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Contents

INTRODUCTION

PURPOSE

This Quality Management System (QMS) establishes a framework for the International Health Research Institute (IHRI) to consistently deliver high-quality online Level 7 and Level 8 healthcare programmes. This QMS procedure and manual is a reference guide for IHRI staff to understand, implement, and maintain quality standards and processes.

DEFINITIONS

TERM OR ABBREVIATION	DEFINITION
QMS	Quality Management System
PDCA	Plan-Do-Check-Act (a continuous improvement cycle)
Non-Conformance	A deviation from established quality standards
CAPA	Corrective and Preventive Action
MFHEA	Malta Further and Higher Education Authority
QAPU	Quality Assurance (QA) and Planning Unit

Quality Policy

IHRI is committed to delivering the highest-quality online healthcare programmes, continually improving our operations, and meeting the needs of our students and stakeholders while adhering to regulatory requirements.

IHRI has devised a quality framework built on leadership, strategy, teamwork, customer focus, systems, processes, and procedures. The IHRI QA framework follows the standards established by the Malta Further and Higher Education Authority (MFHEA).

Quality Objectives

IHRI sets the following quality objectives:

1. To achieve a student satisfaction rate of at least 90%.
2. To ensure students meet the requirements of their area of discipline.
3. To maintain accreditation from recognised bodies.
4. To continually enhance faculty and staff professional development.

Responsibility and Authority

Considering the critical role of quality assurance processes in the success of higher education, the Institute set up the Quality Assurance (QA) and Planning Unit (QAPU) to liaise with the various stakeholders of the Institute regarding the management of quality assurance. The QAPU comprises the Chair of the Academic Council, the President's Office, and the Head of Quality Assurance. It is a functional quality assurance and planning unit that provides adequate direction in managing quality assurance processes and procedures in the Institute.

The unit's main objective is to satisfy all stakeholders so that the services provided by the Institute across teaching, learning, research, and service are of the highest quality possible. This is operationalised by demonstrating that the Institute's award standards are appropriate and that the resources to meet the requirements of the academic infrastructure and other external benchmarks are of acceptable quality.

The president of IHRI is responsible for the QMS. The Quality Assurance Department is responsible for implementing and maintaining the QMS, with support from Heads of Centres and staff. Quality assurance permeates the institution, and everybody is responsible for ensuring that the quality objectives are met.

Reference Documents
- DOC058 Administration - Position Description External Examiner
- DOC059 Administration - Position Description Faculty
- DOC061 Administration - Position Description IHRI Administrator
- DOC062 Administration - Position Description Institute Director (IHRI Dean)
- DOC064 Administration - Position Description Module Coordinator
- DOC065 Administration - Position Description Postgraduate Programme Director
- DOC067 Administration - Position Description Student Services
- DOC068 Administration - Position Description Director, Quality Assurance
- DOC069 Administration - Position Description Quality Assurance Department
- DOC081 Administration - Position Description Director of Space Research

Management System Documentation

IHRI maintains a documented QMS, which includes:

- Quality Manual: This document outlines IHRI's QMS, including its structure, policies, procedures, and work instructions.
- The IQA – The main policy document outlining the regulatory requirements of a Higher Education Institution based in Malta.
- Records: Documented evidence of compliance and process performance

Document Control

The Quality Assurance Department is responsible for facilitating the regular review of processes and ensuring that academic and administrative policies, procedures and regulations are updated accordingly. All corporate, academic, and administrative documents are available in a template with a unique number (identifier) and revision status displayed as part of the document control template. All revision changes are assigned a unique 'Document Change Tracking Number' to ensure a revision trail of all the changes to the policies, procedures, regulations, and Forms in use. A master list of documents is kept in the QA Administration. The list includes, as a minimum:

1. Document Number
2. Document Revision
3. Document Title
4. Document Type
5. Approver
6. Date Releases
7. Document Change Tracking Number
8. Document Change Proposed by

The QA Department disseminates new or updated academic and administrative policies, regulations, procedures, and forms via the Cloud, notifying all staff, faculty, and students that files have been updated.

