

[IICP College]

2022

Annual Quality Report (IICP College)
Reporting Period 2020-2021

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Annual Quality Report (IICP College)
PART A: INTERNAL QA SYSTEM
Reporting Period 2020-2021

PREFACE

The **Annual Quality Report (AQR)** (formerly AIQR) forms part of Quality and Qualifications Ireland's (QQI) quality assurance (QA) framework of engagement with Higher Education Institutions (HEIs). The AQR provides documentary evidence of the development and evolution of each institution's internal quality system. It provides QQI with assurance that internal QA procedures have been established and are being implemented consistent with regulatory requirements.

The AQR, particularly part A, should assist with **document management** in the institutional review process and will facilitate institutions in providing review teams with procedural QA documentation in preparation for the external review process. It is an important part of the evidence base considered by external **review teams** as part of QQI's CINNTE cycle of institutional reviews, demonstrating that the institution's internal QA system is aligned with QQI's Core and relevant Sector- and Topic-specific Statutory QA Guidelines, and with the European Standards and Guidelines for Quality Assurance in the European Higher Education Area 2015 (ESG). It enables the review team to satisfy itself of compliance with these requirements for the purpose of the institutional review process.

Each AQR is **published in full on QQI's website**, providing transparency on the HEIs' assurance and enhancement of quality to external stakeholders. (As such, institutions should ensure that their submissions do not contain any data that they consider to be commercially sensitive.) Collectively, the AQRs comprise a single national repository of quality assurance practice in Irish higher education institutions.

Each year, QQI produces a synthesis report of the key themes highlighted across the AQRs, primarily arising from Part B of the reports.

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Report Structure

Part A: Internal QA System

Part A of the AQR comprises a record of each institution's current QA policies and procedures and should provide links to those policies and procedures. Private HEIs may provide links to the policies and procedures approved by QQI during initial access to validation (IAV) or reengagement. It is the responsibility of each HEI to ensure before submission of the AQR that all links are correct and functional, and that the policies and procedures referred to are the most up-to-date versions available. Given that the AQR is submitted in respect of a discrete reporting period, it may be helpful for institutions to establish a SharePoint/OneDrive folder (or similar) for each reporting period that contains the current versions of their policies and procedures, and that hyperlinks to these versions of the documents be provided in the AQR

Part A is to be completed only if there have been **material** changes to QA policies and procedures during the reporting period. Such changes may include the approval and implementation of new policies or procedures, or significant amendments to existing ones.

Part B: Quality Assurance (QA) and Quality Enhancement (QE)

Part B of the AQR documents and captures QA activities, developments and enhancements undertaken by institutions **during the reporting period** and their **impact**. Insofar as is possible, institutions should demonstrate in Part B how plans set out in the previous AQR were progressed during the reporting period - these may be plans linked to strategic objectives, to reengagement advices, or to institutional review recommendations.

Case Studies

In each reporting period, QQI may request updates on specific thematic areas or may invite the institution to submit case studies in response to specific topics. Further, institutions may include case studies to share good practice on topics of their choosing, demonstrating QA and QE in action. In formulating case studies, institutions are encouraged to reflect on and highlight areas that may be of interest to other institutions and would benefit from wider dissemination. Further guidance is provided in Part B.

Links to Reference Documents Cited in this Template¹

Legislation

- [Qualifications and Quality Assurance \(Education and Training\) Act 2012 \(as amended\)](#)
- [Regional Technical Colleges Act 1992 \(as amended\)](#)
- [Technological Universities Act 2018](#)
- [Universities Act 1997](#)

QQI Documents

Statutory QA Guidelines (QAG)

- [Core QAG](#)
- [Sector-specific QAG for Independent/Private Providers](#)
- [Sector-specific QAG for Designated Awarding Bodies](#)
- [Sector-specific QAG for Institutes of Technology](#)
- [Topic-specific QAG for Providers of Statutory Apprenticeship Programmes](#)
- [Topic-specific QAG for Providers of Research Degree Programmes](#)

¹ These links will be updated as further guidance documents are published.

- [Topic-specific QAG for Blended Learning](#)

Other QQI Policy Documents

- [QQI's Policy for Collaborative Programmes, Transnational Programmes, and Joint Awards, 2012](#)
- [QQI's Code of Practice for Provision of Programmes of Education and Training to International Learners, 2015](#)
- [QQI Policy Restatement on Access, Transfer and Progression, 2015](#)

Other National/International References

- [European Standards and Guidelines for Quality Assurance in the European Higher Education Area \(2015\)](#)
- [IHEQN Guidelines on Collaborative Provision](#)
- [National Policy Statement on Ensuring Research Integrity in Ireland](#)
- [Ireland's Framework of Good Practice for Research Degree Programmes, 2019](#)
- [HEA National Framework for Doctoral Education](#)
- [The Salzburg Principles](#)
- [The Salzburg II Recommendations](#)
- [SOLAS Code of Practice for Employers and Apprentices](#)
- [UN Sustainable Development Goals](#)

PART A: INTERNAL QA SYSTEM

Table 1

Table 1 Mapping of ESG (2015) to QQI QA Guidelines (QAG)				
AQR Part A Section	QQI QAG Core Sub-section No.	QAG Core Sub-section Title	ESG Standard No.	ESG Standard Title
1.0 - Internal QA Framework	2.1	Governance and Management of Quality	1.1	Policy for Quality Assurance
	2.2	Documented Approach to Quality Assurance		
2.0 - Programme Development and Delivery	2.3	Programmes of Education and Training	1.2	Design and Approval of Programmes
4.0 - QA of Research Activities and Programmes			1.9	On-going Monitoring and Periodic Review of Programmes
8.0 - Monitoring and Periodic Review				
5.0 - Staff Recruitment, Development and Support	2.4	Staff Recruitment, Management and Development	1.5	Teaching Staff
2.3 - Teaching, Learning and Assessment	2.5	Teaching and Learning	1.3	Student-centred Teaching, Learning and Assessment
	2.6	Assessment of Learners		
3.0 - Learner Resources and Supports	2.7	Supports for learners	1.6	Learning Resources and Student Support
6.0 - Information and Data Management	2.8	Information and Data Management	1.7	Information Management
7.0 - Public Information and Communication	2.9	Public Information and Communication	1.8	Public Information
2.0 - Programme Delivery and Development	2.10	Other Parties Involved in Education and Training	1.9	On-going Monitoring and Periodic Review of Programmes
8.0 - Monitoring and Periodic Review			1.2	Design and Approval of Programmes
9.0 - Details of Arrangements with Third Parties				
2.0 - Programme Development and Delivery	2.11	Self-evaluation, Monitoring and Review	1.9	On-going Monitoring and Periodic Review of Programmes
8.0 - Monitoring and Periodic Review			1.10	Cyclical External Quality Assurance
4.0 - QA of Research Activities and Programmes	QAG for Providers of Research Degree Programmes			

Introduction and Overview of Institution

This is the AQR for IICP College for the reporting period 1 September 2020 - 31 August 2021.

