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| <b>Document Name and Version</b>              | <b>9.6 IICP College Reviewing the Effectiveness of Quality Assurance: Institutional Review.</b>                                                                                                                                                                                              |
| <b>Policy Number</b>                          | 9.6                                                                                                                                                                                                                                                                                          |
| <b>Policies that Interact with Policy 9.6</b> | Policy 9.4 IICP College Monitoring and Evaluation Policy.<br>Policy 9.5 IICP College Programme Review and Revalidation.<br>Policy 2.7 Terms of Reference of Academic Council<br>Policy 2.8 Terms of Reference of Senior Management Team<br>Policy 2.9 Terms of Reference of Programme Boards |
| <b>Approval Body</b>                          | Academic Council                                                                                                                                                                                                                                                                             |
| <b>Date of Approval</b>                       | February 2020                                                                                                                                                                                                                                                                                |
| <b>Date Policy Comes into Force</b>           | 25 <sup>th</sup> January 2021                                                                                                                                                                                                                                                                |
| <b>Date of Review</b>                         | 2025                                                                                                                                                                                                                                                                                         |
| <b>Revisions</b>                              |                                                                                                                                                                                                                                                                                              |

## **1. Preamble.**

1.1. IICP College is committed to implementing quality assurance procedures which ensure that its educational and training programmes are developed and delivered to a high standard. The College is committed to ensuring that both the operation and control of its quality assurance processes are effective and that they contribute to an ongoing process of continuous improvement. IICP College implements a series of internal and external audits and reviews of its quality assurance procedures. The College lives up to this commitment.

1.2. The Board has overall responsibility for Quality Assurance in the organisational arena; the Academic Council have responsibility in the Education and Training arena. The Director and the Senior Management Team have responsibility to ensure all the output from the review of quality assurance is reported to the Board or Academic Council as appropriate. The Director and the Senior Management Team are also responsible for implementing any changes arising out of the review of quality procedures.

## **2. Purpose.**

2.1. The purposes of Institutional Review of Effectiveness of QA Procedures are to:

- Review the effectiveness of the institution-wide quality assurance procedures for the purposes of establishing, ascertaining, maintaining and improving the quality of education, training, research and related services of IICP College.
- Review the appropriateness of the institution-wide quality assurance procedures to the programmes being developed and delivered by the College, with particular reference to the manner in which they incorporate professional body requirements.
- Review compliance with European standards for quality assurance.
- Review accountability with regard to the expectations set out in the QQI quality assurance guidelines and adherence to other relevant QQI policies and procedures
- Review institution enhancement of quality in relation to impacts on teaching, learning and research, institutional achievements and innovations in quality assurance, alignment to the institution's mission and strategy and the quality-

related performance of the institution relative to quality indicators and benchmarks identified by the College.

- Highlight areas and procedures that need to be improved, developed and refined.
- Review the manner in which institution-wide quality assurance procedures take account of organisational and contextual changes and developments.

### **3. Scope.**

3.1. This is an overarching policy that applies to IICP College as a whole.

### **4. Policy**

4.1. Quality Assurance in higher education and training is a developing and innovative area. IICP College expects that our QA procedures will continue to develop and evolve in line with best international practice, and will be responsive to legislative, regulatory and good practice developments that impact on its service provision. This is of particular concern when IICP College Mission Statement is considered. Far reaching changes in training and professional contexts that are occurring at both National and European level are likely to require the continual update of these procedures in order to ensure that they are fit for purpose and reflect best practice. The procedures for review of the effectiveness of Quality Assurance Procedures are therefore central to the quality ethos of the College.

4.2. Changes to QA procedures, including procedures to review QA procedures, are not dependent on external review. QQI expects that internal reviews will highlight areas where change could be usefully included in procedures previously agreed with them. Changes to agreed QA procedures, together with a description of the process and argument for change, are included in the College's Self-Evaluation Report.

4.3. Key elements enhancing the successful implementation and review of quality assurance procedures in the College include:

- Consideration and ongoing review of our mission;
- Attention to organisational culture;
- Review and feedback in relation to policy, procedure, structure and operations;

- Participation of stakeholders in the review process;
- Implementation and monitoring of proposed changes.

