

<b>Document Name and Version</b>	<b>2.1 IICP College's Quality and Governance Framework; (i) Quality Assurance</b>
<b>Policy Number</b>	2.1
<b>Policies that Interact with 2.1</b>	<p>Policy 2.1 IICP College's Quality and Governance Framework; (I) Quality Assurance</p> <p>Policy 2.2 IICP College's Quality and Governance Framework; (Ii) Governance</p> <p>Policy 2.3 IICP College's Quality and Governance Framework; (iii) Documented Approach to Quality Assurance</p> <p>Policy 2.4 IICP College's Quality and Governance Framework; (Iv) Business Continuity, Resilience &amp; Risk Management</p>
<b>Approval Body</b>	Board and Academic Council
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<b>Revisions</b>	<p>11<sup>th</sup> November 2021. Organisational Chart under review.</p> <p>2<sup>nd</sup> December 2021. Section 5.5.8.6 revised to allow for a more responsive process in the case where change is required to ensure regulatory or contractual compliance, to enhance quality, or to respond to contextual change.</p> <p>24<sup>th</sup> January 2023. Included revised Organisational Chart</p> <p>20<sup>th</sup> Feb 2024. Included revised Organisational Chart</p>

## **1. Preamble.**

- 1.1. The quality of education and training programmes is of central importance to those who study on programmes, those who provide the programmes, those who employ graduates and society as a whole who invests in and support education. This policy sets out how IICP College establishes and maintains the quality of its training and education. It shows how IICP College's quality system ensures oversight of its education and training, research and related activity in order to ensure its quality.
  
- 1.2. QQI is the statutory body with responsibility for the external quality assurance of IICP College, and for the validation of its programmes. Irish Association for Counselling and Psychotherapy [IACP] is the professional body responsible for professional accreditation of IICP College Programmes. QQI awards undergraduate and Masters degrees to those learners who successfully complete approved programmes. The award is conferred following assessment in accordance with College and programme-specific regulations and approval by QQI. QQI validation assures that College programmes are aligned with the National Framework of Qualifications, and that graduates have obtained the required knowledge, skills and competencies in their area of specialisation. IACP accreditation ensures that practitioners are appropriately qualified and work to recognised standards of professional competence.
  
- 1.3. Quality Assurance [QA] is shaped but not determined by the regulations and guidelines that govern the activities of IICP College. Consequently, QA procedures must be documented so that the institutional QA vision is shared by all the College community, and communicated externally to stakeholders, prospective learners and wider society. IICP College's Quality Assurance Manual (QAM) brings together in one location the regulations, policies and procedures applicable to all IICP College staff and learners. It should be read in conjunction with handbooks for each programme, available from programme and departmental websites and Moodle pages. The QAM is the primary source of IICP College's policies and procedures. Handbooks contain programme specific information – for example in relation to assessments and professional requirements. Staff, faculty and learners should take care to ensure that they are familiar with all regulations which govern their activities.

1.4. All quality assurance policies, procedures and reports are published on the IICP College website. External peer-review evaluations of IICP College are conducted by QQI are published on the QQI website [www.qqi.ie](http://www.qqi.ie).

1.5. IICP College's Quality Assurance Manual [QAM] identifies and addresses the legislation and regulations applicable to the College as provider of education and training. These policies address requirements under the following regulations, as set out in supporting documentation (See section 6.1):

1.5.1. Quality and Qualifications Ireland [QQI] Core Statutory Quality Assurance Guidelines<sup>1</sup>, which requires providers to address the following with respect to quality assurance:

1.5.1.1. **Governance:** There is a system in place to oversee the education and training, research and related activity of the provider to ensure its quality.

1.5.1.2. **Management of quality assurance:** Quality assurance procedures form part of a coherent system, which is central to the promotion of a quality assurance culture within the provider.

1.5.1.3. **Embedding a quality culture:** A positive, quality culture is embedded – the totality of a provider's teaching and learning community is working in a coherent and cohesive way towards implementing the quality agenda.

1.5.2. European Standards and Guidelines for Quality Assurance in the European Higher Education Area which sets down the following standard:

1.5.2.1. **Standard:** Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

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<sup>1</sup> Quality and Qualifications Ireland. (2016) *Core Statutory Quality Assurance Guidelines*. Available at: <https://www.qqi.ie/Downloads/Core%20Statutory%20Quality%20Assurance%20Guidelines.pdf> (Accessed 25 November 2018).

1.5.3. This policy also addresses CORU Criteria for Education and Training Programmes, which provide as follows:

1.5.3.1. **CC 13** There must be a quality assurance policy and system in place – which includes regular quality assurance audits, reviews and reports – that identifies quality issues and with clear accountability for addressing these issues.

1.5.3.2. **CC2.14** There must be formal processes in place for learners to raise individual and collective concerns about the programme and to provide feedback on the content and quality of the programme.

## **2. Scope.**

2.1. The QA governance system applies to all corporate, academic and other boards and committees in IICP College, and members thereof as well as learners and employees of IICP College.

2.2. Applicable laws and regulations are addressed in IICP College's Quality Assurance Manual. In the event of any conflict, external regulatory requirements should be understood as pre-eminent.