The President is responsible for ensuring that the staff comply with these documents' contents. Student-centred documents are uploaded onto the Student Hub, whereas internal administrative documents are available via the Faculty Hub. Staff and students have access to the relevant Hubs via their IHRI email address.

Reference Documents

IHRI Master List of Policy and Procedure

Quality Records

Quality records are required where it is necessary to demonstrate:

- Compliance with Corporate policies, regulations, and procedures
- Effectiveness of the Quality Management System
- Compliance with external regulatory requirements (MFHEA, Ministry of Education, etc.).

In the above cases, employees are responsible for ensuring that the record sheets are legible and readily retrievable. Quality records are stored in a safe and secure environment. The end-user is responsible for ensuring confidentiality, the minimum retention time for records, and the maintenance, storage, and disposal. Access to records by external parties to the Institute is governed by the General Data Protection Regulation (GDPR) provisions.

Management System Processes

IHRI identifies, documents, and maintains processes required for the QMS. These processes include, but are not limited to, the following:

- Curriculum Development
- Student Enrolment and Support
- Faculty Recruitment and Development
- Quality Review and Audits
- Corrective and Preventive Actions (CAPA)
- Internal and External Communication (circulars, meeting minutes, social media and press releases)

Reference Documents

- DOC002 Administration - ICT Acceptable Use Policy and Procedure
- DOC003 Administration - Academic Progression Policy
- DOC005 Administration - External Peer Review Policy and Procedure
- DOC007 Administration - Learning, Teaching & Assessment
- DOC009 Administration - Procedure for Processing Claims for Certificates at Interim Exit Points
- DOC010 Administration - Protection of Personal Data in Email and Electronic Communications
- DOC011 Administration - QA Policy and Standards for Online Teaching and Learning
- DOC015 Faculty - Lecturer Performance Appraisal Procedure
- DOC016 Faculty - Recruitment and Selection
- DOC017 Faculty - Staff Code of Conduct
- DOC018 Faculty - Staff Professional Development
- DOC023 Student - Digital Experience Policy
- DOC022 Student - Code of Conduct

Resource Management

IHRI allocates the necessary resources, including personnel, infrastructure, and technology, to effectively support the QMS processes.

Risk Management

IHRI identifies, assesses, and mitigates risks that could impact the quality of education and research. The Institute maintains a Risk Register and regularly reviews risk mitigation strategies to help ensure the Institution's resilience and success.

Reference Document

- [DOC070 Administration – Risk Register](#)

Performance Evaluation

IHRI conducts regular performance evaluations to monitor the effectiveness of the QMS. These evaluations include:

- Internal Audits: Conducted to ensure compliance with QMS procedures.
- Management Review: An annual review of the QMS's performance, objectives, and opportunities for improvement.
- Student and Stakeholder Feedback: Collected to assess satisfaction and identify areas for improvement.
- External Benchmarking and Referencing

Internal Audits

The main objective of such audits is to identify best practices and delve into areas that pose risks to the smooth running of processes and, hence, require improvement, necessitating the delineation of strategies for corrective action.

The scope of the engagement is to reinforce the institution's strengths, identify opportunities, anticipate threats, and address weaknesses through an open and transparent encounter with staff, faculty, students, and other stakeholders.

Involvement of External Stakeholders

The Institute Directors are in regular contact with the external stakeholders through the strategy consultation process (records of all meetings and events are kept), direct feedback on the development of programmes and their cyclical review, seminars, sponsorship of teaching resources, discussion on student placements, setting up of Memorandum of Understanding and others.

The Institute has a Quality Planning Unit that provides IHRI with an interface with local and foreign institutions, organisations, entities, and industry, helping identify and develop relationships for mutual benefit and for students attending IHRI. This unit provides information about IHRI and its services to local and foreign institutions, organisations, entities, and industries, enabling them to access these services to advance and develop. It serves as a catalyst, facilitating agreements and memoranda of understanding between IHRI and local and foreign institutions, organisations, entities, and industries that help build relationships that benefit all parties, most notably students.

