing to be held within three (3) working days from the date of receipt of the Appellant’s final written submissions. The hearing was to be convened virtually using an online platform and would allow each party—and their legal representatives—to present their arguments, clarify points raised in the documentation, and respond to any questions posed by the Committee.
- 4.3.3 Following this initial hearing, the MFHEA was entitled to a further period of twenty (20) running days within which to submit any additional rebuttal evidence, clarifications, or supplementary observations. This additional submission would, in turn, trigger a second oral hearing, to be convened within three (3) working days of receipt of the Authority’s further documentation. The second hearing was designated as the conclusive opportunity for both parties to present oral submissions before the matter was deemed closed.
- 4.3.4 The Committee emphasised in its Order that, upon conclusion of the second hearing and the close of the documentary and oral phases, it would proceed to deliberate and deliver a written decision in accordance with the time-frame established under the MFHEA Appeals Policy.

5. THE RESPONDENT AUTHORITY’S REPLY AND SUBMISSIONS

- 5.1 Pursuant to Procedural Order No. 1, MFHEA submitted its formal reply to the Appellant’s statement of appeal. The response comprehensively addressed each of the four grounds raised by Malta ICOM Educational Ltd, and included a defence of the regulatory actions undertaken by the Authority. The thrust of the Authority’s submissions was to contest the

factual, legal, and procedural premises on which the appeal was based and to affirm the legality and proportionality of the decision to revoke the provider's licence.

5.2 The Authority prefaced its reply by articulating its preliminary position on the appeal as a whole. It maintained that the challenge advanced by the Appellant is not merely a critique of the MFHEA's final decision, but an attempt to undermine the exercise of powers granted to the Authority under Regulation 38(2) of Subsidiary Legislation 607.03. The Authority rejected the suggestion that the decision to revoke the licence was unlawful, procedurally defective, or disproportionate. It characterised the EQA audit findings in this case as among the most severe encountered to date, noting that only two of the eleven standards were met, while seven were not met at all. Particular emphasis was placed on the fact that the Appellant's programmes operate at MQF level 7 and involve medically oriented disciplines. According to the Authority, such subject areas entail heightened regulatory vigilance given the implications for student welfare and patient safety.

5.3 On the matter of procedural compliance and regulatory authority, MFHEA reaffirmed its reliance on Regulation 38(2) as the lawful basis for the revocation decision. It submitted that this provision grants the Authority the discretion to confirm or revoke accreditation following an EQA audit and does not require a separate procedural escalation under Regulation 14 or Regulation 15. The Authority cited the judgment in *United Campus of Malta Higher Institution Foundation v. MFHEA* (Court of Appeal, Case 98/2021) (the "UCM Judgment") as judicial affirmation of this interpretive approach.

5.4 MFHEA further argued that the Peer Review Panel (PRP), while central to the audit process, has no authority to make or oppose revocation decisions. That role is reserved exclusively for the Quality Assurance Committee and the MFHEA Board, which base their determinations on the Panel's findings and the institutional response. In response to the Appellant's claim that it had not been informed in advance of the Board's intention to revoke, the Authority submitted that any such pre-notification would have been improper and prejudicial, amounting to premature adjudication of matters which were still under formal consideration.

5.5 With respect to the Appellant's reliance on its Response and Action Plan, and particularly the subsequent update of 10 December 2024, the Authority submitted that these

documents were reviewed in full but ultimately found inadequate. It stated that the decision to revoke the licence was taken in view of the EQA findings, which were not rebutted or rendered irrelevant by the corrective proposals advanced by the Appellant.

5.6 MFHEA also sought to clarify the context and import of the email dated 12 November 2024 sent by its CEO, Dr. Rose Anne Cuschieri. According to the Authority, this message constituted a general acknowledgment and expression of procedural courtesy, rather than a substantive or binding affirmation of regulatory satisfaction. MFHEA stressed that the CEO is not the decision-making authority in respect of revocations and that institutional communications do not supersede or pre-empt the Authority's collective governance structures.

5.7 In addressing the Appellant's broader claims of reputational and institutional harm, the Authority acknowledged the Appellant's cooperation during the audit process. However, it rejected the notion that such cooperation should override the substance of the audit outcome or mitigate the Authority's obligation to act. MFHEA submitted that the consequences alleged by the Appellant, including loss of goodwill and potential legal claims, are irrelevant to the legality of the revocation decision. The Authority underscored its public duty to enforce quality standards and protect student interests, even in cases where the resulting actions are administratively or financially burdensome for providers.

5.8 The Authority proceeded to rebut each of the Appellant's four stated grounds of appeal in turn.

5.8.1 In relation to the first ground, concerning procedural impropriety, MFHEA argued that the appeal is predicated on a misreading of the applicable regulations. Regulation 38(2), it asserted, authorises revocation without the procedural formalities prescribed in Regulation 14 or 15, and the Appellant was duly afforded the opportunity to respond to the EQA report.

5.8.2 In respect of the second ground—misapplication of criteria—the Authority reiterated that it is not at liberty to disregard the findings of the PRP and that the recommendations, including timelines, do not preclude revocation where the scale of non-compliance is grave.

- 5.8.3 Regarding the third ground—alleged inconsistency with the documentary record—MFHEA submitted that while the Appellant’s submissions were noted, they did not negate the severity of the audit results. Action plans, in the Authority’s view, may inform but do not dictate regulatory outcomes.
- 5.8.4 Lastly, in response to the fourth ground, the Authority challenged the claim that the revocation lacked evidentiary basis. It contended that the PRP’s report, together with the internal assessment of the Action Plan, formed a sufficient and lawful basis for revocation. It added that the Appellant had ample opportunity to raise objections to the audit findings during the feedback period and that new factual challenges introduced at appeal stage were procedurally inadmissible.
- 5.8.5 In its final remarks, the MFHEA invited the Appeals Committee to dismiss the appeal in its entirety. It reaffirmed that its actions were in conformity with the statutory and procedural framework, and that the decision to revoke was made in good faith and in pursuit of its regulatory mandate. The Authority requested that the decision of 6 December 2024, as formally communicated on 10 December 2024, be upheld without modification.

6. Rejoinder to MFHEA’s Submissions

- 6.1 On 25 April 2025, Malta ICOM Educational Ltd submitted its rejoinder in response to the reply filed by the Malta Further and Higher Education Authority (MFHEA) on 9 April 2025. In its rejoinder, the Appellant sought to rebut various factual assertions, legal interpretations, and procedural justifications advanced by the Authority in defence of its revocation decision. The document reaffirmed the Appellant’s core arguments while introducing additional critiques of the Authority’s regulatory conduct.
- 6.2 A central theme in the rejoinder concerned the MFHEA’s exclusive reliance on Regulation 38(2) of Subsidiary Legislation 607.03 as the legal foundation for revoking the provider licence. The Appellant did not contest that the Authority had formally acted under Regulation 38(2), but it contended that the MFHEA had erroneously ignored other relevant provisions within the same legislative framework—particularly Regulations 14, 15,

and most notably, 40(2). According to the Appellant, these provisions imposed procedural safeguards that were bypassed without justification. The failure to afford a reasonable rectification period following the EQA, as envisaged by Regulation 40(2), was in the Appellant's view a breach of the Regulations themselves and an infringement of the provider's legitimate expectations under a fair regulatory process.