## **3. Principles.**

3.1. Quality Assurance allows higher education systems to demonstrate quality and maintenance of standard. It addresses trust and transparency through making visible accountability, authority and responsibility. Quality Assurance is context specific, owned by the provider, and monitored and reviewed in order to ensure that it fits the evolving context of the provider's education and training provision.

3.2. IICP College's quality system is embedded in its mission, values, structures and processes. Internally, this system supports and enhances education and training, while externally it communicates IICP College's vision of quality, as well as the outcomes of its quality processes. Thus, it serves to increase both stakeholders' and the public's confidence in and understanding of, IICP College's achievements in all programmes and projects.

3.3. Quality Assurance involves having the necessary structures, processes, standards and oversight in place to ensure that academic standards are maintained, and that effective, enhancing education and training programmes are delivered to learners. Consequently:

3.3.1. IICP College Organisational structure, illustrated in section 6.2, sets out the roles through which quality assurance is governed and managed. The organisational structure is designed to assure that the quality goals of the College are met.

3.3.2. IICP College Quality Assurance [QA] structure, illustrated in section 6.3, underpins the College's Quality and Governance Framework. As this illustrates, QA in IICP College is a community and communal activity, with all staff members engaged and involved in the development and implementation of quality assurance. The roles of stakeholders as key contributors to the College's quality structure is described throughout the QAM.

3.3.3. IICP College's Quality Assurance Manual [QAM] documents Quality Assurance and Enhancement in the College. The Policy and Procedures outlined in the QAM are used in the management and operation of all elements of the College. The QAM is a 'living' document and is updated in response to both external change, such as legislative and regulatory development, and internal change including quality enhancing initiatives arising from within the College.

3.4. The framework through which quality is assured is set out in IICP College's QAM. Governance and oversight of this Quality Framework occurs through structures, policies and processes that are designed to:

- Create a distinct vision of IICP College quality assurance and enhancement that ensures compliance with the requirements of regulating bodies while at the same time fits with the purpose, aims and scope of the College's practice;
- Align objectives with mission and strategy;
- Embed the QA framework in all levels of IICP College;
- Protect the integrity of academic processes and standards;
- Incorporate feedback from stakeholders;

- Incorporate feedback from internal and external reviews;
- Drive quality enhancement.

3.5. The following characteristics are enshrined in IICP College's Quality and Governance Framework, and enacted in its Quality Assurance Systems and documentation:

3.5.1. *A stakeholder approach to quality*: consulting those who are involved in the programme and placing their perspectives at the centre of training change and development;

3.5.2. *A systematic and systemic approach to change*: the IICP College quality system uses an evidence-informed, systemic approach to quality assurance and enhancement. Information from multiple sources - including, centrally, stakeholder feedback and institutional and programme data - feeds into management and governance systems, which in turn decide on and approve trajectories of change;

3.5.3. *An integrated quality culture*: Assuring quality and enhancing quality are seen as complementary and interrelated activities;

3.5.4. *An effective governance structure*: Governance structures enforce separation of responsibilities between those who produce/develop material and those who approve it.

3.6. Central to IICP College's quality ethos is a recognition of difference: and this includes different perspectives on quality which need to be taken into account when deciding how quality should be measured and described. IICP College takes the view that those who are involved or invested in education and training programmes – stakeholders – are best placed to describe and measure quality. This is the stakeholder approach to quality assurance, and it permeates all of IICP College's activities in the quality domain<sup>2</sup>.

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<sup>2</sup> Okogbaa, V. (2016). Quality in Higher Education: The Need for Feedback from Students. *Journal of Education and Practice*, 7:32 p139-143. Retrieved from <https://files.eric.ed.gov/fulltext/EJ1122512.pdf> (Accessed 2 June 2018).

3.7. Stakeholders have the right to be considered in discourses of quality because of their close proximity to the system. Stakeholders include, centrally, learners, who invest so much of their resources, energy and self in their learning. Stakeholders also include teachers, as well as those who work on programme provision, development and enhancement. Externally, employers, professional bodies and statutory bodies are key voices that define, describe, review and evaluate the quality of programmes. These voices are central to understanding how graduate knowledge, skills and competence are viewed by those who employ and certify learners who complete their programmes. For learners, the esteem in which the programme and its outcomes are held is of considerable importance to the recognition of their achievements and their progression into employment and in the profession.

#### **4. Responsibility for QA.**

4.1. The Board of Directors [Board] is responsible for Corporate Governance, and in particular for the operation of IICP College in accordance with Companies Act 2014, and related legislation and regulation. Any delegation of authority by the Board is subject to the statutory duties and responsibilities of the Directors.

4.2. The Academic Council [AC], acting under delegated authority from the Board, is responsible for Academic Governance and QA, including the development, approval, monitoring and review of academic policies, procedures and other elements of the QAM.

4.3. The Advisory Board is responsible for providing advice and guidance to the College President on the College's approach to quality assurance and enhancement and reviewing the effectiveness of such policies and procedures.

4.4. The Senior Manager in Quality Assurance and Enhancement is responsible for managing implementation of QAM with support from relevant members of the College. This Manager is also responsible for planning quality assurance programmes and formulating quality control policies.