It is to be submitted by Friday, 25 February 2022.

The AQR has been approved by IICP College Academic Council and is submitted by Dr. Aine O'Reilly, Senior Manager in Quality Assurance and Enhancement.

Development of the AQR 2022

The development of this AQR was guided by [*Policy 2.1 IICP College's Quality and Governance Framework; \(i\) Quality Assurance*](#), which sets out the process used with QA document construction. First, the AQR was drafted by an identified person, the document author, in this case the QA Manager, using standard format for identifying and tracking the document. The development of the initial draft drew on the review techniques identified for QA review, set out in [*Policy 9.6 IICP College Reviewing the Effectiveness of Quality Assurance: Institutional Review*](#), as illustrated in Figure 1.

Figure 1 Review techniques used in development of the AQR



A different approach was taken to writing the Case Studies. A shared folder was established for the topic, and those involved in the activity were enrolled. Tasks and timelines were devised, and thereafter meetings were held at regular intervals to measure progress. The QA manager acted as editor, ensuring that the final draft achieved an appropriate structure and flow, and adhered to the requirements of the AQR.

The initial draft was submitted to the Senior Management Team [SMT] for their consideration. The SMT provided feedback to the document author. The author implemented the feedback, producing a post internal review draft. This was circulated to the Academic Council subcommittee. Following approval, the AQR was submitted to QQI.

As part of its documentary analysis, this AQR drew on the following documents:

- QQI - IICP College agreed record of Dialogues meeting held in July 2021.
- IICP College [Blended Learning Report \(QA Approval\) September 2020](#).
- [Independent Evaluation Report](#) (BSc in Integrative Counselling and Psychotherapy).
- [IICP College's Reengagement Report](#).
- Internal records of BL QA Panel Visit

- Annual Quality Reports for each programme
- Minutes of Academic Council and Academic Council Subcommittees
- Minutes of Examination Boards
- External Examiner Reports
- Minutes of Programme Boards

1.0 Internal QA Framework

1.1 Governance and Management of Quality

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. Key elements of IICP College's QA Framework are set out in [*Policy 2.1 IICP College's Quality and Governance Framework; \(i\) Quality Assurance*](#). These key elements are:

- IICP College Organisational structure 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. These structures are designed to be comprehensive, efficient and responsive, utilising extensive feedback and data to shape future activities.
- IICP College Quality Assurance [QA] structure, 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 are described throughout IICP College's Quality Assurance Manual.
- 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.

Governance and Management of Quality

The College's arrangements for the Governance and Management of Quality are set out in [*Policy 2.2 IICP College's Quality and Governance Framework; \(ii\) Governance*](#). The College operates under a Board of Directors, an Academic Council, and a College President. The principle decision-making body is the Board of Directors. The Board is responsible for the College's objectives, values and strategic direction, within a framework of national legislation, policy and good governance practice in Higher Education, Counselling and Psychotherapy and

Company Law. Ultimately, authority in the academic realm lies with the Academic Council. The College President is the designated officer of the College, and is a member of the Board of Directors. The President is supported in her/his role by the Advisory Board, which brings an external perspective and expertise to the planning process, as well as providing advice and guidance on Quality Assurance and Enhancement, compliance and risk management. The Academic Council may establish panels and subcommittees to provide advice and/or to operate within the power of authority delegated to them. Panels and subcommittees are established for a particular purpose, or may be established to assist with the ongoing work of the AC, as stated in their Terms of Reference.

The Academic Council [AC] is the academic authority of the College. It is chaired by an independent member and draws its membership from external experts as well as from the academic staff, students and academic support services staff. Acting under delegated authority from the Board, it has ultimate authority and responsibility in relation to Academic governance and QA, including New Programme Development and the development, approval, monitoring and review of academic policies. The Board is responsible for Corporate Governance, and in particular for the operation of IICP College in accordance with Company Law, and related legislation and regulation. Any delegation of authority by the Board is subject to the duties and responsibilities of the Directors.

The role of the Board is to provide leadership in corporate matters, in particular in relation to strategic direction, financial stability and legal and regulatory compliance. The remit of the Academic Council [AC], reporting to the Board, is specifically the academic governance of the College. Ultimate responsibility for decision making in respect of programmes of education and training lies with this Council. However, the AC operates within the constraints imposed by the Board, including financial restraints. These are set out in [*Policy 2.5 Terms of Reference of Board of Directors*](#), which indicates the “Board Reserved Matters” (Policy 2.5, Section 8, Schedule 1: Board Reserved Matters). In addition, financial decision-making is the responsibility of the Senior Management Team. Budgeting comes within the remit of the Senior Management Team, who report to the Board as appropriate.

The QAM, in [*Policy 2.2 IICP College's Quality and Governance Framework; \(ii\) Governance*](#), sets out in some detail the principles of governance as they apply to IICP College, and the actual structure in place in the College. This provides a documented account of the College's

rationale for its governance structure, as well as a framework for those operating within the different roles. This clarifies, both internally and externally, the range and limits of decision-making responsibility for College Boards.

This Policy sets out the roles and responsibilities of staff, including College President, Director of Registry and Operations (“Registrar”), Head of Academic Studies, Quality Assurance Manager, Programme Leaders, Programme Coordinators, Visiting Lecturers, Tutors, and Teaching Assistants.

It is important to note that the principle of subsidiarity applies. Thus, tactical decision-making - relating to the implementation of strategic decisions - and operational decision-making, including day-to-day operating decision - occurs at managerial, programme and individual staff levels. Again, clarity is achieved through documenting the roles and responsibilities involved in any process in the QAM.

Contained in its QAM is IICP College’s [*Strategic Plan 2018-2020*](#) which is available on the College’s website. This sets out our mission and vision, and guides all of the College’s activities. This is complemented by the College’s [*Blended Learning Strategic Plan*](#), Policy 11.1, also available on the College’s website.

During the reporting period the Strategic Plan 2018-2020 concluded, and the College began developing its second Strategic Plan. In order to support this development:

- The Advisory Board was constituted, its members inducted, and the Board began meeting in August 2021
- The Strategic Plan 2018-2020 was reviewed.

This Strategic Plan spans an important period in the College’s development, that of its move towards statutory recognition of title of Counsellors and Psychotherapists, as well as the College’s extension of scope to include Blended Learning modes of delivery.

The Strategic Plan sets out and offers a Strategic Vision and a set of Institutional Values and Strategic Priorities intended to guide activities of the College, as well as continued growth. Guided by consideration of the developmental trends in the European Higher Education landscape summarised in the ESG, they focus on making a positive impact on students, the locality and the profession.