Involvement of Internal Stakeholders

The Institute is committed to maintaining a strategic presence in all relevant National and European policy-making settings where decisions on Quality Assurance in Higher Education are discussed and

taken. In this regard, the President and Vice President hold nominations on National and International Boards and committees. In this way, the Institute is not only informed of stakeholders' changing needs but can also influence the decisions being taken.

Measurement of Stakeholder Engagement

Several Quality Assurance processes and measures are in place to ensure that the needs and expectations of external and internal stakeholders are identified and fulfilled.

- The Involvement of staff, faculty, and students in the development of the competencies of full and part-time programs and courses through the mechanisms of the Academic Council and feedback opportunities
- The provision of different communication options for the public to contact the Institute. The Institute's website and Social Media accounts are examples of such options.
- The monitoring and measuring of student satisfaction concerning the delivery of academic and support services for full-time and part-time courses.
- Providing academic assistance and other support services ensures the best possible relationship with the student.
- The registration, addressing and documentation of any reported academic or service-related customer dissatisfaction (complaints) at the Institute.
- The provision of opportunities for appeals in various processes against decisions related to assessment, discipline or reporting of grievances) which do not satisfy the student.
- The organisation of student review module feedback to address specific concerns or to obtain input regarding a specific issue.
- The purpose of this is to collect student feedback/complaints regarding their learning experience during their stay at the Institute and after graduation.

External Benchmarking and Referencing

External benchmarking and referencing is a process by which a higher education provider compares an aspect of its operations with an external comparator(s), e.g., the design of a course of study or the achievement of learning outcomes with those of a course from another provider.

The purposes of external referencing are varied but typically include:

- Providing evidence of the quality and standing of a provider's operations
- Offering an external evidence base as context for developing internal improvements, especially student outcomes.
- Establishing or fostering collaborative improvement efforts across providers.

A provider that does not undertake external referencing, aside from not meeting MFHEA Audit requirements, is at risk of being increasingly insular and inward-looking with a diminished evidence base to inform decision-making.

The provider may also be vulnerable concerning backing any claims about its offerings in the market or student success. Failure to undertake external referencing may limit awareness of recent advances or leave a provider 'reinventing the wheel' when an external reference may have been equally suitable at a lower cost. A lack of international perspective also jeopardises any claims about the quality and standing of Maltese Higher Education.

Failure to undertake some form of peer review of assessments that are fit for the specific purpose may result in local grading and marking outcomes that deviate from standards in the wider academic community.

Reference Documents

- [DOC073 Administration - Programme Evaluation Plan](#)
- [DOC072 Administration - Module Evaluation Template](#)
- [DOC015 Faculty - Lecturer Performance Appraisal Procedure](#)
- [DOC011 Administration - QA Policy and Standards for Online Teaching and Learning](#)
- [DOC005 Administration - External Peer Review Policy and Procedure](#)
- [DOC033 Faculty - Appraisal General Report](#)
- [DOC036 Faculty - Module and Faculty Review](#)
- [DOC038 Faculty - Research Programme Progress Report](#)
- [DOC039 Faculty - Self-Evaluation Form](#)
- [DOC047 Student - Graduate follow-up survey](#)
- [DOC050 Student - Module Feedback Form](#)
- [DOC053 Student - Research Programme Progress Report](#)
- [DOC074 Administration - External Benchmarking](#)

Improvement

IHRI is committed to continuous improvement through the PDCA cycle:

- Plan: Identifying opportunities for improvement.
- Do: Implement changes and improvements.
- Check: Measuring the results and effectiveness of changes.
- Act: Taking actions to standardise, adjust, or expand improvements.

IHRI encourages staff and faculty to report non-conformances and participate in Corrective and Preventive Actions (CAPA) to address issues and prevent recurrence.

This Quality Management System Procedure and Manual are maintained and updated as needed to reflect changes in IHRI's processes and to ensure ongoing compliance with quality standards and regulations.

APPENDIX / REFERENCES

- ISO 9001:2015 - Quality Management Systems – Requirements
- Malta Further Higher Education Authority