4.5. Specified roles have explicit responsibility for the implementation of the QAM in separate policy areas. Any reference to a specific role (including Registrar, Head of Academic Studies, Programme Leader) shall be taken to mean that role or any other appropriate member of staff designated by the College to take the specified responsibility in the conduct of that policy from time to time.

4.6. All IICP College staff have responsibility for implementing the QAM in their particular areas of operation.

## **5. Policy.**

5.1. *General:* IICP College adopts and adapts to changes, whether driven externally by legislative or regulatory developments, or internally by self-evaluation and review.

### *5.2. Activation of Policy Review:*

5.2.1. Policy review can be activated by a change in legislative, regulatory and professional context. To this end IICP College ensures that it remains continuously cognisant of QQI and Irish Association for Counselling and Psychotherapy [IACP] policies, guidelines and criteria, including any updates and changes to these.

5.2.2. Policy review can also be activated by internal monitoring and review, including quality enhancement activities.

5.3. *Limits of change:* IICP College manages evolutionary changes to its quality assurance procedures in such a way as to ensure continued compliance with (i) QQI policies and guidelines and (ii) IACP policies and guidelines. Should IICP College's quality assurance policy and procedures require non-evolutionary extension (e.g. for a new type of programme, or for a substantial change to an existing programme) then the College will consult with QQI prior to change. This section (section 5) applies only to evolutionary change.

#### 5.4. *Presentation of policy:*

5.4.1. Policy and procedures are intended to assist the IICP College community in making informed decisions that are consistent with IICP College's ethos. In preparing policies, attention needs to be given to their consistency with IICP College's mission statement, values and context of operation. In addition, their relationship to existing IICP College's policies (i.e. agreed with QQI or approved by the Academic Council) and the wider legal, professional and good practice contexts should be identified.

5.4.2. All policies will be accompanied by a tracking sheet that identifies the date of implementation, date of coming into force, number and version.

#### 5.5. *Methodology for QA review.*

5.5.1. All policies and procedures relating to learner, academic and professional matters must be approved by the Academic Council. Some of these may also require the approval of the Board of Directors. The Executive Management Team will identify the requirement for Board approval in each case and will arrange for referral to the Board as necessary.

5.5.2. Prior to consideration by Academic Council and/or Board all draft policies and procedures are referred to the Executive Management Team to consider the organisational implications, including financial and/or training provision implications. This does not undermine the decision-making authority or responsibility of either the Academic Council or Board as prescribed.

5.5.3. Stages of document revision (Academic Council). Policy revision requiring approval by the Academic Council utilises the following procedure.

5.5.3.1. *Initial draft:* Documents are drafted by an identified person or working group. Standard format for identifying and tracking the document must be used (see supporting documentation). Policy stakeholders should be identified and consulted regarding the need and direction of change. These stakeholders should, where possible, include learners, staff, lecturers and manager. Attention should also be given to the inclusion of employers and professional body members as appropriate. These stakeholders should be consulted throughout the revision process.

5.5.3.1.1. The initial draft is sent to the Executive Management Team for their consideration before the document is considered by Academic Council. The Executive Management Team send feedback to the policy author.

5.5.3.2. *Post internal review draft:* The policy author implements the feedback from the Executive Management Team. This produces a post internal review draft. This is circulated to the Academic Council (or subcommittee). Where subcommittees are involved, they feedback to the policy author and the Academic Council.

5.5.3.3. *Post Academic Council draft:* The policy author implements this feedback from the Academic Council and subcommittee, where applicable. This produces a post Academic Council draft. This is circulated to the Academic Council. The Academic Council may approve, approve subject to amendments, or not approve. This must be accompanied by an Implementation Strategy, approved by the Academic Council.

5.5.3.4. *Approved by Academic Council:* When approved by the Academic Council, the policy / procedure and Implementation Strategy is moved to the institutional repository. This identifies that this policy / procedure is now ready to be implemented.

5.5.4. Stages of document revision (Board). Policy revision requiring approval by the Board utilises the following procedure.

5.5.4.1. *Initial draft:* Documents are drafted by an identified person or working group. Standard format for identifying and tracking the document must be used. Policy stakeholders should be identified and consulted regarding the need and direction of change. These stakeholders should, where possible, include learners, staff, lecturers and manager. In the case of document revisions considered by the Board, stakeholders may include the Academic Council. Attention should also be given to the inclusion of employers and professional body members as appropriate. These stakeholders should be consulted throughout the revision process.

5.5.4.1.1. The initial draft is sent to the Executive Management Team for their consideration before the document is considered by the Board. The Executive Management Team send feedback to the policy author.

5.5.4.2. *Post internal review draft:* The policy author implements the feedback from the Executive Management Team. This produces a post internal review draft. This is circulated to the Board who may approve, approve subject to amendments, or not approve. This must be accompanied by an Implementation Strategy, approved by the Board (see section 5.1.5.5).

5.5.4.3. *Post Board Review draft:* The policy author implements feedback from the Board. This produces a post Board draft which may be recirculated to the Board for final approval if necessary.

5.5.4.4. *Approved by Board:* When approved by the Board, the policy / procedure and Implementation Strategy is moved to the institutional repository. This identifies that this policy / procedure is now ready to be implemented. The implementation plan identifies the date for implementation, and any prerequisites that require attention.