The Strategic Plan was fully reviewed during the 2020-2021 Academic Year as part of the development of a future Plan. This review identified a number of notable achievements, such as:

1. Approval of IICP College Blended Learning QA.
2. Revalidation of undergraduate suite of programmes.
3. Migration of undergraduate programmes to Science Awards Standards and Blended Learning.
4. Engagement with QQI Pilot on QA of Online Programmes, and the submission of an online programme (a level 6 20 credit programme entitled “Certificate in Counselling and Psychotherapy”).
5. The increased emphasis on generic skills in College programmes, including communication, computer literacy, quantitative analysis and cross-cultural awareness as well as professional skills. This has been addressed through the development of the College’s Student Support Programme, “By-Your-Side”, the development of website and Moodle learner supports, the development of induction programmes on all programmes, and the revision of graduate attributes in Undergraduate Programmes at revalidation.

The quality structures, policies and procedures in place at IICP College fully support the achievement of the strategic institutional priorities of the College, as is set out in the College’s [Quality Assurance Manual](#) [QAM]. Centrally, scrutiny of the development of the College occurs through the involvement of College members in Strategic Planning. The key role of the College President includes the responsibility for ensuring appropriate consultation with faculty, learners, staff and administrators in discharging the responsibilities of the office, in particular in relation to drafting and agreeing with the Board IICP College’s Strategic Plan. The President is advised by the *Advisory Board* in this regard, as set out in [Policy 2.6 Terms of Reference of Advisory Board](#). The College President is also responsible for interacting with appropriate external bodies, including professional and academic accrediting bodies, and professional associations, to achieve the mission of the College. The President in turn communicates the Higher Education needs of the College to the Board. Thus, the Board, in carrying out its statutory responsibilities under the Companies Act to act in the best interests of the College, ensure that the Higher Education needs of the College are central to its strategic planning.

Representation of learners

This is documented in [*Policy 6.12 Learner Engagement: Consultation, Liaison and Representation*](#). A learner representative sits on the Academic Council, as set out in [*Policy 2.7 Terms of Reference of Academic Council*](#). In addition, the Class Liaison system, described in Policy 6.12, is a forum for communication between the College and the Learner body about the QA system, teaching and learning, resources, and learner care and support. Learners are also involved in policy review. One example is QA review for the purposes of reengagement.

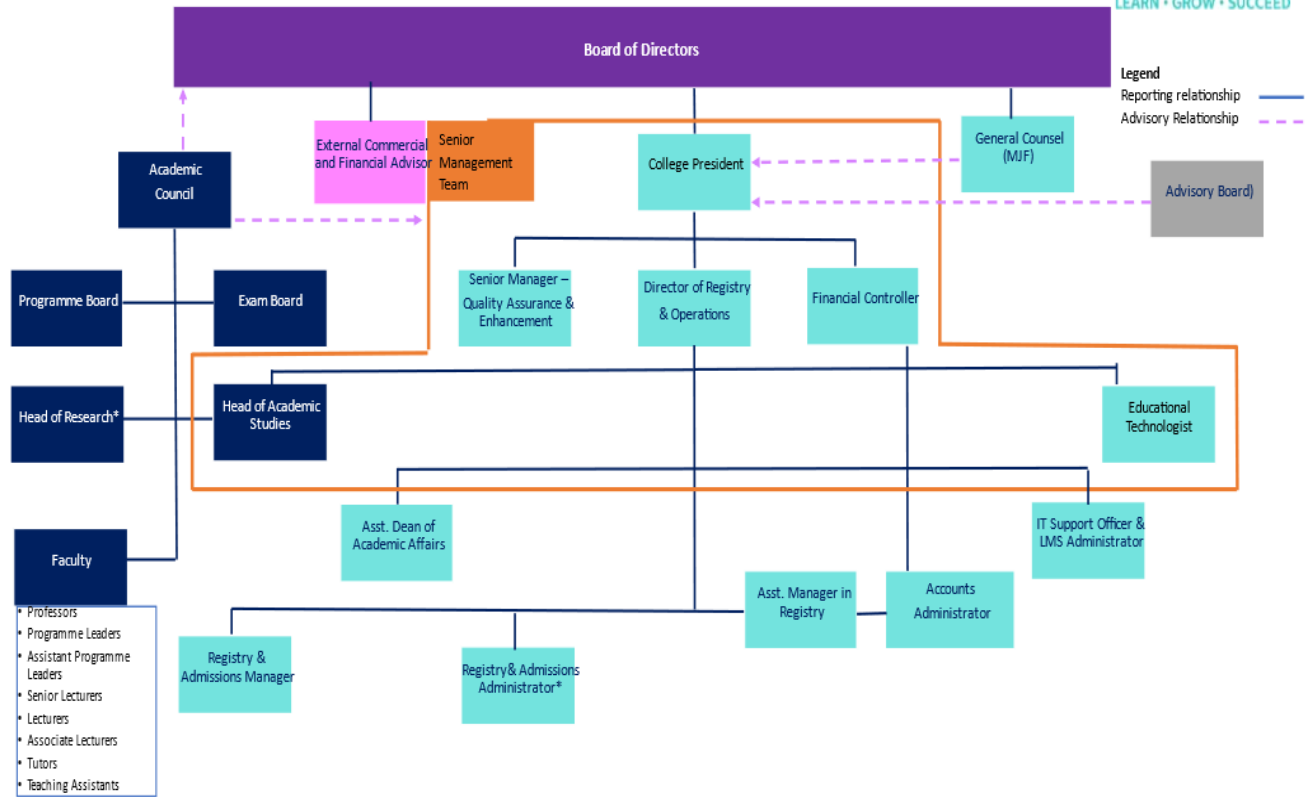
The College's policy on Learner Representation was revised during the reporting period. Concerns were expressed, which triggered the review, including the requirement for representation across too many bodies which was perceived as too onerous on students, and the focus on representation to the exclusion of fostering dialogical communication between the student and faculty bodies.

The revised policy presents a range of options to learners for engagement, including responding to consultations on policies; acting as liaison between their class and faculty/ the College, and acting as representative for the student body on the Academic Council.

Organisational Chart

The College's Organisational Chart is set out in Figure 2. It should be noted that the organisational structure will be reviewed as part of the College's Strategic Planning in the next reporting period.

Figure 2. IICP College - Organisational Structure 2020-2021 Academic Year



Legend
 Reporting relationship ———
 Advisory Relationship - - - - -

* Denotes parttime

1.2 Linked Providers, Collaborative and Transnational Provision

This section does not apply.

2.0 Programme Development and Delivery

2.1 Programme Development and Approval

IICP College's Quality Assurance Manual, in Part 9, addresses Programme Development and Approval through specific policies on:

- Programme Monitoring in [*Policy 9.4 IICP College Monitoring and Evaluation Policy*](#)
- New Programme Development ([*Policy 9.3 IICP College New Programmes Policy*](#))
- Programme Validation and Revalidation ([*Policy 9.5 IICP College Programme Review and Revalidation*](#))
- Reviewing the Effectiveness of Quality Assurance ([*Policy 9.6 IICP College Reviewing the Effectiveness of Quality Assurance: Institutional Review*](#))

IICP College's policies for monitoring and review are published on the College website.