4.4. Institutional Review provides the College with an opportunity to take stock of the quality of its provision of education and training, the fulfilment of its mission and the effectiveness of its ongoing monitoring and review activities, to ensure they are fit for purpose.

#### 4.5. *Mission, Values and Strategic Plan.*

4.5.1. IICP College mission and values are reviewed regularly to ensure they continue to reflect the ongoing evolving organisation and its development.

4.5.2. IICP College Strategic Plan is developed through organisational-wide consultation processes every 2 to 5 years. The period of the Strategic Plan is dependent on the external context. In times of considerable change, strategic plans may be developed for shorter periods.

#### 4.6. *Organisational Culture.*

4.6.1. IICP College is committed to leadership which values inclusivity and attends to the needs of employees and learners in a sensitive and compassionate manner.

4.6.2. Individuals within the organisation are encouraged and supported to develop their own individual strengths and interests.

4.6.3. Ongoing Attention is paid to ensuring individuals within the organisation are valued.

#### 4.7. *Participation.*

4.7.1. A stakeholder approach to QA requires that the voices of all those inside and outside the College are included in both feedback on current functioning and suggestions for improvement and future design. IICP College is committed to ensuring the provision of opportunities for inclusion and participation in the review process for all its stakeholders.

#### 4.8. *Evaluation of Effectiveness of QA.*

4.8.1. This takes the form of a self-assessment followed by an external independent review, where the results of the self-assessment are examined by independent third parties.

#### 4.8.2. Evaluation of Effectiveness: Internal Review.

4.8.2.1. QQI QA Policy suite<sup>1</sup>, as well as ESG<sup>2</sup> place primary responsibility for quality assurance with Providers of higher education. The first step in the Institutional Review process is a self-study, including a review of effectiveness of QA procedures. This is reported in a Self-Study, called here a Self-Evaluation Report (SER), which is made available to the external stage of review.

#### 4.8.3. Evaluation of Effectiveness: External Review.

4.8.3.1. All providers offering QQI awards are subject to external quality assurance review of their institutions to be carried out by QQI. The terms of reference for institutional reviews usually incorporate prescribed statutory review functions, including Review of the Effectiveness of agreed Quality Assurance Procedures<sup>3</sup>

4.8.3.2. The overarching standards against which review findings are compared are:

- The College's own mission and strategy and selected quality indicators and benchmarks.
- European and national standards for quality and awards.
- QQI QA guidelines and other relevant QQI policies.

4.8.3.3. The external element examines the design and planning of existing internal quality processes in terms of:

- Effectiveness of internal quality processes;

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<sup>1</sup> Available at <https://www.qqi.ie/Articles/Pages/QA-Guidelines.aspx>

<sup>2</sup> ENQA *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. (2015). Brussels, Belgium.

<sup>3</sup> See *Qualifications and Quality Assurance (Education and Training) Act 2012 (Act 28 of 2012)*.

- Relevance of internal quality processes and degree to which their outcomes are used in decision-making and strategic planning;
- Perceived gaps in the internal mechanisms processes and frameworks and recommendations for enhancing them.

4.8.3.4. One of the central questions asked by the institutional review process is how an institution evaluates the effectiveness of its activities. Reviews of the effectiveness' of quality assurance procedures are a fundamental element of the external system of quality assurance in Irish higher education and training. These reviews share two objectives:

- Accountability and transparency – ensuring that the interests of society in the quality and standards of higher education are safeguarded.
- Quality enhancement - to consider whether QA procedures are contributing to the continued development and embedding of a quality culture within the institution.

4.8.3.5. The key questions and lines of enquiry to be addressed review teams are:

- How have quality assurance procedures and reviews been implemented within the College?
- How effective are the internal quality assurance procedures and reviews of the College?
- Are the quality assurance procedures in keeping with European Standards and Guidelines?
- Are the quality assurance procedures in keeping with QQI policy and guidelines, or their equivalent?
- Who takes responsibility for quality and quality assurance across the College?
- How transparent and accessible is reporting on quality assurance and quality?
- How is quality promoted and enhanced?