#### *5.5.5. Implementation:*

5.5.5.1. No policy relating to learner, academic and/or professional matters shall come into force until it is implemented according to the implementation strategy agreed with the AC and/ or Board, as appropriate. This implementation strategy should identify roles and responsibilities for implementation, as well as an outline of the requirements to be addressed prior to implementation. Details of tasks and timings shall be managed by those named as responsible for the policy.

5.5.5.2. The policy author shall advise on possible consequences of policy change, with particular attention to any risk associated with the change, as well as resource and training requirements required for the implementation of change. The Academic Council / Board will approve an implementation strategy for any policy change.

5.5.5.3. The Implementation date shall be set by the approving body. This date is the date when all required preliminaries for a policy have been achieved, including the required approvals.

5.5.6. *Date of Entry into Force:* The Date of Entry into Force is the date when the policy becomes mandatory. This date should be chosen to ensure that there is consistency of application of a policy throughout the College. It is usual practice that major changes relating to the QA manual for the following academic year are brought into force on a specified date over the summer period and prior to the commencement of the new academic year. Where a requirement for change occurs during an academic year then a strategy for informing learners of the change, and for managing change in any ongoing modules, must be devised by the Quality Assurance and Enhancement Manager and approved by the Executive Management Team.

5.5.6.1. The Executive Management Team, in consultation with the Board and/or the Academic Council where appropriate, shall decide on a date when the implemented policy will come into force, up to a maximum of one year from the date of implementation.

5.5.7. *Notification of Change:* Where any change in the QAM is planned, then learners and teachers should be notified in advance of this change. This notification should be proportionate to the planned change and should use existing forms of communication such as Moodle and emails.

5.5.8. *Maintaining Records of Change:*

5.5.8.1. All documentation relating to changes in QA policies and procedures shall be held in the Registrar's Office and shall include a Control Sheet recording all stages of the process.

5.5.8.2. All documentation relating to policy change approved by the Board relating to changes in QA policies and procedures shall be held by the Board, and copied to the College President, who shall ensure that the QAM is

updated accordingly. Each policy shall include a Control Sheet recording all stages of the process.

5.5.8.3. The Quality Assurance and Enhancement Manager, in consultation with the Registrar shall ensure that the QAM is updated as required.

5.5.8.4. When in force the final approved version of each policy shall be included in the current QAM and published online.

5.5.8.5. This section does not apply to minor changes, such as the correction of typing errors, which can be carried out during the academic year.

5.5.8.6. Where required for compliance purposes, to enhance the quality of programme delivery, or to respond to contextual requirements (such as a public emergency, or a change in programme delivery), the Executive Management Team may approve a policy change once that is reported to the next meeting of the Academic Council or Board, as appropriate. The rationale for change must be clearly documented and presented to the approval body, who can choose to ratify or not ratify the change.

#### *5.6. Policy: New Validation and Differential Validation.*

5.6.1. Any non-evolutionary change to a programme results in a significantly changed programme. In this case IICP College may apply for validation of the programme as a new programme. Where the change results in a programme that is substantially based on the previously validated programme then QQI does not require a de novo validation application, and instead the College may apply for revalidation<sup>3</sup> (see policy 9.5).

5.6.2. Where change results in a programme that is a modification or extension of a QQI validated programme then the changed programme must be validated as a new programme. The QQI validation of the original programme can inform the QQI validation of the derived programme and this can simplify the QQI validation process for the derived programme. QQI validation of a derived programme that relies on the QQI validation of the original programme is referred to as

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<sup>3</sup> QQI (2017) *Policies and criteria for the validation of programmes of education and training*. Available at [https://www.qqi.ie/Publications/Publications/Initial\\_Validation\\_policy\\_7\\_10\\_13.pdf](https://www.qqi.ie/Publications/Publications/Initial_Validation_policy_7_10_13.pdf) (Accessed 10 December 2018).

differential validation. Differential validation concentrates on the changes to the originally validated programme<sup>4</sup>.

5.6.3. A non-evolutionary change to a programme occurs where a change to a programme (including a minor or exit award) of greater than 20% of the following occurs:

- Aims and objectives of the programme;
- Aims and objectives of a module;
- Learning outcomes of a module (other than MIMLOs, which require revalidation);
- Change in management or staff;
- Changes in resources;
- Non-evolutionary change in quality assurance.

5.6.4. Any change in the following is a non-evolutionary change:

- Change in a core programme learning outcome;
- Change in entry requirements for a given programme;
- Change in the mode of delivery (e.g. a change to online modes of delivery).
- The withdrawal of a compulsory module;
- Change in credits;
- Change in location.

5.6.5. Where any non-evolutionary change, or cumulative changes amount to more than 20% of the programme over a period of less than 5 years between programmatic reviews, occur, then a formal (full) revalidation is required. QQI will be consulted in case where there is any doubt about whether or not validation would extend to a modified programme (QQI Core Statutory Quality Assurance Guidelines<sup>5</sup>, section 8).

*5.6.6. Process for differential validation:*

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<sup>4</sup> QQI (2017) section 2.6

<sup>5</sup> Quality and Qualifications Ireland. (2016) *Core Statutory Quality Assurance Guidelines*. Available at: <https://www.qqi.ie/Downloads/Core%20Statutory%20Quality%20Assurance%20Guidelines.pdf> (Accessed 25 October 2018).