New Programmes

[*Policy 9.3 IICP College New Programmes Policy*](#) sets out the process by which new programmes at IICP College, as well as substantial modifications to existing programmes, are developed and approved. The College's approach is explicitly guided by QQI's guidelines. New programmes may be proposed by any member of staff at IICP, and presented to the Academic Council. The policy accounts for stakeholder and learner consultation, has regard to QQI's Core Validation Criteria and establishes a separation between those who develop learning material (the Programme Development Team) from those who approve it (Academic Council).

The New Programme Policy requires that any programme being considered for initial validation must:

1. Be designed with reference to QQI Validation Policy, and QQI Awards Standards, as well as professional body requirements. It must present to the Senior Management and the Academic Council descriptions of the programme based on QQI's most recent Validation Document.
2. Be presented in programme documentation that addresses the Core Validation Criteria and utilises the most recent QQI Programme Validation Manual and (if relevant) programme review manual. It is required that this documentation demonstrates compliance with QQI Core Validation Criteria.

3. Include an assessment of the Proposed Programme against QQI's Core Validation Criteria, carried out on the QQI template.

This policy provides for six stages of development prior to a decision being made to propose a new programme for validation to QQI. The six stages allow for the drafting of validation documents as well as internal and external review of the proposal and the incorporation of feedback (both internal and external) at each stage. The decision as to whether to propose a new programme to QQI is ultimately made by the Academic Council, subject to financial decisions taken by the Senior Management Team and the Board. The cost / benefit analysis is included in the validation documents considered by the Academic Council.

The stages are:

- (i) Outline Approval,
- (ii) Programme Development.
- (iii) Document Development.
- (iv) Internal Review.
- (v) External Expert Review.
- (vi) AC Approval.

Each stage must be successfully navigated in order to produce an approved programme document that can be considered for validation.

Programme Monitoring

IICP College's [*Monitoring and Evaluation Policy*](#) requires that programmes be monitored annually in accordance with the requirements of QQI's "Policies and Criteria for Validation of Programmes". Annual Reporting requirements for each programme, contained in IICP College's Programme Monitoring Policy, are derived from QQI's Programme Review Manual.

A notable addition in recent years has been the inclusion of monitoring of grades. The academic grades achieved by students are monitored and reviewed each year with particular attention to the grades of final year students which are benchmarked against comparable data for other Colleges in Ireland.

Programme Review and Revalidation.

Self-Evaluation occurs both annually and as part of the Programme Review cycle conducted every five years. Annual monitoring involves quality reporting from programmes to the Senior Management Team [SMT] and Academic Council [AC]. This is a reporting process based on the requirements for Programme Review data collection, analysis and reflection and therefore annual review feeds into Programmatic Review.

Programmatic Review involves a systematic process of evidence-gathering, reflection, drawing conclusions and proposing changes to the validated programme. The review and analysis are documented in the College's Programme Review Report, and the proposed revised programme is documented in the Programme Validation Application. In addition, the College completes a self-evaluation against the Validation Criteria. These three documents are submitted to an external panel who conduct the programme review, and subsequently provide the basis of a validation application to QQI. How this process operates in the College is illustrated in case study 1, in relation to the revalidation of the College's undergraduate programmes during the reporting period.

Learner involvement in Programme Development and Review

The TOR of Programme Boards and the AC require self-evaluation based on quantitative and qualitative data, in particular learner feedback. There are arrangements in place for consultation with students, graduates, employers, practitioners and other providers during programme development and review.

Institutional Review

The College policy on Institutional Review is set out in [Policy 9.6 IICP College Reviewing the Effectiveness of Quality Assurance: Institutional Review](#). Institutional Review requires a self-evaluation of the effectiveness of QA process. The procedure includes both an internal and an external phase. A key task of the internal phase is the production of an Evidence-based Self-Evaluation Report, and the policy guides on review techniques can be used to support this process. The external phase includes a Site visit by an external panel, and a Panel report followed by the College's production of a Quality Improvement Plan.

2.2 Admission, Progression, Recognition & Certification

The key policies governing admissions processes and procedures; supports for students, including academic support services; access and progression routes; and the recognition of prior learning are as follows:

Access Transfer and Progression.

- [*Policy 1.3 Access, Transfer and Progression Strategy and Policy*](#). This policy deals with Strategy and Policy for Access Transfer and Progression, including entry requirements, access and transfer policies. It specifies the entry requirements for IICP College's programmes, and the related admissions policies and procedures for the programmes.
- [*Policy 1.4 Recognition of Prior Learning Policy*](#). This policy provides detailed information and procedures relating to Recognition of Prior Learning.
- [*Policy 5.2 Assessment Regulations*](#). This policy provides a high-level view of the College's regulations for, and approaches to, assessment, including its progression regulations.

Student Support

- [*Policy 6.1 Policy Framework for Learner Care, Support and Welfare*](#). This policy summarises the College's Care, Support and Welfare policy framework, and identifies the supports provided. It places responsibility on the College to have in place a student support framework, and to monitor markers for concern such as attendance and time-keeping.
- [*Policy 6.4 Policy and Procedure on Learner Welfare and Wellbeing*](#). This policy balances the intention of being supportive of individual learners with the requirements for maintaining academic standards and the right of all IICP College members to learn, work and live without unwarranted interference from others.
- [*Policy 5.6 Learners with Learning Difficulties*](#). This policy describes the process by which designated support and special accommodation may be provided to learners who evidence a physical or learning difficulty.
- [*Policy 6.9 Physical Premises, Equipment and Learner Facilities and Services*](#). This policy sets out the Facilities and Services available to learners. It describes how the College assures the quality of its physical premises, equipment and facilities.

- [*Policy 6.3 Learners' Charter*](#). This policy outlines what is accepted as a suitable learning environment, and sets out guidelines for a beneficial, constructive academic and professional community.

These policies occur in the context of a wider QA framework which encompasses published quality assurance provisions for the purposes of ascertaining, maintaining and improving the quality of education, training and related services and provisions for access, transfer and progression in accordance with relevant legislation.

The College has formal arrangements in place for learners' access, transfer and progression, which ensure that entry, transfer and progression processes are clear, fair and transparent and that all learners, including those with particular learning needs, have opportunities to become involved in appropriate learning opportunities, and that clear statements of attainments required for transfer or progression are available to all learners. All reasonable attempts are made to remove obstacles to learner progression, and they are supported on their route to professional recognition, further learning and/or employment through a range of academic, professional and personal supports.