6.3 The rejoinder also addressed what the Appellant described as a mischaracterisation of the legal basis cited in the Authority's own Notice of Revocation. It was noted that the Notice explicitly referenced Regulations 14 and 40 in addition to Regulation 38(2). The Appellant asserted that this reference created a legitimate expectation that the procedures outlined in Regulations 14 and 40 would be followed. It then argued that the Authority's subsequent position—namely, that those provisions were irrelevant or inapplicable—was not only contradictory but amounted to procedural irregularity and bad administrative practice.

6.4 The Appellant went on to allege a failure on the part of MFHEA to comply with the duty to provide reasons at the time of the decision. It argued that the Authority offered for the first time, in the course of appeal proceedings, only vague and generic justifications for revocation. It submitted that under Regulations 14(2), 15(2), and 40(2), the obligation to provide clear and reasoned grounds must be discharged contemporaneously with the decision, not retrospectively or as a defensive measure during appeal. This procedural shortfall, according to the Appellant, tainted the legality of the revocation and hindered the provider's ability to meaningfully respond.

6.5 Another strand of the rejoinder sought to distinguish the present case from the 'precedent' invoked by the Authority—namely, the UCM Judgment. The Appellant pointed out that in the United Campus case, the licence was revoked only after a prolonged engagement involving written warnings, extended remediation opportunities, and structured dialogue, spanning more than two years. By contrast, Malta ICOM alleged that it had been given no such opportunity and was effectively presented with a decision that disregarded the collaborative spirit of the EQA process. This, it argued, constituted arbitrary, excessive, and discriminatory treatment.

6.6 The Appellant also criticised the Authority for its failure to give due consideration to the Peer Review Panel's recommendations. It accepted that MFHEA is not legally bound by

the PRP's observations or timelines, but contended that the Authority is nonetheless required to treat those recommendations with respect and provide reasons when diverging from them. The complete disregard of the PRP's graduated implementation plan, without a detailed rebuttal or justification, was said to be irrational and inconsistent with the regulatory purpose of the EQA mechanism.

6.7 Finally, the rejoinder drew attention to what it described as procedural inconsistency in the Authority's enforcement practice. The Appellant noted that the key individuals involved in the United Campus matter—including the MFHEA Chairperson, the Chief Executive Officer, and the Chair of the Quality Assurance Committee—continued to serve in the same institutional roles at the time of the present case. In the Appellant's view, this made the Authority's failure to adopt a similarly structured and measured approach in the present case all the more difficult to justify, and arguably indicative of discriminatory treatment between similarly situated providers.

6.8 The Appellant concluded its rejoinder by respectfully requesting the Appeals Committee to reject the MFHEA's reply in full. It reiterated its earlier request for the revocation decision to be annulled, for the licence to be reinstated, and for the restriction on new student enrolments to be lifted. It also asked the Committee to direct the MFHEA to engage in a structured follow-up process to verify the implementation of its corrective plan in accordance with the PRP's original timelines.

7. First Hearing Before the Appeals Committee

7.1 The first oral hearing in this matter took place on 30 April 2025, commencing at 2:30 p.m. and concluding at 3:05 p.m., and was held virtually via Microsoft Teams in accordance with the procedural calendar outlined in Procedural Order No. 1. The hearing was convened by the Appeals Committee for the express purpose of providing the Appellant with the opportunity to expand upon its rejoinder, which had been filed on 25 April 2025, and to clarify the procedural and evidentiary posture of the appeal prior to closure of the initial round of submissions.

7.2 The sitting was presided over by the duly constituted Appeals Committee. Representing the Appellant, Malta ICOM Educational Ltd, were legal counsel Dr. Edmond Zammit

Laferla, Dr. Joseph Camilleri, and Dr. Stephan Piazza. Also in attendance for the Appellant were Mr. Alfonso Mandara, who serves as Principal, and Ms. Ariane Nolan, the Academic Director. The Malta Further and Higher Education Authority was represented at the hearing by Dr. Dennis Zammit, in his role as legal counsel, and Ms. Michelle Calleja Gafa, Head of Licensing and Accreditation. Additionally, Ms. Matty Farrugia, Chairperson of the MFHEA Quality Assurance Committee, was present as an observer.

7.3 The hearing was formally opened by the Chairperson, who began by outlining the procedural context leading to the sitting. He noted that, under Procedural Order No. 1, the Appellant had been granted twenty days following the MFHEA's reply to file any further documentary evidence. The Appellant, however, had opted to file a rejoinder focused on legal and procedural arguments, without introducing new evidentiary material. Upon being invited to confirm its position, counsel for the Appellant affirmed that it would be relying exclusively on the documentation previously submitted with the initial appeal and the rejoinder.

7.4 The Chairperson then turned to the issue of admissibility and evidentiary status. Both the Appellant and the MFHEA were asked to confirm whether they had any objections to the admissibility or authenticity of the documentary evidence submitted to date. Neither party raised any objections.

7.5 Dr. Joseph Camilleri was then invited to present the Appellant's oral submissions. He began by stating that he would not reiterate the written pleadings but would instead focus on four core aspects of the appeal that merited emphasis and clarification. His first point concerned the MFHEA's alleged failure to follow its own regulatory framework. Dr. Camilleri directed the Committee's attention to Regulation 40(2), which, in his submission, mandates that where an audit identifies fundamental defects, the Authority must afford the provider a reasonable period for rectification. He argued that MFHEA's decision to rely solely on Regulation 38(2), without invoking the procedural safeguards outlined in Regulation 40, constituted an incomplete and unlawful application of the legal regime. The absence of a formal notice inviting Malta ICOM to cure its deficiencies, he continued, represented a breach of administrative fairness and marked a departure from prior enforcement practice.

7.6 Dr. Camilleri's second point addressed the MFHEA's broader administrative conduct. He submitted that the Authority had failed to meet the minimum standards of good public administration, citing a lack of transparency in how the decision to revoke the licence was reached, the absence of documented reasons for diverging from the Peer Review Panel's proposed implementation timeline, and an overall failure to exercise discretion in a proportionate, measured, and fact-sensitive manner. In his view, revocation should represent a measure of last resort, justified only where persistent and irremediable non-compliance is evident.

7.7 The third element of the oral submission focused on the disproportionate consequences of the MFHEA's decision. Dr. Camilleri noted that students currently enrolled in MQF level 7 health-related programmes had been left in a state of uncertainty as to the recognition and continuation of their studies. Staff, both academic and administrative, were at risk of redundancy. Moreover, significant investments made by the institution into infrastructure, compliance systems, and academic development were jeopardised without an opportunity to demonstrate the effectiveness of ongoing reforms. He stressed that the appeal was not based on sympathy but on the legal principle of proportionality, which demands that sanctions imposed by public authorities must be commensurate with the factual and regulatory context.

7.8 In closing, Dr. Camilleri restated the core of the Appellant's case: that the MFHEA had failed to engage with Regulation 40(2), had dismissed the structured remedial timeline articulated by the Peer Review Panel without justification, and had deviated from its own prior enforcement approach as exemplified in the United Campus case. He concluded with a succinct appeal to principle, declaring: "We are simply requesting that the MFHEA comply with what the law itself requires."

7.9 The Chairperson thanked Dr. Camilleri for his submissions and proceeded to outline the next procedural steps. He confirmed that the Authority would be given a final opportunity to submit any additional documentation or reply within twenty days from the date of the hearing. He further advised that a second hearing would be scheduled within three working days of receipt of those materials for final submissions. The Chairperson then closed the hearing, thanking both parties for their participation and cooperation.