5.6.6.1. Differential validation is approached by IICP College with the same high level of rigor as any other type of validation. It is a modification of the validation process rather than a different process.

5.6.6.2. The implications of providing the modified programme in this new context is explored in a brief self-assessment against the QQI Core Validation Criteria.

5.6.6.3. While differential validation concentrates on the differences between the validated programme and the changed programme, an assessment against the validation criteria needs to be carried out in order to identify the impact of the changes to the programme as a whole.

5.6.7. The application for differential validation should:

- Describe all of the differences between the proposed programme and the programme upon which it is based (the original programme);
- Describe fully the rationale for the changes being proposed;
- Systematically analyse the changes and their effect on the original programme.

#### *5.7. Documenting Quality Assurance in IICP College.*

5.7.1. This QAM is a living document that changes and adapts with the environment, as well as shapes the development of the College and its practices. IICP College strives to construct an interactive relationship between documented QA and actual practice, and to ensure that structures and processes are in place to ensure a consistent fit between them.

5.7.1.1. This approach is consistent with QQI's "Core Statutory QA Guidelines," which require that a provider's quality assurance system is comprehensive, fully documented, and embedded within the culture and practices of the College.

5.7.2. The design of the QAM should assist with its communication to a wide variety of stakeholders. To this end the QAM should adhere to the following:

5.7.2.1. Policies are accessible and clearly written.

5.7.2.2. Policies include arrangements for the internal evaluation or review and continuous improvement of the effectiveness of the policies and procedures.

5.7.2.3. The QAM is the central repository for all implemented QA policies. The QAM contains separate policies for each policy area.

5.7.2.4. The following is the standard format for individual policies:

- A preamble that outlines the main features of the policy;
- The scope of the policy;
- Responsibilities for the policy;
- A statement of policy;
- Associated procedures for the assurance of the quality and standards of provision;
- Supporting documentation.

5.7.3. The QAM utilises QQI's identified 11 key organising elements of QA (see supporting documentation, section 7.3).

5.7.3.1. These elements are:

- Governance and Management of Quality;
- Documented Approach to Quality Assurance;
- Programmes of Education and Training;
- Staff Recruitment, Management and Development;
- Teaching and Learning;
- Assessment of Learners;
- Supports for Learners;
- Information and Data Management;
- Public Information and Communication;
- Other Parties involved in Education and Training;
- Self-Evaluation, Monitoring and Review.

5.7.3.2. These elements are unifying organisational principles for the quality system of IICP College. However, the presentation of the QAM is

determined by the needs of stakeholders for clarity and accessibility. The College operates in a complex regulatory environment that includes QQI and the professional body, Irish Association for Counselling and Psychotherapy [IACP]. In addition, IICP College needs to keep in mind the changing professional context in which counselling and psychotherapy operates: in particular pending statutory regulation of the profession through CORU, the statutory Health and Social Care Professionals Registration body. Consequently, the QAM is presented in a manner that communicates effectively its content.

5.7.3.3. The QAM shall be reviewed regularly, and updated as required.

#### *5.8. Current Quality Assurance Manual (2019).*

- 5.8.1. The current QAM represents a full revision of IICP College's QA system, incorporating a College wide review of QA that occurred in 2018/2019. The College agreed its first and preceding QA procedures with the Higher Education and Training Awards Council [HETAC] in 2010. While incremental changes have occurred since this time, the first major review occurred in 2018 in preparation for Re-engagement with QQI.
- 5.8.2. This institution-wide review of procedures and policies culminated in the creation of this manual. Each institutional policy was reviewed separately, taking into account legislative, regulatory and best practice contexts, and actual institutional practice. Each revision was presented to management and faculty representatives, and revised procedures were presented to the Academic Council as well as, where appropriate, to the Board. Where recommendations did not appear to be appropriate, a rationale, grounded in policy research, was developed and presented, in order to facilitate a greater understanding of the policy position.
- 5.8.3. Initial stakeholder consultation took place between September and November 2018. Learner representatives were briefed on the rationale and methodology for review, and sought feedback from their learner cohort. Each written submission from learners received a written reply, outlining the College's response to each point raised. Surveys were also carried out with senior

management, staff, lecturers and teachers, and written responses provided to each reviewer. Where considered useful, legal advice was also sought.

5.8.4. Feedback from the consultation process was incorporated into the draft QAM in November 2018. The final draft was presented to (i) the Academic Council and (ii) the Board. Each policy was accompanied by an Implementation Plan, advising on (i) the regulatory context, and (ii) roles and responsibilities for effective implementation of the policy. In addition, each implementation plan identified the areas that needed to be addressed, if any, before implementation could take place. This allowed those with responsibility for operating the policy to determine the tasks required prior to actual implementation. Each Implementation Plan also contained a suggested implementation date and a rationale for that date.

5.8.5. The final draft was approved by the Academic Council on 27<sup>th</sup> November 2018. Board policies were approved by the Board on 8<sup>th</sup> December 2018. The implementation date in both cases was set at 20<sup>th</sup> December 2018.