IICP College is committed to facilitating access and progression for all learners, and to providing procedures that assist learners to address barriers to progression that they may experience. IICP College's [*Recognition of Prior Learning Policy*](#) (Policy 1.4) lays out the processes and procedures in place for non-standard entry, including recognition or prior certified and uncertified learning. The [*Assessment Regulations*](#), Policy 5.2 communicates to learners' regulations in place governing matters that may impact on progression, as well as recognition and certification. Policy 5.6 sets out the policy and procedure for learners who have particular learning needs, and puts in place a flexible, learner centred response for individual learners. Policy 6.4 [*Policy and Procedure on Learner Welfare and Wellbeing*](#) is intended to assist learners to achieve their potential, both academically and professionally, through providing individually tailored support for learners who are experiencing difficulty in satisfying the required programme or professional requirements, or in adhering to the Learner Charter. Under the management of the Head of Academic Studies, a designated Learner Care Team has responsibility for responding to the individual circumstances and issues raised by an individual learner.

2.3 Procedures for Making Awards

This section does not apply.

2.4 Teaching, Learning and Assessment

Teaching, Learning and Assessment Strategy and Policies

IICP College has in place a teaching, learning and assessment strategy, [Policy 1.2 Teaching, Learning and Assessment Strategy](#), that links organisational mission and strategy to the College's teaching, learning and assessment approach in all of its undergraduate and postgraduate programmes. In accordance with its Strategic Plan, the College has taken steps to develop online teaching and learning components of all of its programmes, as well as to seek to extend its scope of provision into Blended Learning. Consequently, its Teaching, Learning and Assessment Strategy is complemented and enhanced by a range of teaching and learning policies, approved by PAEC in September 2020, specifically relating to Online and Blended Learning environments. The following policies attend particularly to the design and delivery of study programmes and the assessment of outcomes in online and blended environments.

- [Policy 11.2 Blended Learning Policy](#)
- [Policy 11.3 Blended Learning. Technology-Enabled Assessment Policy](#)
- [Policy 11.4 Ethics of VLE usage in Blended Learning Programmes](#)
- [Policy 11.5 Incorporating Digital Technology into the Curriculum](#)

These policies guide the design, monitoring and review of programmes, emphasising a focus on coherence of programme structure, integration of all teaching, learning and assessment components, and orientation towards the achievement by learners of its intended programme learning outcomes.

During this reporting year the College reviewed its blended learning suite of programmes to include QA of Online Learning programmes. This occurred as a result of the College's involvement in QQI's Pilot for the development of new statutory QA guidelines. It is expected that these QA will be considered by QQI in the 2021-2022 academic year.

Student-centred learning and teaching

The approach of the College's [Teaching, Learning and Assessment Strategy](#) is learner-centred, described as follows:

“Involved learning requires attention to the person of the learner, and also the construction of spaces where learners can identify and describe their own self as learner, and how it impacts on their learning. Small group size and discursive spaces contribute to this personalisation and

allow the programme to adjust pace and timing accordingly. Learning is tied to the interests and readiness-for-content of the learner and adjusts to the challenges experienced by learners in practice components of the programme”.

A key feature of learner centredness is comprehensive and timely feedback to learners on their performance. IICP College has in place a policy on [*Learner Information Provision and Feedback in Assessment \(Policy 5.5\)*](#), which documents the procedures for providing feedback to learners on formative and summative assessment tasks in order to ensure that feedback informs learning. This policy summarises and adds to related policies, in particular [*Policy 5.2 Assessment Regulations*](#), which requires that all assessment strategies ensure the provision of appropriate feedback to learners on their progress.

Quality assurance processes for assessment

The Quality assurance processes for assessment are set out in section 5 of the [*QAM*](#). The main provisions are:

- [*Policy 5.1 Policy and Procedure Examinations Board Regulations*](#)

This policy establishes the Examination Board as having the authority to make final decisions on all summative assessments. Examination Boards include a chairperson and a secretary, all assessor, external examiner, Registrar and support staff. IICP College takes a collegial and collaborative approach to Examination Boards, and consequently they provide significant opportunities for informing individual practices in assessment, and also in teaching and learning.

- [*Policy 5.2 Assessment Regulations*](#)

This policy set out the principles that govern assessment, roles and responsibilities in assessment and the quality assurance of assessment.

- [*Policy 5.3 External Examiner Policy*](#),

This policy details how external examiners are appointed, and the roles and responsibilities of external examiners.

- [*Policy 5.4 Moderation of Assessment Material and Results*](#)

This policy sets out both internal and external moderation processes for different phases of assessment, from design to submission for certification.

- [*Policy 5.5 Learner Information Provision and Feedback in Assessment*](#)

This policy sets out the information that should be provided to students about their assessments, and the procedures for providing feedback.

- [*Policy 5.6 Learners with Learning Difficulties*](#)

This policy describes the process by which special accommodation may be provided to learners who evidence a physical or learning difficulty.

- [*Policy 5.7 Examination Results. Review, Recheck and Appeal*](#)

This policy sets out the ways in which learners can obtain further information about their assessment results, and how students can question or challenge decisions in relation to assessments and results.

These policies work with organisational structures to assure the quality of assessments. For example, External Examiner reports are considered by Programme Boards and the Academic Council, and are summarised and analysed in Annual Programme Quality Reports produced by Programme Boards and submitted to the Academic Council. External Examiner reports are also used in programme review to inform recommendations for programme change and development.

The quality of the learning experience is monitored on an on-going basis in particular from two perspectives:

1. Learners. Learners provide feedback on their experiences of modules and of the training programme, including learner supports and facilities. Module feedback is presented to lecturers for their feedback and action plan for continuous improvement. Programme feedback is included in APQRs for consideration by the AC and the SMT.
2. Outcome measures. Learners are required to achieve professional competencies in order to practice. Learner progression and achievement, including on clinical aspects of the programme, provide a measure of the success of the programmes in producing competent professionals. This is one significant element of learning experience: whether the teaching and learning opportunities are adequate and sufficient to produce professionally competent practitioners. Learner progression rates and assessment

outcomes are monitored regularly at programme and AC level for the purposes of programme development and improvement.

Quality Assurance of Workplace Learning

IICP College have in place the following policies for the assurance of workplace learning.

- [Policy 7.3 Quality Assurance of Workplace Learning](#)
- [Policy 7.4. Quality Assurance of Workplace Learning. Masters in Pluralistic Counselling and Psychotherapy](#)

IICP College core programmes are designed to be applied directly to the practice of counselling and psychotherapy and therefore include a practice element. These policies assure the quality of placement learning and the fair assessment of the learner. Through identifying and articulating the respective roles of workplace managers, supervisors and teaching staff, these policies ensure that the assessment of learners in work placement is conducted by, and under the assessment regulations of, IICP College.