8. Authority's Final Written Submissions Following the First Hearing

8.1 Following the conclusion of the first oral hearing on 30 April 2025, the Appeals Committee granted the Malta Further and Higher Education Authority a further opportunity to submit its final written arguments in reply to the Appellant's oral submissions and rejoinder. In compliance with the procedural timeline established under Procedural Order No. 1, the Authority filed its final written submissions within the allocated timeframe. These submissions purported to clarify certain points of legal interpretation and reinforce the Authority's position that the revocation decision was lawfully taken, procedurally sound, and substantively justified in light of the findings arising from the External Quality Assurance (EQA) audit.

8.2 In its opening remarks, the Authority addressed the core issue raised by the Appellant concerning the applicability of Regulation 40(2). MFHEA rejected the contention that this provision imposes a mandatory obligation to allow a cure period in all cases of non-compliance. Rather, it asserted that Regulation 40(2) applies only in situations where the Authority decides to maintain a provider's licence despite the identification of fundamental defects. In such instances, the Authority may impose conditions and require remedial measures. However, in cases where the Authority concludes—based on the gravity of the EQA outcome—that the licence should not be continued, Regulation 38(2) applies without qualification. To hold otherwise, the Authority argued, would undermine the effectiveness of the enforcement mechanism provided by Regulation 38(2) and render it effectively inoperative in precisely the cases for which it was designed.

8.3 The Authority went on to respond to the Appellant's criticisms of transparency, fairness, and administrative law compliance. It stated that the decision to revoke the licence was clearly communicated, and the grounds for that decision were founded on specific and documented failings across multiple standards. MFHEA explained the internal workflow under which the Peer Review Panel evaluates each quality standard individually, while the Quality Assurance Committee (QAC) is charged with considering the institution's overall posture and implementation prospects. It is the QAC that makes a final recommendation to the MFHEA Board, which in turn renders the decision under Regulation 38(2). MFHEA noted that the QAC had reviewed Malta ICOM's Action Plan and found it to be voluminous but lacking in substance, ultimately falling short of what would be required to

ensure institutional maturity, governance capability, and student protection. While MFHEA acknowledged that it was not bound to follow the timelines or recommendations of the PRP, it maintained that all submitted materials had been reviewed, but that they failed to demonstrate credible implementation or operational effectiveness.

8.4 In support of its position, the Authority offered a detailed reference to one of the most critical compliance areas identified in the EQA report—Mandatory Recommendation 15, concerning the approval and monitoring of clinical placements. MFHEA emphasised that clinical placements are essential components of level 7 medical and allied health programmes, and that proper oversight of such placements is non-negotiable. According to the Authority, Malta ICOM failed to demonstrate that internship venues were being subjected to systematic monitoring or were properly authorised. The documentation submitted by the Appellant, it argued, did not provide sufficient assurance of legal compliance, risk mitigation, or quality control. MFHEA maintained that this deficiency alone raised serious concerns about the safety and integrity of the educational experience provided, justifying its conclusion that the institution had not reached the threshold required for continued licensure.

8.5 The Authority also addressed the Appellant’s invocation of disproportionate harm, acknowledging that revocation decisions necessarily entail disruption. However, MFHEA argued that its primary regulatory obligation is to safeguard the interests of students and the broader public. The Authority further contended that it had already taken measured steps to reduce the impact of revocation, including the delayed effective date of 1 July 2025, the allowance for students to complete their academic year, the extension of resit windows through October 2025, and the prohibition on further student enrolments. These actions, in its view, reflected a balanced approach. The Authority dismissed the notion that financial investment or potential reputational damage could constitute grounds for avoiding revocation. It reiterated that accreditation is a privilege, not an entitlement, and that only institutions which meet the full spectrum of quality standards can maintain their licensure.

8.6 Finally, the MFHEA addressed the Appellant’s reliance on the Court of Appeal’s 2025 decision in the United Campus of Malta case. The Authority distinguished that case on the basis of both procedural history and legal context. It noted that in the UCM Judgment, the

Authority had acted under Regulation 14, issuing pre-audit warnings and correspondence based on observed breaches and complaints. Once the EQA audit was conducted, the revocation was effected under Regulation 38(2) without delay—just as it was in the present matter. Thus, the difference lay not in unequal treatment, but in the procedural posture and factual triggers specific to each case. MFHEA concluded that Malta ICOM’s situation involved systemic and serious shortcomings that warranted immediate enforcement without the benefit of a cure period.

8.7 In conclusion, the Authority submitted that it had acted lawfully, proportionately, and in full compliance with its duties under Subsidiary Legislation 607.03. It had afforded the Appellant an opportunity to respond, had reviewed all materials submitted, and had reached a decision based on the severity and scope of the deficiencies identified. Accordingly, the Authority invited the Appeals Committee to reject the appeal in its entirety and to uphold the revocation decision issued on 6 December 2024, as formally communicated on 10 December 2024.

9. Second Hearing Before the Appeals Committee

9.1 The second oral hearing in this matter was convened on 23 May 2025 at 3:15 p.m., and was held virtually via Microsoft Teams. The hearing was organised in line with the framework set out in Procedural Order No. 1 and pursuant to the procedural timeline agreed upon by the Appeals Committee. The purpose of this hearing was to provide the Malta Further and Higher Education Authority (MFHEA) with an opportunity to make its final oral submissions in response to the points raised by the Appellant in its rejoinder and at the first hearing, and to allow for any concluding remarks or clarification from the Appellant.

9.2 The hearing was presided over by the duly constituted Appeals Committee. Mr. Matthew Kitching, the appointed Student Reviewer, was not present at the start of the hearing but was granted access to the complete recording. All participants gave their consent to continuing of the hearing in the absence of Mr Kitching and to the recording.

9.3 Representing the Appellant, Malta ICOM Educational Ltd, were Dr. Joseph Camilleri, Dr. Edmond Zammit Laferla, Mr. Alfonso Mandara, and Ms. Ariane Nolan. Mr. Stephan

Piazza joined during the course of the hearing. The MFHEA was represented by Dr. Dennis Zammit, Legal Counsel, and Ms. Bilyana Boshova, the newly appointed Head of Licensing and Accreditation.

9.4 The hearing was opened by the Chairperson, who restated the purpose of the sitting and invited Dr. Dennis Zammit to present the Authority's final oral arguments. Dr. Zammit began by reiterating MFHEA's fundamental position that Regulation 40(2) of Subsidiary Legislation 607.03 does not apply in circumstances where the Authority has made a determination to revoke a licence following an EQA. He stated that Regulation 40(2) is operative only where the Authority elects to maintain the licence despite identified shortcomings and to impose a remedial obligation. Where, as in this case, the Authority has determined that the gravity of the audit results warrants revocation, Regulation 38(2) alone governs the action taken. To interpret Regulation 40(2) as a mandatory procedural step in all post-audit contexts would, according to the Authority, nullify the discretion conferred by Regulation 38(2) and deprive the Authority of the capacity to act decisively where non-compliance is systemic and serious.