5.8.6. The Executive Management Team decided upon a date in which policies are brought into force. Guided by section 5.5.1.6, the date chosen ensured that there could be, in so far as was possible, consistency of application of a policy throughout the College. This date was accompanied by a strategy for informing learners of the change, and for managing change in any ongoing modules. This strategy ensured that a series of meetings and presentations would be held with key stakeholders to review the main issues that arise as a result of the updated policies.

5.8.7. A further review took place at the end of the 2018/2019 Academic Year. This was particularly important in examining the relationship between the QA text and actual QA practices. The outcome of the review was considered by the Academic Council and the Board of Directors over the summer period of 2019. This review resulted in both policy change and policy additions.

5.8.8. This process resulted in IICP College's QAM 2019.

## 6. Supporting documentation.

### 6.1. Legislation and regulation addressed in the QA manual:

IICP College function	Legislative Provision	Regulation
Higher Education Provider	<a href="#">Qualifications and Quality Assurance (Education and Training) Act 2012</a> <sup>6</sup> Equal Status Acts 2000 & 2004 <sup>7</sup>	QQI <sup>8</sup> <ul style="list-style-type: none"> <li>• QA Policy Suite;</li> <li>• Programme Validation;</li> <li>• Programme Monitoring;</li> <li>• Assessment and Standards (Revised 2013).</li> </ul> QQI Policy Restatement: Policy and Criteria for Access, Transfer and Progression in relation to Learners for Providers of Further and Higher Education and Training <sup>9</sup>  <b>Standards &amp; Guidelines for Quality Assurance in the European Higher Education Area</b> <sup>10</sup>
Counselling and Psychotherapy Training Provider	(Not yet applicable):	Current non-statutory Professional Body (IACP) regulations:

<sup>6</sup> *Qualifications and Quality Assurance (Education and Training) Act 2012* ((Act 28 of 2012)

<sup>7</sup> *Number 21 of 1998 and Number 24 of 2004*

<sup>8</sup> The QQI policies are available through QQI website: <https://www.qqi.ie/Pages/Home.aspx>

<sup>9</sup> QQI *Policy Restatement: Policy and Criteria for Access, Transfer and Progression in relation to Learners for Providers of Further and Higher Education and Training* (2015). Available at: <https://www.qqi.ie/Downloads/ATP%20Policy%20Restatement%20FINAL%202018.pdf> (Accessed 28 October 2018).

<sup>10</sup> European Association for Quality Assurance in Higher Education (ENQA), et. al (2015), *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*, 2nd edn, Available at [https://enqa.eu/wp-content/uploads/2015/11/ESG\\_2015.pdf](https://enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf) (Accessed 28 October 2018).

	<p>Health and Social Care Professionals Act 2005<sup>11</sup>.</p> <p>S.I. No. 170/2018 - Health and Social Care Professionals Act 2005 (Designation of Professions: Counsellors and Psychotherapists and Establishment of Registration Board)<sup>12</sup></p>	<ul style="list-style-type: none"> <li>• IACP Course Accreditation Criteria<sup>13</sup>.</li> <li>• IACP Annual Monitoring of IACP Accredited Courses<sup>14</sup> (available at <a href="https://iacp.ie/annual-monitoring">https://iacp.ie/annual-monitoring</a>).</li> </ul>
<b>Company</b>	Companies Act, 2014 <sup>15</sup>	
<b>Employer</b>	<p>Safety, Health and Welfare at Work Act 2005 (as amended)<sup>16</sup>.</p> <p>Equal Status Acts 2000 &amp; 2004<sup>17</sup></p> <p>Employment Equality Acts 1998 &amp; 2004</p>	Safety, Health and Welfare at Work (General Application) Regulations 2007 <sup>18</sup>
<b>Data Controller</b>	GDPR <sup>19</sup> , Data Protection Acts 1988, 2003 and 2018	

<sup>11</sup> *Health and Social Care Professionals Act 2005* (Number 27 of 2005).

<sup>12</sup> *S.I. No. 170/2018 - Health and Social Care Professionals Act 2005* (Designation of Professions: Counsellors and Psychotherapists and Establishment of Registration Board)

<sup>13</sup> *IACP Course Accreditation Criteria*. Available at <https://iacp.ie/course-accreditation-criteria> (Accessed 23 October 2018).

<sup>14</sup> *IACP Annual Monitoring of IACP Accredited Courses*. Available at <https://iacp.ie/annual-monitoring>

<sup>15</sup> *Companies Act, 2014* (No. 38 of 2014)

<sup>16</sup> *Safety, Health and Welfare at Work Act 2005* Number 10 of 2005

<sup>17</sup> *Number 21* of 1998 and *Number 24* of 2004

<sup>18</sup> *S.I. No. 299/2007 - Safety, Health and Welfare at Work (General Application) Regulations 2007*

<sup>19</sup> The full text of the GDPR (Regulation (EU) 2016/679 (General Data Protection Regulation)) can be found here: <https://gdpr-info.eu/>

<p><b>Work based Learning (Clinical Provision)</b></p>	<p>IICP College is not a clinical provider. However, as part of its responsibility to its Learners during their work placements it takes into account the following in the Approval and monitoring of work-placements by the College          Children First Act 2015<sup>20</sup>          Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012<sup>21</sup></p>	<p>Children First Guidance<sup>22</sup>  <u><a href="#">‘Safeguarding Vulnerable Persons at Risk of Abuse – National Policy and Procedures’ (2014)</a></u><sup>23</sup> .</p>
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<sup>20</sup> *Number 36* of 2015