In addition, IICP College has in place clinical practice support policies which ensure that learner care and welfare are at the centre of workplace learning. The core policy here is: [Policy 7.5 IICP College Framework for Monitoring and Maintaining Clinical Practice Requirements](#). Initial engagement as a counsellor and psychotherapist is governed by [Policy 7.6 Readiness to Practice Policy](#), which outlines the procedure required of all learners prior to embarking on clinical practice. The core aim of these policies is to ensure that learners' clinical practice is safe and ethical, and that learners have support structures in place if they encounter difficulties with clinical practice placements.

Diverse needs of learners are identified and addressed usually in consultation with learners. Under [Policy 5.6 Learners with Learning Difficulties](#), learners who self-identify as having a disability, and can support this with appropriate evidence, can receive special accommodation in teaching, learning and assessments. Under [Policy 3.7 Policy and Procedure for Mitigating Circumstances](#), learners who experience personal, familial or other difficulties that impact on their progression may receive special consideration in how they satisfy programme requirements. Learners who experience a range of academic, personal and inter-personal difficulties may be identified through the College [Learner Welfare and Wellbeing procedures](#), and offered supports. To assist learners, navigate these different processes, the College makes

available an overview of the framework for learner care in [*Policy 6.1 Policy Framework for Learner Care, Support and Welfare*](#).

Academic Integrity

The main policies governing Academic Integrity are:

- [*Policy 3.3 Academic Integrity Policy*](#).

This policy articulates how the College supports good academic practice. The principle is that fostering good practice mitigates against bad practice.

- [*Policy 3.4 Academic Impropriety Policy and Procedures*](#).

This policy provides a framework for responding to allegations of Academic Misconduct, including plagiarism.

- [*Policy 11.2 Blended Learning Policy*](#) and [*Policy 11.3 Blended Learning: Technology-Enabled Assessment Policy*](#)

These policies extend considerations of academic conduct into Blended delivery.

One substantial development in this reporting period has been in relation to the use of text matching software for plagiarism detection. Traditionally, the College has not used technical applications for plagiarism detection. Following advice from the panel who considered the QA of BL, the College documented its rationale and processes in place to safeguard academic integrity in the absence of technical applications for plagiarism detection. It also undertook research to consider the range of plagiarism detection applications available, and how they might fit within the College's context.

As a result of its research, in particular during its development of Online QA, it was decided that a careful approach to including text matching software was required. Consequently, its Online QA, currently under consideration by QQI as part of its Pilot Study, includes a provision for programme specific rules and regulations in relation to Academic Integrity. The College submitted an application for validation of an online programme to QQI as part of this pilot, which included in its assessment strategy the use of text matching software. The draft QA and application for validation of the online programme were approved by the College's Academic Council in September 2021.

In preparation for this development, the College has undertaken the following activities:

1. Regulatory meetings (described in Case Study 2) have considered the Data Protection impact of the use of different text matching software.
2. Information provision on the use of plagiarism software by teachers have been developed. Information for students is in the process of being developed.
3. A pilot is being arranged to allow staff and students the opportunity to test and troubleshoot this software.

3.0 Learner Resources and Support

The core policy documents regulating the provision of Learner Resources and Support are:

- [*Policy 6.9 Physical premises, Equipment and Learner Facilities and Services.*](#)

This covers in particular Library Resource, Physical Premises, VLE and Educational Technology Resources.

- [*Policy 6.1 Policy Framework for Learner Care, Support and Welfare.*](#)

This policy summarises the College's Care, Support and Welfare policy framework. It identifies the supports provided to learners, and places responsibility on the College to have in place a student support framework, and to monitor markers for concern such as attendance and time-keeping.

- [*Policy 6.4 Policy and Procedure on Learner Welfare and Wellbeing.*](#)

This policy balances the intention of being supportive of individual learners with the right of all IICP College members to learn, work and live without unwarranted interference from others. It provides procedures for responding to a range of Welfare and Wellbeing Concerns.

- [*Policy 6.7 Dignity and Respect .*](#)

This policy fosters diversity, inclusiveness and respect, and prohibits discrimination / harassment on specific grounds. It provides an informal procedure for responding to discrimination and harassment which aims to resolve interpersonal issue through dialogue and negotiation.

The College also provides support to undergraduate and Masters students in completing the research components of programmes, in particular through the establishment of structures, processes and procedures for Ethical Review, and in codifying their rights and responsibilities in Research Supervision. This is set out in detail in section 4.0, QA of Research Activities and Programmes.

Reviewing the quality of learner resources and supports.

The adequacy of programme resources is considered in different fora, including:

- Programme Boards.
- Academic Council (on the basis of Annual Quality Reports).
- Senior Management Team.

- Board of Directors.

The principal arena of decision-making regarding the adequacy of premises, facilities and resources for current education and training programmes when working within the budget allocated by the Board is the Senior Management Team. The [TOR of the Senior Management Team](#) identifies its responsibility for the general management, subject to College policy, of the College's resources, physical facilities and equipment, including the allocation of rooms and other space.

The adequacy of resources and facilities are also considered:

1. At Programme Board level, when preparing the Annual Quality Report.
2. At Academic Council level, when considering Annual Quality Reports; and
3. At Board level, when considering Board Reserved matters.

The adequacy and enhancement of learning resources is addressed in each programme board's Annual Programme Quality Report [APQR], as is documented in [Policy 9.4 IICP College Programme Monitoring Policy](#). The Academic Council consider and approve each programme's APQR. The Programme Boards advise and make recommendations to the Senior Management Team on suitable resources for the effective delivery of learning and teaching and student supports. This is documented in the [Terms of Reference of the Academic Council](#).

The adequacy of resources and facilities is managed by the Senior Management Team. According to its [Terms of Reference](#), the Senior Management Team is responsible for managing the resources of the College and preparing a budget for the College.

Oversight is provided by the Board of Directors. Under its [Terms of Reference](#), the Board is responsible for the management of organisational risk, and for Board Reserved Matters.

This structure ensures that there is considerable monitoring of resources through the Programme Boards, and the Academic Council. This includes different perspectives on the adequacy of resources, which are summarised in an Annual Programme Quality Report [APQR], described in [Policy 9.4 IICP College Monitoring and Evaluation Policy](#), prepared by the Programme Boards and submitted to the Academic Council. The Academic Council, taking into account reports from all programmes, deliberate on the adequacy of resources and

facilities for the College's programmes as a whole. Resource implications are considered by the Senior Management Team, who has overall responsibility for the management of programme and the implementation of the College's academic policy.

4.0 QA of Research Activities and Programmes

As recorded in our [Strategic Plan 2018-2020](#), a strategic priority for IICP College is: “To enhance the standing of the College as a leading Higher Education Institution for teaching and learning, research, and innovation in the field of Counselling and Psychotherapy.”

The QA of Research Activity in the College is recorded in the [QAM](#), Section 7: Research, Clinical Placement and Clinical Practice. Policies in this section provide both a supervision framework and an ethics framework for research activities.