9.5 Dr. Zammit then addressed the Appellant's allegations concerning transparency and procedural integrity. He stated that the MFHEA's communications with the Appellant had been clear and consistent, and that the basis of the revocation decision had been well documented in the audit findings. The Authority's process was described as one that properly flowed from the evaluative work of the Peer Review Panel (PRP), through the Quality Assurance Committee (QAC), and ultimately to the Board of the MFHEA, which made the final determination. He explained that the PRP's role was limited to standard-specific assessments, while the QAC and Board were responsible for considering the overall compliance picture. According to Dr. Zammit, the fact that only two of the eleven standards were found to be met—one of which merely confirmed that the audit had occurred—justified the Authority's conclusion that revocation was necessary in the best interests of students and academic quality.

9.6 In addressing the Appellant's arguments relating to institutional investment and reputational harm, Dr. Zammit underscored that accreditation is not a commercial entitlement. He noted that the Authority's regulatory mandate is directed at protecting students and maintaining educational standards, and cannot be compromised by

considerations of financial expenditure or potential loss of goodwill. He also reminded the Committee that MFHEA had taken practical steps to cushion the impact of revocation. These included the deferral of the effective date of revocation to 1 July 2025, the accommodation of students through resit opportunities until October 2025, and a prohibition on new enrolments to avoid exacerbating institutional risk. He described the Appellant's action plan as a voluminous submission lacking in substantive clarity, particularly with regard to clinical placements and internship arrangements, which were deemed critical for the programme types offered by Malta ICOM.

9.7 Dr. Zammit then turned to the Appellant's reliance on the UCM Judgment. He distinguished the present case from UCM by noting that in UCM, the Authority had invoked Regulation 14 prior to the audit, on the basis of observed violations and misrepresentations. Once the EQA audit in UCM confirmed the extent of the failings, the revocation was immediate and grounded in Regulation 38(2), as was the case here. The difference in procedural timing, he argued, was largely attributable to the COVID-19 pandemic and could not be construed as a departure from regulatory consistency.

9.8 Following the Authority's submissions, the Chairperson invited Dr. Joseph Camilleri to respond on behalf of the Appellant. Dr. Camilleri respectfully contested the Authority's interpretation of the relationship between Regulations 38(2) and 40(2). He argued that the two provisions must be read together, particularly in cases where an audit identifies fundamental defects. He noted that MFHEA's own Notice of Revocation had made explicit reference to Regulation 14, which in turn invokes the curative framework of Regulation 40. In the Appellant's view, the Authority's refusal to provide a reasonable period for rectification was inconsistent with its past practice and incompatible with established principles of good administrative conduct. Dr. Camilleri also restated that the provider in the UCM case had been given extended opportunities to address non-compliance—opportunities which were not afforded to Malta ICOM.

9.9 During the hearing, Mr. Alfonso Mandara requested to address the Committee and sought to introduce additional information concerning Malta ICOM's international clinical practices. The Chairperson intervened to remind the parties that the evidentiary deadline had passed and that no new materials could be submitted at that stage. The intervention was therefore noted but not admitted.

9.10 Ms. Ariane Nolan also took the floor to respond to comments made by the Authority about the volume and structure of Malta ICOM's submissions. She stated that the materials provided were not merely extensive but were compiled in good faith to demonstrate in detail the institution's compliance efforts. She expressed concern that the MFHEA may not have fully appreciated the content or intentions of those documents.

9.11 There being no further interventions or matters requiring clarification, the Chairperson closed the hearing. He thanked all participants for their engagement and cooperation, and confirmed that the matter was now under deliberation by the Committee, which would issue its decision in due course.

10. LEGAL AND REGULATORY FRAMEWORK: ANALYSIS AND FINDINGS OF THE APPEALS COMMITTEE

10.1 Applicable Legal Provisions

10.1.1 The legal foundation of this appeal rests on the Further and Higher Education (Licensing, Accreditation and Quality Assurance) Regulations, Subsidiary Legislation 607.03 of the Laws of Malta (hereinafter referred to as "the Regulations"). The resolution of this matter depends in large part on the proper interpretation and application of several core provisions within the regulatory framework, which were invoked by the parties at various stages of the proceedings and referenced directly in the MFHEA's Notice of Revocation.

10.1.2 The first and most prominently discussed provision is Regulation 38(2), which establishes the Authority's powers following a periodic External Quality Assurance (EQA) audit. The full text of Regulation 38(2) is as follows:

“The Authority shall confirm or revoke provider or programme accreditation status, as the case may be, on the basis of periodic provider or programme quality audits.”

This provision grants the Authority a binary discretion following the completion of an EQA audit, obliging it to either confirm or revoke accreditation. It is understood to be the principal enforcement tool through which the Authority ensures institutional compliance with quality assurance obligations, based solely on the results of the audit process.

10.1.3 The second key provision is Regulation 40(2), which was the subject of much debate in this appeal regarding its applicability. The text reads:

“Where, from the report of the quality audit, and after the provider has submitted its views in accordance with the previous sub-regulation, the Authority finds fundamental defects concerning the provider or the programme, the provider shall be allowed a reasonable time period, as determined by the Authority, to undertake measures to rectify such defects.”

10.1.4 Regulation 40(2) introduces a corrective mechanism applicable in cases where fundamental defects are found. If the Authority opts not to immediately revoke a licence, it may instead allow a period—determined at its discretion—within which the provider may implement remediation. The nature of this discretion, and whether it constitutes a mandatory precondition to revocation, is at the heart of the interpretive divergence between the parties.

10.1.5 In addition to these two central provisions, the parties have referred to and relied upon several other regulations that merit explicit inclusion in the Committee’s analysis.

10.1.6 Regulation 14(1) was expressly cited in MFHEA’s Notice of Revocation. It provides:

“The Authority may, at any time, revoke a provider or programme licence if it is of the opinion that the licensee is failing to comply with the conditions of its licence or with any requirement imposed by or under these regulations.”

10.1.7 This clause empowers the Authority to act outside the EQA process if it determines that a provider is in breach of its licensing conditions or other regulatory obligations. The Appellant argued that by referencing Regulation 14 in its revocation notice, MFHEA created a legitimate expectation that the procedural safeguards normally associated with that provision—such as advance notice and opportunity to remedy—would be observed.

10.1.8 Regulation 15(2) expands upon the procedural requirements where revocation is contemplated under Regulation 14. It provides:

“Where the Authority intends to revoke a licence . . . it shall serve written notice on the licensee of its intention, and shall specify therein the following:

- (a) The grounds on which it intends to take such action;
- (b) A reasonable time period in which the provider shall be entitled to make representations to the Authority as to why such action should not be taken; and
- (c) A reasonable time period during which the provider is required to arrange its affairs in order for the revocation or suspension not to be effected.”

10.1.9 The Appellant cited this provision to argue that it was entitled to a formal notice of intent to revoke and the right to make representations before a final decision was taken. MFHEA contended in reply that Regulation 15(2) is not applicable when revocation is carried out pursuant to Regulation 38(2) following an EQA.

10.1.10 Together, these provisions form the core legal framework under which the revocation decision and subsequent appeal are to be assessed. The divergent interpretations advanced by the Appellant and the Authority concerning the interrelationship of Regulations 38(2) and 40(2), and the procedural relevance of Regulations 14 and 15, are central to the Committee’s evaluation in the sections that follow.

10.2 Both parties have advanced extensive and well-articulated submissions on the legal interpretation of the applicable regulatory provisions, particularly Regulations 38(2) and 40(2). The divergence in their positions reflects two competing views on the architecture and purpose of the regulatory framework governing the revocation of licences in the aftermath of an External Quality Assurance (EQA) audit.