<sup>21</sup> *Number 24* of 2012

<sup>22</sup> Available at <https://www.dcy.gov.ie/documents/publications/20171002ChildrenFirst2017.pdf>

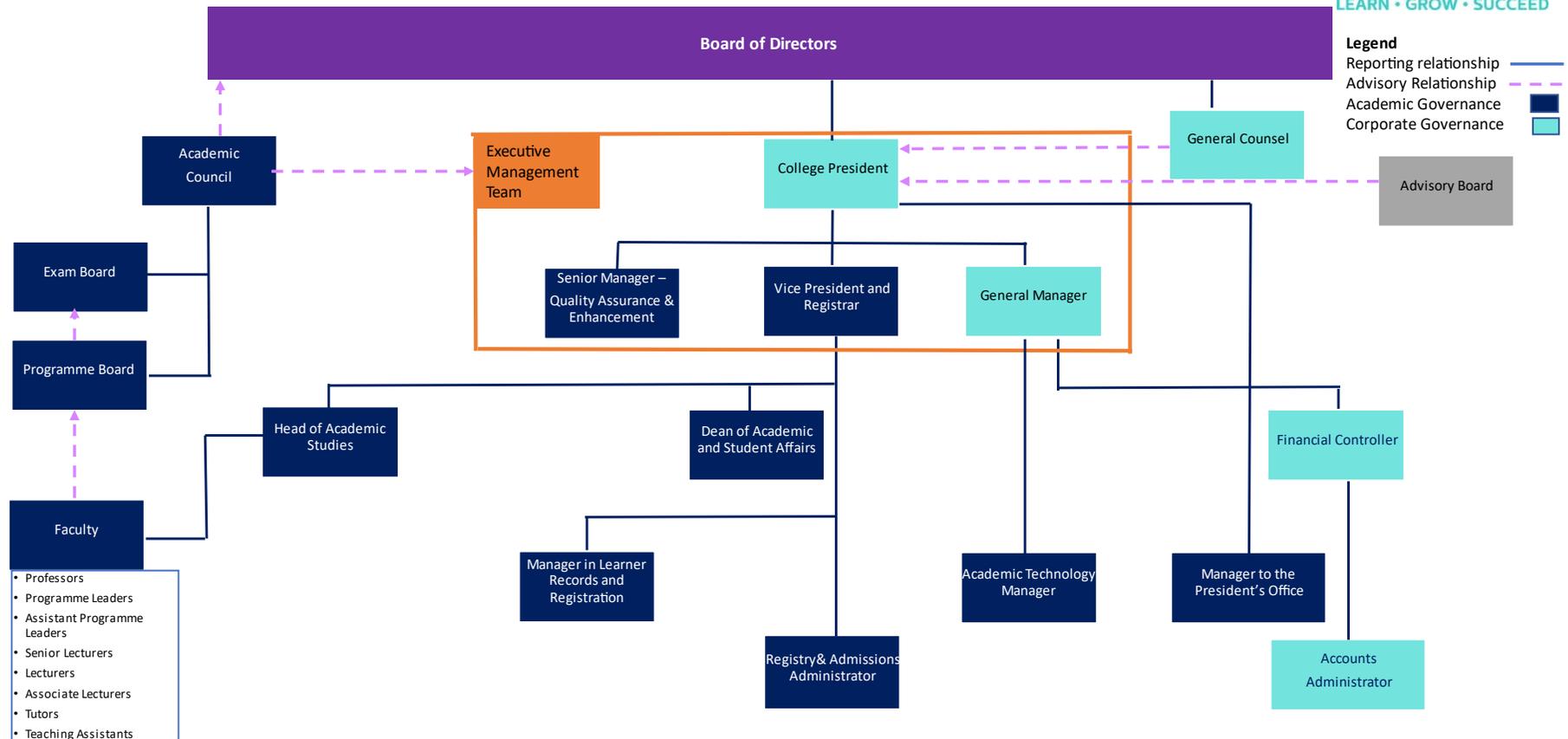
<sup>23</sup> Available at <https://www.hse.ie/eng/services/publications/corporate/personsatriskofabuse.pdf>