- Are there effective innovations in quality enhancement and assurance?
- Is the learner experience in keeping with the College's stated mission and strategy?
- Are achievements in quality and quality assurance in keeping with the College's stated mission and strategy?
- How do achievements in quality and quality assurance measure up against identified benchmarks and quality indicators?

#### 4.8.3.6. Guiding *Principles*.

4.8.3.6.1. The overarching principles for Institutional Review also guide any review of effectiveness of QA procedures. These include that the audit:

- Be conducted in partnership with staff with a view to improvement and enhancement, whilst acknowledging the requirements for accountability;
- Be conducted in a manner which adds value to the institution, minimises overhead and assists in building capacity;
- Be conducted in an open, transparent and consultative manner;
- Be evidence-based in accordance with established criteria;
- Promote collaboration and sharing of good practice;
- Take cognisance of national and international best practice.

## 5. Procedure.

5.1. Institutional Review is a statutory process. While the details of the process may vary depending on matters such as the provider's context, a single model based on the internationally accepted procedure for reviews is applied. The model is as follows.

- The publication of Terms of Reference;
- An institutional self-evaluation report;
- An external assessment and site visit by a team of reviewers;

- The publication of a review report including findings and recommendations; and
- A follow-up procedure to review actions taken.

5.2. Within the single model there is scope for differentiation between reviews in the objectives set out in the Terms of Reference, in the review team profiles and in specific methodologies such as the duration of site visit. In preparation for Institutional Review, the College will take into account its current profile, recognising that it is possible to vary the process to the evolving needs of learners, the College and other stakeholders, in order to continually assure and improve the quality of the College in a rapidly changing, social, economic and educational context.

5.3. The appropriate IICP College Management structures (e.g. Management team; Board; Academic Council) consider internal and external factors impacting on QA, including the Statutory Review Cycle established by QQI, and decide on a schedule for Internal Review of QA procedures.

5.4. The internal phase of the Institutional Review process culminates in a self-study, including a review of effectiveness of QA procedures. The usefulness of internal review is intricately connected to the effectiveness of the procedures used. Therefore, the process by which an Institution reviews itself – its QA procedures - is crucial to ensuring accountability, transparency and a quality ethos, and therefore is a central focus of the external review stage.

5.5. The outcome of the internal phase is a self-evaluation report. This is produced in accordance with the processes and procedures outlined by QQI and in this Quality Assurance document.

5.6. Key stages of this self-evaluation include:

5.6.1. *Appointment of an Index Person.* An index person is identified as the person who leads the implementation process. However, people from all levels of the organisation are involved in planning and self-assessment and making organisational improvements.



5.6.2. *Development of a Quality Implementation Plan.* This step produces an overall Quality Implementation Plan that describes the manner and timing of self-assessment. The plan:

- Identifies objectives;
- Assigns responsibility;
- Describes methodology;
- Allocates resources;
- Sets timeframes;
- Documents performance indicators;
- Develops an internal plan;
- Identifies stakeholder involvement.

5.6.3. *Evidence-based Self-Evaluation Report.* An evidence based self-assessment involves asking whether or not each of the indicators for a quality area have been met and producing independent evidence to support any conclusion. Evidence should be:

- **Consistent** – Is practice consistent with policy and procedure? When evidence is collected d documents complement and not contradict other documents?
- **Accessible** – Are all relevant IICP College members informed of and aware of the existence of evidence and where it can be found?
- **Recent** - Is the evidence up to date? Has it been recently developed or reviewed?
- **Dated** - When does the evidence date from? Is there a date on it?

5.6.3.1. This step involves

- Reviewing the QA procedures against relevant standards and guidelines;
- Reviewing the operation of the QA procedures ‘on the ground’;
- Compiling evidence on the QA procedures.

5.6.3.2. The internal effectiveness review considers each area for review. The types of questions this review might include are:

- What are we currently doing?