10.3 The Appellant, Malta ICOM Educational Ltd, has argued that Regulation 40(2) is not merely a discretionary procedural option but a binding legal requirement that applies whenever the Authority identifies “fundamental defects” in the course of a quality audit. They emphasise that the regulation is cast in mandatory terms, using the phrase “shall be allowed a reasonable time period,” and that this obligation arises after the provider has submitted its views on the audit report in accordance with the preceding sub-regulation. The Appellant contends that the Authority, having chosen to reference Regulation 40(2) in the original Notice of Revocation, cannot now distance itself from the procedural framework therein established.

10.3.1 Further, the Appellant submits that Regulation 38(2) cannot be interpreted in a manner that renders Regulation 40(2) superfluous or deprived of any independent legal effect. To do so, in their view, would permit the Authority to bypass the core procedural safeguards that are designed to ensure corrective engagement between regulator and provider, particularly in instances where the issues identified, though significant, are remediable. The Appellant insists that the Authority’s invocation of Regulation 38(2) in isolation effectively strips Regulation 40(2) of its normative force and undermines the broader legislative intent behind the regulatory framework, which is to facilitate quality enhancement through cooperative compliance rather than to penalize providers prematurely.

10.3.2 In support of this argument, the Appellant also references the MFHEA’s own conduct in past enforcement cases, most notably the case concerning the United Campus of Malta Higher Institution Foundation. In that matter, the Authority afforded the licensee multiple opportunities over a prolonged period to address shortcomings prior to revocation, thereby, in the Appellant’s view, demonstrating that it recognised and applied Regulation 40(2) as an integral component of the revocation process. The Appellant argues that a departure from that approach in

the present case constitutes discriminatory and inconsistent treatment, breaching the principle of equality of arms and undermining confidence in the regulatory process.

10.3.3 The Appellant therefore submits that the MFHEA's failure to formally engage with the Action Plan submitted in response to the EQA report, and to allow a time-bound remediation period, constitutes a violation of Regulation 40(2) and a procedural impropriety that renders the revocation decision invalid.

10.4 In contrast, the MFHEA has advanced a fundamentally different interpretation. The Authority submits that Regulation 38(2) is the governing provision in cases where a provider undergoes a periodic quality audit and that this regulation confers upon the Authority a discretion to either confirm or revoke accreditation based on the outcome of that audit. The Authority argues that Regulation 38(2) operates as a self-contained enforcement mechanism, enabling it to take decisive regulatory action without being procedurally bound by Regulation 40(2), particularly where the deficiencies identified in the audit are of a sufficiently grave and systemic nature.

10.4.1 MFHEA contends that Regulation 40(2) applies only in those cases where, having identified fundamental defects, the Authority nonetheless opts not to revoke the licence, but rather to continue accreditation subject to conditions and a cure period. It insists that the provision must be read as applying only when a determination has already been made to extend the licence, and not in cases—such as the present one—where the Authority concludes that the identified shortcomings are so severe as to preclude continued operation. In the Authority's view, to hold otherwise would render Regulation 38(2) effectively nugatory, as the Authority would be compelled to allow continued operation in every case, regardless of the severity of the non-compliance, thereby undermining its statutory responsibility to uphold educational standards.

10.4.2 The Authority further asserts that the use of the phrase “as determined by the Authority” in Regulation 40(2) reinforces the interpretation that any period for rectification is entirely conditional on the Authority's initial decision not to revoke. It points out that the Appellant was, in fact, given six weeks to respond to the

EQA report and to submit an action plan—procedural steps which, in MFHEA’s view, satisfied any duty to consider the provider’s remedial efforts before arriving at its decision.

10.4.3 In addressing the Appellant’s reference to the UCM case, the Authority draws a distinction between that matter and the present one. It notes that in the UCM case, revocation was eventually undertaken on the same basis—Regulation 38(2)—following the conclusion of an EQA audit. The difference in timing, MFHEA argues, was attributable to the different factual background and to delays linked to the COVID-19 pandemic. It therefore denies any discriminatory treatment or inconsistency in approach.

10.4.4 In sum, the Authority maintains that the revocation decision was taken in full conformity with the legal framework, and that it acted properly within the scope of the discretion granted to it by Regulation 38(2).

10.5 The Appeals Committee has carefully examined the regulatory framework set out in Subsidiary Legislation 607.03, with particular focus on Regulations 38(2) and 40(2), and has reviewed in detail the contrasting legal positions submitted by the parties. The question before the Committee is ultimately a question of statutory interpretation. It concerns the relationship between two provisions: one which grants the Authority a power to confirm or revoke accreditation status following a periodic quality audit (Regulation 38(2)); and another which purports to introduce a procedural obligation to allow a cure period where fundamental defects are identified (Regulation 40(2)). The proper reconciliation of these two provisions lies at the heart of the present appeal.

10.6 The Committee acknowledges at the outset that the submissions put forward by the Appellant are thoughtful, and grounded in a principled conception of administrative justice. There is considerable intellectual force behind the argument that Regulation 40(2) must have independent legal effect, and that it cannot be read as a dead letter merely because the Authority has resolved to revoke a licence following an EQA. The Appellant is right to draw attention to the fact that Regulation 40(2) uses mandatory phrasing—“shall be allowed a reasonable time”—and to argue that this provision must therefore

impose some level of constraint on the Authority's conduct, particularly where the defects identified are deemed remediable and not inherently disqualifying.

10.7 The Committee also considers that the Appellant's reliance on the internal consistency of the MFHEA's own actions and documents, including the express reference to Regulation 40(2) in the Notice of Revocation, is not misplaced. Such references, even if not dispositive, raise legitimate expectations of procedural treatment under that provision.

10.8 In administrative law terms, they contribute to what could be described as a procedural legitimate expectation, which, in certain contexts, may shape the fairness of the process.

10.9 Nevertheless, after weighing these considerations against the plain language of the legislation, the broader statutory structure, and the established purpose of regulatory oversight under the Regulations, the Appeals Committee finds that the MFHEA's interpretation of the law must ultimately prevail.

10.10 The legal structure created by Regulation 38 is not an ancillary mechanism but a core regulatory function. It provides the Authority with an express power and, indeed, an obligation, to make a binary determination following a periodic quality audit: either to confirm or to revoke provider or programme accreditation status. Regulation 38(2) states, without equivocation:

“The Authority shall confirm or revoke provider or programme accreditation status, as the case may be, on the basis of periodic provider or programme quality audits.”

10.11 The wording is categorical. It does not import conditions or preconditions. It does not state that the Authority may revoke accreditation “provided that” it first applies Regulation 40(2). Instead, the only operative trigger is the outcome of the quality audit, and the Authority's determination, acting on that outcome, as to whether the continuation of accreditation is appropriate.

10.12 By contrast, Regulation 40(2) is clearly situated within a different textual and structural context. It follows Regulation 40(1), which governs the form and content of

audit reports. Regulation 40(2) then introduces a conditional procedural obligation in cases where “fundamental defects” have been found and the provider has submitted its views. It reads:

“Where, from the report of the quality audit, and after the provider has submitted its views in accordance with the previous sub-regulation, the Authority finds fundamental defects concerning the provider or the programme, the provider shall be allowed a reasonable time period, as determined by the Authority, to undertake measures to rectify such defects.”

10.13 While the use of the term “shall be allowed” might prima facie suggest an imperative duty, this interpretation cannot be sustained when Regulation 40(2) is read alongside Regulation 38(2) and considered within the overall logic of the regulatory framework.