The main policies relating to the QA of Research Activity in the College are:

- [Policy 7.2 Supervision of Masters Research](#)

This policy sets out a framework for effective research supervision at Masters level. It links supervision with the College’s Teaching and Learning strategy, and articulates the approach of the College to appointing research supervisors. It also sets out the contract between the supervisor and the supervisee, stating what supervision is and is not; the time spent on supervision; the responsibilities of the supervisor; and the responsibilities of the supervisee.

- [Policy 7.8 Supervision of Undergraduate Research](#)

This policy relates specifically to the capstone Research module in the College’s Level 8 programme. Its purpose is to set out a framework for effective research supervision at undergraduate level. Similar to the previous policy, it sets out a framework for effective research supervision, this time at undergraduate level, and links supervision with the College’s Teaching and Learning strategy. It also sets out the contract between supervisor and supervisee, so that both parties come to the relationship knowing what to expect, and what is expected of them.

- [Policy 7.1 Ethics in Research: The Research Ethics Committee](#)

The Research Ethics Committee is established by the Academic Council, and is responsible for granting ethical approval for research with human subjects conducted by or within the College community. Membership is drawn from within and outside the College, and must include at least one external member. Learners and Staff in IICP College engaged in research with human subjects are required to obtain ethical approval from the Research Ethics Committee prior to commencing data collection. This policy sets out the Terms of Reference of

the Research Ethics Committee, the conditions for approval, the process for applying for approval, and the responsibilities of the College in relation to ethics in research.

This section of the QAM was revised during the reporting period to provide additional supports for undergraduate research. This policy revision occurred as a result of programme review of BSc Hons in Counselling and Psychotherapy. The revised policies are:

- [Policy 7.8 Supervision of Undergraduate Research](#) and
- [Policy 7.1 Ethics in Research: The Research Ethics Committee](#)

5.0 Staff Recruitment, Development and Support

IICP College has in place:

- Policies for the recruitment, selection induction and probation of Core Staff, which ensure that new staff have the necessary experience, qualifications and expertise. The principal policies here are:
 - o [Policy 8.1 Quality Assurance of Teaching Staff](#)
 - o [Policy 8.2 Recruitment and Selection of Core Teaching and Teaching Support Staff](#)
 - o [Policy 8.3 Core Teaching and Teaching Support Staff Induction and Probation Policy](#)

- Policies for staff development, and for periodic “developmental dialogues”, which provide staff with the opportunity to reflect on their teaching practice, and to discuss job performance and career development opportunities. The principal policies here are:
 - o [Policy 8.4 Staff Communication Policy](#)
 - o [Policy 8.5 Staff Development Policy](#)
 - o [Policy 8.6 Core Staff Development Dialogues](#)

Recruitment, selection induction and probation of Core Staff

In [Policy 8.2 Recruitment and Selection of Core Teaching and Teaching Support Staff](#) recruitment begins with the identification of a human resource need for a core teaching or teaching support position. This need is developed into a position description, which clearly articulates responsibilities and qualifications requirement of the identified post. This position description is used to develop interview questions, interview evaluations and reference check questions, which forms the basis of selection.

All staff undergo induction and probation, in accordance with [Policy 8.3 Core Teaching and Teaching Support Staff Induction and Probation Policy](#). These processes are aimed at enabling new Core Staff to settle into the College; to become familiar with their role; to acquaint themselves with IICP College’s policies, procedures and practices; as well as to self-assess and be assessed against the requirements of their role.

Staff development.

Staff developmental needs are identified through induction, developmental dialogues, programme monitoring procedures and programme board meetings, as well as less formal channels. Training provision is prioritised by the College according to identified needs and its contribution to the College's strategic objectives. [Policy 8.5 Staff Development Policy](#) provides Teaching and Teaching Support staff with the opportunity to develop their knowledge, skills and abilities through a blend of learning methods including on the job learning, mentoring, supervision, line management, in-house training, and external courses, conferences and seminars. Needs are addressed both through individually focused activities such as on-the-job training, mentoring, written instructions, line management and supervision; and through training arranged by the College or financial assistance provided by the College to support further studies. Staff also have one-to-one review sessions of their practice as part of programme monitoring, which includes both reviewing learner feedback and key performance indicators, and also commenting on programme quality and enhancement opportunities.

As set out in [Policy 8.6 Core Staff Development Dialogues](#), staff also have the opportunity to take part in Developmental Dialogues, which provide an opportunity to reflect on their teaching practice.

All teaching staff are employed. Involvement of part-time staff in programme development and professional development is required by their roles and responsibilities. However, IICP College policies distinguish between core staff and non-core staff, and different levels of support are available for the different categories of staff. All non-permanent staff contracts are negotiated at the beginning of each academic year, as a part of the planning process. These contracts require that staff commit to both specific teaching hours and to engagement with necessary QA tasks, such as attendance at programme boards, examination boards and meetings.

Programme issues are brought to the attention of all staff both formally and informally. It is usual that staff are informed through communication means such as Moodle or email. This is formalised in [Policy 8.4 Staff Communication Policy](#). It is also important to note that staff will usually have been consulted regarding any issue or change that impacts them.

Staff developmental issues for core and non-core staff are addressed in [*Policy 8.5 Staff Development Policy*](#). While the levels of support differ, the principle of identifying needs and providing appropriate learning opportunities applies to all staff.

Staff are facilitated and encouraged to engage with a community of practice in their field(s) of learning. This is evident in the [*Teaching, Learning and Assessment Strategy*](#), and in the [*TOR of Programme Boards*](#). Engagement with communities of practice occur through staff meetings and professional development opportunities, as well as arising from their membership of and involvement in professional bodies where Continuous Professional Development is a requirement of registration renewal.

Staff meetings include Programme Boards and Faculty Fora. These are primary sites of engagement with teaching and education practices, from both an academic and professional perspective. Professional development opportunities allow staff to pursue their individual interests. Involvement in professional bodies, which is a usual requirement for teaching practice in the College, provides a primary site of engagement with professional communities of practice.

A large proportion of College policies in this area come within the remit of Human Resources, and are available internally to staff. During this reporting period a major revision of staff policies occurred, with the aim of providing staff with a fair and supportive environment that fosters equality and diversity, as well as ensuring compliance with all relevant legislation.