6.2. IICP Organisational Chart

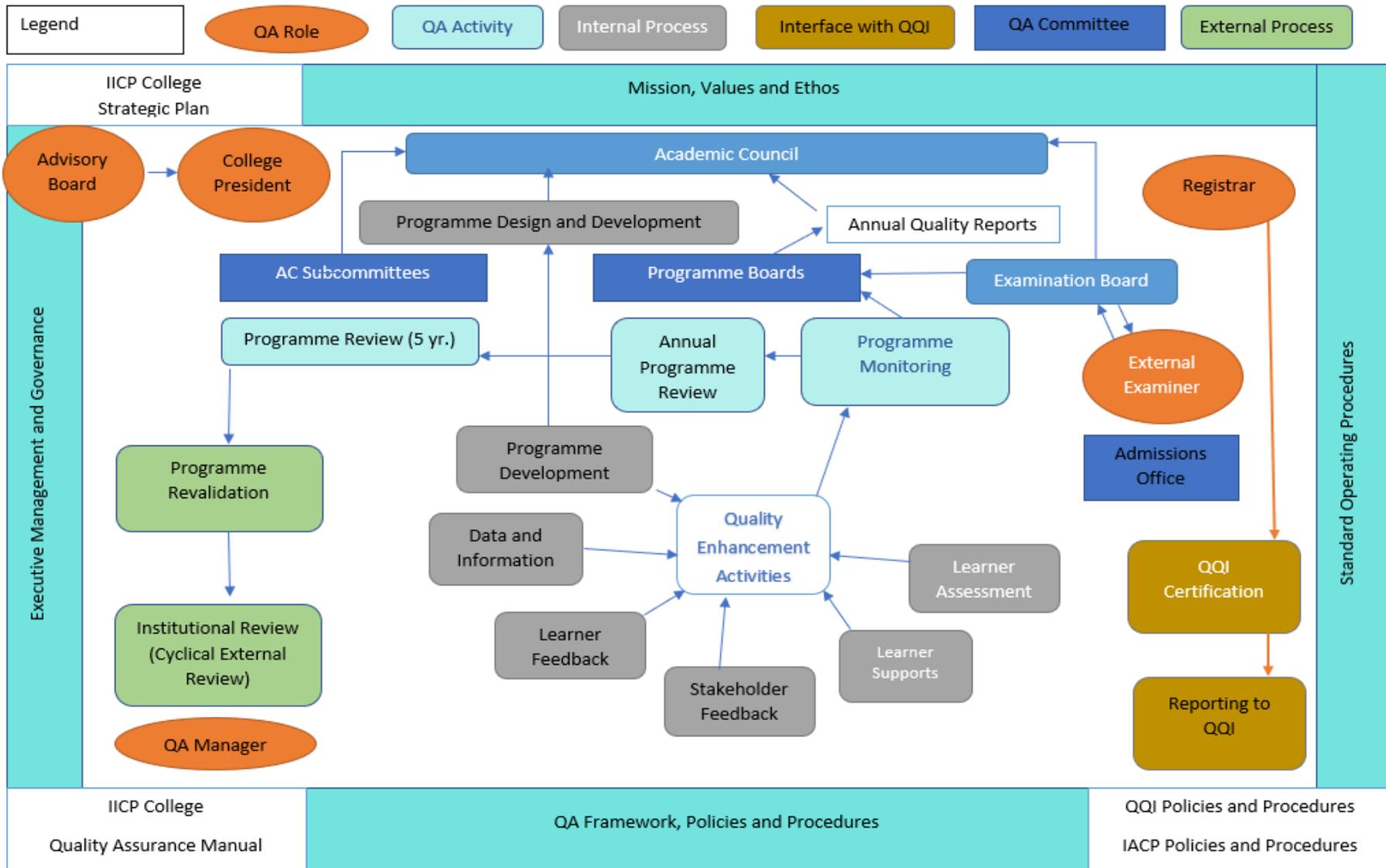
# IICP College – Organisational Chart 2023 -2024 Academic Year



LEARN • GROW • SUCCEED



### 6.3. Diagrammatic representation of IICP College QA system



Diagrammatic representation of QA system (cont.)

**STRUCTURES**

Boards

- Academic Committee;
- Programme Boards;
- Examination Boards;
- Academic (Conduct in Assessment) Disciplinary Committee;
- Academic (Conduct in Assessment) Disciplinary Appeals Committee;
- Academic (Results in Assessment) Appeals Panel;
- Disciplinary Committee;
- Disciplinary Appeals Committee;
- Complaints Appeal Panel;

Roles

- College President;
- Registrar;
- Head of Academic Studies;
- Programme Leaders;
- Programme Co-ordinator;
- Professors;
- Lecturers;
- Tutors.

**PROCESSES AND OUTPUTS**

Monitoring  
Programme Boards  
**Inputs:** Feedback; Data; KPI; External Examiner Reports.  
**Outputs:** Monitoring Reports E.g. Registrar; Faculties and Services; Learner Supports, etc.

Annual Programme Review  
Programme Boards  
**Inputs:** Monitoring Reports;  
**Outputs:** APQR.

Annual Review of Programmes  
Academic Council  
**Inputs:** APQR; Monitoring Reports;  
**Outputs:** Report to Senior Management Team / Board

Programme Review and Revalidation  
Faculty  
**Inputs:** APQR; Monitoring Reports; Minutes of meetings  
 ⇒ **Outputs:** Report to Senior Management Team / Board

Institutional / Cyclical Review  
**Faculty / Board**

**PROFESSIONAL BODY REGULATIONS AND PROCESSES**

Monitoring

Accreditation (IACP Course Accreditation Criteria)

Monitoring (IACP Annual Monitoring of IACP Accredited Courses)

**COMPLIANCE REQUIREMENTS**

Regulations

QQI

IACP

Legislation (e.g.)

Child Protection

Data Protection

Health and Safety

IICP COLLEGE

Strategies

- Strategic Planning.
- Teaching and Learning.
- Access, Transfer and Progression.
- Blended Learning

Policies and Procedures

- Quality Assurance Manual.
- Programme Documentation.

Learner support

- Clinical support.
- Academic Support.
- Professional Support.
- Workplace Learning Support.

## 6.4. Key elements of IICP College QA framework