10.14 The key interpretive phrase is “as determined by the Authority.” This qualifies the cure period and vests in the Authority the discretion to assess not only the duration of any opportunity to remedy, but whether such a period is appropriate in the first place. To interpret Regulation 40(2) as creating a mandatory procedural step in all post-audit cases involving fundamental defects—irrespective of severity, irreversibility, or provider history—would be to nullify the discretion that Regulation 38(2) explicitly confers. It would convert what is intended to be a two-track system (revocation or confirmation) into a single, prolonged process in which revocation can never be exercised until after a remediation period.

10.15 The Committee is of the view that such an interpretation would undermine the autonomy of the regulator and is inconsistent with the principle that the Authority must act not only for the benefit of providers, but also in the public interest, including that of students and the integrity of the education system.

10.16 Indeed, there are circumstances—such as those alleged in this case—where the outcome of the audit is so significantly deficient across multiple standards that the question of permitting rectification ceases to be a reasonable or viable option. In the present case, the EQA found that the Appellant failed to meet seven out of eleven quality

standards, required improvement on two others, and only met two standards—one of which was the mere fact that the audit was conducted. These outcomes, particularly in a context involving health-related education at MQF Level 7, may justify a conclusion that the institutional and academic failures are systemic rather than isolated, and not susceptible to mere procedural cure.

10.17 The Committee also accepts the Authority’s broader concern that accepting the Appellant’s interpretation would effectively create a *per se* entitlement to continue operations regardless of audit outcome. That, in turn, would risk reducing Regulation 38(2) to a merely declaratory clause, unable to be applied in real time and contingent upon future hypothetical compliance. The law does not support such a model.

10.18 Finally, the Committee is mindful of the risk of treating legislative references in isolation. While Regulation 40(2) was cited in the Notice, this does not, in the Committee’s view, amount to a waiver of the Authority’s discretion under Regulation 38(2), nor does it convert the structure of the law into a binding sequence in which revocation becomes impossible until a remediation phase is exhausted. There is nothing in the Regulations to support a chronological rigidity of this kind. If the Authority determined—on the strength of the audit and the provider’s submissions—that no feasible cure was available, then Regulation 38(2) remained the correct procedural instrument, and Regulation 40(2) was not engaged.

10.19 Therefore, while the Committee acknowledges the compelling nature of the Appellant’s reasoning, it concludes that, under a strict legal analysis of the operative provisions, the Authority was not obliged to allow Malta ICOM a further remediation period under Regulation 40(2), and that its reliance on Regulation 38(2) was not only legally permissible, but was consistent with the statutory text, structure, and purpose of the regulatory regime.

11. The UCM Case and Its Relevance to the Present Appeal

11.1 During the course of this appeal, both parties referred to the United Campus of Malta Higher Institution Foundation v. Malta Further and Higher Education Authority, decided by the Court of Appeal (Inferior Jurisdiction) on 26 February 2025. The Appellant placed considerable emphasis on this case in support of its argument that MFHEA’s revocation of its licence in the present matter was inconsistent with prior regulatory practice, procedurally unfair, and disproportionate. The Authority, by contrast, argued that the UCM case supports its interpretation of the law, and that the procedural differences are attributable to materially distinct factual circumstances.

11.2 The Appeals Committee has reviewed the full judgment in the UCM case and considers it appropriate to clarify its significance in this context.

A. Procedural Outcome of the UCM Case

The UCM case was ultimately decided on purely procedural grounds. The Court of Appeal held that the appeal filed by UCM against the MFHEA’s revocation decision was inadmissible, because no appeal lies on the merits and, in any case, it had been filed out of time.

For these reasons, the Court declined to entertain the appeal and dismissed it *in limine*, declaring it null and without legal effect. It therefore never examined the merits of whether MFHEA had acted correctly under Regulation 38(2), Regulation 14, or Regulation 40(2).

B. Contextual and Factual Distinctions

That said, the judgment, as well as the annexed factual narrative, contain several features that offer limited but relevant comparative context for the present case.

First, the record shows that in the UCM matter, MFHEA had engaged in communications and formal warnings with the licensee for an extended period prior to revocation, beginning as early as 2019. The Authority issued a letter of intent to revoke, received

multiple submissions, and postponed enforcement partly due to administrative transition and the COVID-19 pandemic.

Second, the EQA process in UCM was similarly negative, with the provider reportedly failing all but one standard. However, MFHEA appears to have taken the revocation decision after a two-year window of monitoring and follow-up, including an internal restructuring of the provider and requests for information from foreign regulators.

By contrast, in the present case, the Authority issued a revocation decision within weeks of receiving the Appellant's action plan, albeit after what it considered a sufficiently damning EQA report.

The Appellant in this case argues that this disparity constitutes unequal treatment, particularly as the lead actors in both cases—including MFHEA's Chairperson, CEO, and QAC Chair—were largely the same. While this point is not without force, the Appeals Committee notes that regulatory practice may justifiably differ depending on the specific risk profile and urgency of the case at hand. The fact that revocation followed after longer dialogue in one case does not create a binding procedural standard in all others, especially in the absence of a judicial pronouncement on the merits.

The Appellant in this appeal has sought to argue that this divergence in regulatory conduct amounts to inconsistent and discriminatory treatment, especially considering that the principal figures within the MFHEA—namely the CEO, the QAC Chair, and members of the Board—were the same in both cases. There is, on the face of it, some intuitive appeal to the idea that similarly placed providers should be treated similarly, particularly by the same institutional actors.

However, the Committee is equally mindful of the fact that no two enforcement situations are perfectly alike, and that regulatory discretion must be exercised in light of the circumstances prevailing at the time. The MFHEA is not legally required to adopt an identical procedural approach in all cases, especially where different degrees of non-compliance, risk to students, or institutional responsiveness may exist. Moreover, the Authority is statutorily entrusted with the discretion to determine whether deficiencies are of such a magnitude that immediate revocation is necessary to protect the public interest.

In the Committee's view, the UCM case may offer useful insight into how MFHEA has approached enforcement in the past, but it does not establish a procedural template that binds the Authority in future actions. The case does not constrain the legal powers conferred under Regulation 38(2), nor does it elevate Regulation 40(2) to a mandatory step that must precede all revocations. The most that can be said is that MFHEA's conduct in UCM underscores the importance of clear procedural engagement, and that consistency in enforcement, while not legally mandated in rigid terms, contributes to public confidence in regulatory institutions. This is a principle the Committee affirms, but it does not suffice to disturb the outcome of the present matter, given the distinct facts and legal framework at issue.

C. Final Note

In view of the above, the Appeals Committee considers that the UCM case provides useful background for understanding the MFHEA's internal practice but is of limited relevance to the legal questions that arise in this appeal.

12. EVALUATION OF THE APPEAL ON THE MERITS

- 12.1 Having reviewed the relevant regulatory provisions, the documentary and oral submissions of the parties, and the procedural background to the decision under appeal, the Appeals Committee proceeds to evaluate the appeal on the merits. This assessment involves determining whether the MFHEA acted lawfully, proportionately, and in accordance with the principles of procedural fairness and reasoned decision-making in deciding to revoke Malta ICOM's provider licence.
- 12.2 The Committee's determination will address each of the grounds of appeal in turn, with reference to the evidence and arguments presented. It will consider whether the Authority's interpretation and application of the Regulations was legally correct and procedurally fair, and whether the decision to revoke the licence was justified in light of the findings of the External Quality Assurance audit and the Appellant's subsequent conduct.