- Why are we doing it?
- How effective is our approach?
- How do we know?
- What lessons have we learned?
- What will we do differently in the future as a result?
- What actions may be required or useful?

5.6.3.3. A variety of review techniques can be used to support this process, as illustrated in Figure 1.

5.6.3.4. The self-evaluation report has three major purposes:

- To present a comprehensive statement of the College's view of its existing provision for quality management;
- To analyse the strengths and weaknesses of existing provision for quality management and to provide evidence for the formulation of action plan for improvement;
- To provide a framework against which the College will be assessed by external reviewers.

5.6.4. *Site visit and Panel report.* The Report of the Review Team sets out its findings in relation to each of the objectives of the review. As well as specific findings, it provides a general statement regarding the effectiveness of the quality assurance procedures of the College and their implementation.

5.6.5. *Approval and Publication.* These findings are approved by QQI and published in a Quality Profile.

5.6.6. *Action Planning and Quality Improvement Plan.* A Quality Improvement Plan is developed to identify specific changes that are required and how these will be achieved.

5.6.6.1. This process may be varied if the Review Team identifies what it considers to be significant areas for development, particularly in relation to the College's fulfilment of relevant statutory requirements. In this case these areas are clearly identified in the report for consideration by QQI. Following consideration, QQI may set out directions to the College, and in consultation with the College agree an immediate action plan with specific

QQI recommendations to address the directions, including the timeframe in which the issues pertaining to the directions will be addressed. Where QQI considers that progress in implementing the action plan is inadequate, QQI may, in consultation with the institution, intervene to secure a revision or acceleration of the plan, or move to establishing a 'for cause' review.

5.6.7. *Completing and Maintaining the Quality Implementation Plan.* Implementing this cycle is an ongoing process of continuous quality improvement. The implementation of the Quality Improvement Plan is monitored regularly to ensure the outcomes are implemented. The quality implementation plan addresses the following:

- What is the internal process for approving the Quality Improvement Plan?
- Will the Quality Improvement Plan be published and where?
- What stakeholders will have access to the Quality Improvement Plan?
- Where will progress on the implementation of the Quality Improvement Plan be reported? (e.g. Management Team, Academic Council, Board of Directors, etc).

5.7. Evidence for the Self-Evaluation Report, illustrated in figure 1, includes the following:

5.7.1. *Standards and Guidelines:*

5.7.1.1. This involves the use of a Desk based review comparison of IICP College QA procedures with its own mission and strategy, and with Academic and Professional standards and guidelines, including:

- European Standards and Guidelines.
- QQI policy documents.
- CORU /Professional Body Policy Documents.

5.7.1.2. Outcome: a short report which summarises the findings and which notes items which need to be followed up, in particular where the College does not have a procedure which appropriately covers the required standards and guidelines.

5.7.2. *Records and Documentation:*

5.7.2.1. Document Analysis is used to support the examination of the Operation of QA on the ground. The purpose of the document analysis phase is to

identify any gaps or deviations in the operation of the QA procedures viz a viz the procedures in the agreed QA manual. Documentation might include for example: minutes of Programme Committee meetings, progress meetings with learners, learner feedback forms, external examiner reports, panel reports etc. Documents may also provide valuable insights into the effectiveness of the procedures.

5.7.2.2. Any areas where a substantial discrepancy exists should be noted for further consideration.

5.7.2.3. The outcome from the document analysis phase should be a short report which includes the checklist and the internal audit team's findings. This report should note items which need to be followed up and addressed.

#### 5.7.3. *Statistical analysis:*

5.7.3.1. Quantitative data or indicators that provide information around key aspects of the Institution's performance can assist the audit team in making informed judgements about the effectiveness of QA procedures (e.g. information about retention rates, learner achievement, learner satisfaction, etc.).

#### 5.7.4. *Benchmarking*

5.7.4.1. Benchmarking is a review technique in which an Institution can evaluate various aspects of activity with other organisations which are regarded as having best practice in their fields. By comparing the College's quality assurance procedures with other Higher Education Institution, plans can be developed in relation to adopting best practice.

**Figure 1 Review techniques**