The Committee has determined the following in relation to each substantive point made with respect to the institution's claim regarding the initial report:

Standard 1: within EQA Findings' Report comments, it states that recruitment was outsourced. This is factually not correct since it was not the case in 2023-24 and exceptionally only occurred once for the 2021 physiotherapy intake due to COVID-19 related restrictions. The EQA Findings' Report requires to be amended in this regard.

The institution does not dispute that this practice has happened historically. The Committee therefore considers that the text as written — “recruitment was subcontracted in some instances” — is accurate. Nevertheless, the Committee accepts that there is an overemphasis on this given its historic context (2021). That said, the recommendation that relates to this (MR5) requires the institution to ensure oversight and quality assurance of subcontracted activity. The institution is not challenging that research support and supervision is still subcontracted. Therefore, the Committee considers the recommendation should stand, even if the reference to recruitment is removed. Given the overall number of recommendations and the broader findings in this standard, the security of the judgement is not affected.

Standard 2: within EQA Findings' Report comments, it states that Malta ICOM furnished the PRP with up-to-date beneficial ownership information showing that the ultimate beneficial owners of Malta ICOM are Mr Sarni Rifai and Mr Alfonso Mandara, who effectively own 50% and 35%, respectively, of Malta ICOM Educational Ltd. This comment is factually incorrect since the ultimate beneficial ownership of Malta ICOM is registered with the Malta Business Registry, and as notified to the PRP together with the supporting documentation, as follows: (1) Mr Alfonso Mandara as holding indirect ownership of shares exceeding the 25%+1 threshold; and (2) Mr Sarni Rifai as having other means of control. The EQA Findings' Report requires to be amended in this regard.

The Committee notes that this information was provided by the institution's accountants. The Committee considers that this is a matter more appropriately adjudicated by the institution's financial advisors. Accordingly, the Committee does not express a view on

the correctness of the figures cited, and does not consider that this observation, even if imprecise, had a material effect on the overall judgement reached by the PRP.

Standard 3: within EQA Findings' Report comments, it states that the PRP did not see evidence of Catania (Italy) on the licensing conditions ICOM LC 2023. Malta ICOM had submitted to the MFHEA all the documentation required relating to Catania (Italy) on the 12th June 2023 and on the 28th July 2023 (Doc. MI 8). This comment is factually incorrect and thus, the EQA Findings' Report requires to be amended in this regard;

The Committee finds no basis to conclude that the panel's observation was factually inaccurate. While the institution may have provided documentation to MFHEA staff in 2023, the record shows that the requested information was not submitted to the PRP during its review. It is incumbent on the provider to ensure that material relied on to demonstrate compliance with licensing conditions is made available to the PRP during the audit process.

Furthermore, the Committee notes that the Appellant has not submitted evidence that fully addresses the panel's concern. In this regard, the Committee refers to correspondence from the MFHEA dated 13 June 2023, in which Ms Maxine Mifsud, writing on behalf of the Authority, stated:

“Regarding the Catania venue, you had submitted some documentation (such as the floors plan, lease contract, insurance policies etc), however as discussed during the meeting please submit documentation that Malta ICOM Educational has permission from the Italian authorities to operate from the Italian premises.”

The record indicates that further correspondence followed, including a reminder. The Appellant's subsequent response of 28 July 2023 did not, in the Committee's view, provide the documentation or assurance that the MFHEA and the PRP had requested.

The Committee also observes that while it is not in a position to evaluate the full legal effect of Italian licensing requirements, the materials submitted (e.g. lease agreements,

floor plans, and insurance policies) represent supporting elements but do not constitute conclusive evidence that all host country licensing requirements were met.

Accordingly, the Committee finds that the PRP's comment cannot be considered erroneous, and the Appellant's claim in respect of this point is rejected.

Standard 4: within the EQA Findings' Report comments, it states 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. There was no documented evidence for this statement which leads to MR18 whereby Malta ICOM is being required within a period of three (3) months from the date of publication of the EQA Finding's Report, to implement a dedicated system that ensures transparent, reliable, consistent and fair examination procedures and as such both such erroneous statement and the relative MR18 are being contested in toto and consequently, should be removed from the EQA Findings' Report.

The Committee considers that the PRP could have improved the drafting of this section, particularly in terms of clearly identifying and referencing the supporting evidence. However, the Committee finds that the concerns raised by the panel are substantiated by specific references in the report, including the following passage:

“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.”

While it would have been helpful for the PRP to elaborate on the nature of the risk posed by this method of circulation and translation, the Committee recognises the potential vulnerabilities this practice creates, particularly in terms of the security, standardisation, and integrity of examinations. As quality assurance experts, the Committee agrees that such methods raise legitimate concerns, even if the evidence presented could have been more explicitly documented.

The PRP also noted other shortcomings, including the lack of online proctoring tools for remote examinations, the recycling of examination papers, and inconsistencies in assessment procedures across different Italian placement centres. The Committee agrees that the recycling of exam papers is problematic from an assessment security perspective, as it increases the likelihood of students gaining advance knowledge of assessment content.

Although the panel's phrasing could have been clearer in places, and although some assertions would have benefited from further explanation, the Committee does not find that the recommendation (MR18) lacks foundation. On the contrary, the concerns raised are consistent with good practice in assessment management.

Accordingly, the Committee finds that MR18 is justified, and the Appellant's grievance is not upheld.

Standard 6: within the EQA Findings' Report comments, it states that Malta ICOM does not encourage collaboration and communication between teaching staff and COME. Once again, there was no documentary evidence to support this assertion and as such, this conclusion is being contested and consequently, should be removed from the EQA Findings' Report.

The Committee notes that the Report does not cite a specific source or evidence reference to support this observation. However, the Committee considers it plausible that the PRP based its comment on information gathered during staff interviews conducted as part of the site visit. It is common in external quality assurance processes for panel members to consider verbal responses during meetings with institutional stakeholders, and the Committee accepts that the PRP may have drawn its conclusion from statements made during such meetings.

The Committee also notes that this comment does not result in a specific recommendation. It does not underpin a mandatory or key recommendation, nor does it materially affect the scoring or judgment applied to the relevant standard.

Furthermore, the Appellant has not submitted documentary evidence during the appeal proceedings to demonstrate that collaboration and communication between teaching staff and COME were encouraged or formally supported at the time of the audit.

Accordingly, while the evidentiary basis for the panel's comment could have been made clearer, the Committee finds that the comment does not alter the substance of the judgment on the standard, nor does it result in an actionable recommendation. The Committee therefore rejects the institution's claim.

Standard 6: with reference to KR5 of the EQA Findings' Report, Malta ICOM was required to establish within two (2) months from the date of publication of the EQA Findings' Report, a formally structured class observation through the compilation of an adequate observation form and document follow-up. It is emphasised that this formal structure was already in place prior to the audit and the PRP was informed accordingly. This was evidently ignored by the PRP and thus, it is being contested that such a recommendation should not have been included in the EQA Findings' Report.

The Committee reviewed the Appellant's appeal submission and its response to KR5 as set out on page 52 of the EQA Findings' Report. There, the Appellant itself acknowledges that it is "working to ensure all observations are documented," which the Committee interprets as a confirmation that the process of formalising class observation procedures was ongoing at the time of audit.

The Committee also notes that the PRP explicitly recognised in its text that work on observation structures had commenced. This acknowledgement is reflected in the classification of the recommendation as a Key Recommendation, rather than a Mandatory one. Moreover, the two-month implementation timeframe assigned to KR5 suggests that the required action was considered to be achievable in a short period, reinforcing the view that the PRP regarded the existing structure as partial but not yet fully formalised.

The Appellant has not submitted further documentary evidence at appeal stage that would demonstrate that the PRP was misinformed or that the requirement imposed under KR5 was unnecessary at the time of the audit.

Accordingly, the Committee finds that the recommendation was justified in the circumstances and that the PRP's conclusion does not warrant amendment. The Committee therefore rejects the institution's claim.

Standard 8: the EQA Findings' Report once again mentions outsourcing of recruitment. Such an assertion is already being contested in toto since it is factually incorrect as detailed under paragraph (i) above.

The Committee refers to its earlier findings under Standard 1. There, it accepted that while recruitment was not outsourced during the 2023–24 academic year, it had been outsourced in the past, and that the wording “recruitment was subcontracted in some instances” is factually accurate in that context. The Committee also accepted that this practice was limited to the specific circumstances of the 2021 physiotherapy intake during the COVID-19 period.

In respect of Mandatory Recommendation 21 (MR21), which relates to Standard 8, the Committee notes that the recommendation requires the institution to establish appropriate procedures for data security, particularly in the context of subcontracted activity. While the reference to recruitment may be limited in scope or dated, the broader concern underlying the recommendation — namely, the safeguarding of data when any activity is subcontracted — remains relevant and justified.

The Committee therefore considers that even if the reference to subcontracted recruitment were to be removed from the EQA Findings' Report, MR21 would still stand. The recommendation is forward-looking and serves a legitimate quality assurance function.

Accordingly, the Committee rejects the institution's claim in relation to this standard.

Standard 9: with reference to KR13 of the EQA Findings' Report, Malta ICOM is being requested to provide within three (3) months from the date of publication of the EQA Findings' Report, 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. This was already in existence at the time of the carrying out of the EQA process and the PRP was informed accordingly. This was evidently ignored by the PRP and thus, it is being contested that such a recommendation should not have been included in the EQA Findings' Report.

The Committee notes that the PRP does not dispute the existence of such information on the institution's website. Rather, the panel observed that the information was not available in an easily accessible location. The operative part of the recommendation is therefore not that the information must be created or introduced, but that it must be made more clearly visible to website users — a reasonable objective under transparency and accessibility standards.

The classification of the recommendation as a Key Recommendation, rather than a Mandatory one, also reflects the fact that the substance of the requirement had been partially met. The recommendation addresses a matter of clarity and visibility rather than content or compliance.

Moreover, the Appellant has not submitted evidence during the appeal proceedings showing that the regulatory statement was prominently displayed on its website at the time of the audit visit. In the absence of such evidence, the Committee finds no reason to set aside the PRP's conclusion or its recommendation.

Accordingly, the Committee rejects the institution's claim in respect of this standard.

Conclusion on the Appellant's Grievances Regarding the EQA Findings' Report

Thus, having reviewed each of the Appellant's objections to the factual content and recommendations contained in the EQA Findings' Report, the Committee finds no

sufficient basis to amend or overturn any of the panel's key or mandatory recommendations. While in certain instances the language of the report could have been more precise or supported by clearer evidence, the Committee is satisfied that the findings and resulting recommendations were, overall, appropriately grounded and proportionate. The Appellant's claims on the merits are therefore not upheld.

13. DECISION OF THE APPEALS COMMITTEE

13.1 The Appeals Committee has given full and careful consideration to the submissions, documents, and arguments presented by both parties. Procedural concerns raised by the Appellant have been addressed in previous sections of this decision and need not be repeated in detail here. Suffice it to note that, although the Appellant's arguments regarding procedural fairness were presented with a degree of legal sophistication and merit, the Committee is satisfied that, in the context of the applicable regulatory regime and the facts of this case, the Malta Further and Higher Education Authority acted within the bounds of lawful discretion and afforded the Appellant a process that, taken as a whole, met the threshold of fairness and transparency.

13.2 The Committee is acutely mindful of the gravity of a revocation decision. It is well aware that the termination of a provider's licence is the most serious regulatory sanction available under Subsidiary Legislation 607.03, with significant implications for the institution, its students, staff, and stakeholders. It is for this reason that the Committee has approached this appeal with a heightened sense of scrutiny and responsibility.

13.3 Nonetheless, and precisely because of the seriousness of what is at stake, the Committee considers that it would be irresponsible—and indeed contrary to its role as guardian of quality and regulatory integrity—to overturn a revocation decision in circumstances where the evidence of substantive institutional deficiency is so compelling.

13.4 The Committee has reviewed the findings of the External Quality Assurance audit, which identified non-compliance with seven out of eleven national quality assurance standards, and rated a further two standards as requiring improvement. These results are, in the Committee's view, indicative not of isolated lapses, but of systemic shortcomings in institutional governance, academic oversight, information management, programme

quality assurance, and clinical placement monitoring. The fact that the Appellant operates MQF level 7 programmes in health-related fields, where public trust and professional competence are paramount, only heightens the seriousness of these failings.

13.5 While the Appellant did present a corrective action plan and supplementary submissions, the Committee is not persuaded that these efforts sufficiently counterbalance the audit findings. Much of the documentation provided post-audit lacked clarity, verifiability, or evidence of concrete implementation. Moreover, as explained in earlier sections of this decision, the Authority was entitled under Regulation 38(2) to proceed to revocation directly, without being procedurally obliged to afford a cure period under Regulation 40(2). This does not mean that Regulation 40(2) is irrelevant—it is a meaningful procedural instrument in appropriate cases—but in this instance, the extent and nature of the deficiencies disclosed rendered immediate revocation both lawful and justified

13.6 The Appeals Committee further notes that while the Appellant pointed to MFHEA’s own previous enforcement conduct, including the United Campus case, as evidence of inconsistency, the factual context and procedural pathway in that matter were materially different. The Appellant’s arguments do not, in this Committee’s view, establish discriminatory enforcement or regulatory bad faith

13.7 In conclusion, the Committee reaffirms the principle that form should not override substance, particularly in regulatory contexts where educational quality and public trust are at stake.

13.8 The arguments advanced by the Appellant concerning procedure, although not without merit in theory, do not overcome the fundamental issue that the underlying quality failings were grave, systemic, and sufficiently established to warrant the action taken. The revocation was not an arbitrary decision—it was a necessary regulatory response to institutional performance that fell short of what the law and the public expect from a licenced higher education provider.

13.9 Determination

In view of the foregoing, the Appeals Committee hereby determines:

- i. That the appeal lodged by Malta ICOM Educational Ltd on 27 December 2024 is dismissed in its entirety.
- ii. That the decision of the Malta Further and Higher Education Authority, dated 6 December 2024 and formally communicated on 10 December 2024, revoking the provider licence held by Malta ICOM Educational Ltd (Licence No. 2018-003), is confirmed in full.
- iii. That the appeal fee shall not be refunded, whether in whole or in part.

Signed on behalf of the Appeals Committee:



Dr John L. Gauci
Chairperson

Prof. Milan Pol
Peer Reviewer



Mr Matthew Kitching
Student Reviewer