The new policies were approved by the Board of Directors in July 2021

The new policies are:

1. IICP College - Confidentiality policy
2. IICP College - Dress Code policy
3. IICP College - Probation policy
4. IICP College - Data Protection policy
5. IICP College - Equality of Opportunity policy
6. IICP College - Employee Assistance Programme policy
7. IICP College - Right to disconnect policy
8. IICP College - Misuse of Substances

9. IICP College - Smoking and Vaping policy
10. IICP College - Expenses policy
11. IICP College - Receiving student payments policy
12. IICP College - Adoptive Leave policy
13. IICP College - Annual Leave policy
14. IICP College - Bereavement-Funeral Leave policy
15. IICP College - Carers Leave policy
16. IICP College - Compassionate Leave policy
17. IICP College - Force Majeure Leave policy
18. IICP College - Jury Duty Leave policy
19. IICP College - Maternity Leave policy
20. IICP College - Parental Leave policy
21. IICP College - Parents Leave policy
22. IICP College - Paternity Leave policy
23. IICP College - References policy
24. IICP College - College Property policy
25. IICP College - Use of Company IT Systems policy
26. IICP College - Internet Usage policy
27. IICP College - E-mail Usage policy
28. IICP College - Use of Office and Mobile Phones policy
29. IICP College - Social Media Usage policy
30. IICP College - Working from Home Policy
31. IICP College - Additional Exceptional Hours-Time Off in Lieu (TOIL) policy
32. IICP College - Breaks and Lunch policy
33. IICP College - Punctuality and Attendance policy
34. IICP College - Intellectual Property Rights policy
35. IICP College - Professional Conduct Behaviour Policy
36. IICP College - Whistleblowing policy
37. IICP College - Use of Own Vehicles for Work policy
38. IICP College - Disciplinary policy
39. IICP College - Grievance policy
40. IICP College - Respect and Dignity at Work policy
41. IICP College - Sick Leave policy

42. IICP College - IT User Security Policy

6.0 Information and Data Management

IICP College's [*Information Systems Policy*](#) details the information gathering required for QA and monitoring purposes. The College's [*Programme Monitoring and Evaluation Policy*](#), and the TORs of Boards contained in Part 2 of the [QAM](#), indicate who has access to what data. The Data Protection suite of policies, available in section 10 of the [QAM](#), detail the security of information, and how access requests are managed. Responsibility for management of information systems is set out in the College's [*Information Systems Policy*](#). The principle is that IICP College gathers and retains adequate and sufficient, but not excessive, information to support its monitoring and assessment practices. This information is recorded on standardised reporting forms, principally the APQR, which are made available to relevant Boards and Committees. Terms of Reference of College Boards indicate the requirement to report and the requirements to consider and act upon reports.

The key policies governing Information and Data Management are contained in Part 9 of the College's [QAM](#). This Part of the QAM addresses the principles, processes and procedures for data use as well as the collection, analyses and use of relevant information for monitoring and review of programmes and other activities.

The principles, processes and procedures for data use are governed by the following policies:

- [*Policy 9.1 IICP College's Public Information Policy*](#)
- [*Policy 9.2 IICP College Information Systems Policy*](#)

The collection, analyses and use of relevant information for monitoring and review of programmes and other activities are governed by the following policies:

- [*Policy 9.3 IICP College New Programmes Policy*](#)
- [*Policy 9.4 IICP College Monitoring and Evaluation Policy*](#)
- [*Policy 9.5 IICP College Programme Review and Revalidation*](#)
- [*Policy 9.6 IICP College Reviewing the Effectiveness of Quality Assurance: Institutional Review*](#)

The key policies governing data protection are:

- [Policy 10.1 Data Protection Policy](#)
- [Policy 10.2 Data Protection Processing Principles](#)
- [Policy 10.3 Data Management and Retention Policy and Data Retention Schedule](#)
- [Policy 10.4 Data Protection. Subject Access Request \(SAR\) Policy](#)
- [Policy 10.5 Data Breach Policy](#)
- [Policy 10.6 Webpage Privacy and Cookie Notice](#)
- [Policy 10.7 Your Right of Access to Personal Information held by IICP College](#)

The key policies regarding the use of relevant information for the effective management of programmes and other activities are:

- [Policy 2.2 IICP College's Quality and Governance Framework; \(ii\) Governance](#)
- [Policy 2.4 IICP College's Quality and Governance Framework; \(iv\) Business Continuity, Resilience & Risk Management](#)
- [Policy 2.5 Terms of Reference of Board of Directors](#)
- [Policy 2.6 Terms of Reference of Advisory Board](#)
- [Policy 2.7 Terms of Reference of Academic Council](#)
- [Policy 2.8 Terms of Reference of Senior Management Team](#)
- [Policy 2.9 Terms of Reference of Programme Boards](#)
- [Policy 9.4 IICP College Monitoring and Evaluation Policy](#)

From a governance perspective, a set of key performance data and summary statements on developments in the areas of academic provision and supports, engagement activities administration and staffing are collated by the Programme Board and published in its Annual Programme Quality Report, which is considered by the Academic Council. Financial information, including audited accounts, are considered by the SMT, and submitted to the Board for their approval.

In general, the Annual Programme Quality Reports, set out in [Policy 9.4 IICP College Monitoring and Evaluation Policy](#), provide the information required for Programme Monitoring and Review on an annual basis. These reports also provide the annual data required for 5-yearly Programme Review and revalidation.

Under the College's [*Information Systems Policy*](#), information management is the specific responsibility of the Registrar. The Senior Management Team has responsibility for the overall management of Information Systems in relation to the College.

Data Protection

IICP College's Data Protection suite of policies attend to the safety, security, and appropriateness of information systems, and the systematic and secure maintenance and destruction of records. Part 10: Data Protection details the data protection requirements in place in the College. These have been reviewed and rewritten in order to ensure compliance with GDPR.

The College also has in place a policy to assist learners to comply with their Data Protection responsibilities when processing personal data for their assessments: [*Policy 3.8 Data Protection in Assessments*](#).

During this reporting period a range of policies were developed to ensure that all staff were supported in managing and responding to Data Protection requirements, and were appropriately informed on issues of cyber threats and good practice in online communication. These are available internally and include, centrally

IICP College - Data Protection policy

IICP College - Right to disconnect policy

IICP College - Use of Company IT Systems policy

IICP College - Internet Usage policy

IICP College - E-mail Usage policy

IICP College - Use of Office and Mobile Phones policy

IICP College - Social Media Usage policy

IICP College - Intellectual Property Rights policy

IICP College - Professional Conduct Behaviour Policy

IICP College - IT User Security Policy

7.0 Public Information and Communication

The core policies governing what is published about validated programmes are as follows:

- [*Policy 1.3 Access, Transfer and Progression Strategy and Policy.*](#)

This policy identifies the required information provision by the College in order to comply with QQI's Policy re-statement on Access, Transfer and Progression.

- [*Policy 9.1 IICP College's Public Information Policy*](#)

This policy details the information published for the public, for learners prior to enrolment on programmes, and for learners enrolled on programmes.

These policies place responsibility on the College to provide information to the public, applicants and learners regarding the College's activities, including programmes and their selection criteria, the intended learning outcomes of these programmes, the qualifications they award, the teaching, learning and assessment procedures used, and the teaching and learning opportunities.

- [*Policy 9.1 IICP College's Public Information Policy*](#)

This policy sets out the standards for the provision of public information and the manner in which it quality assures that provision. The standards that IICP College sets for its public information is that it is factual, honest, transparent, and addresses the needs of multiple stakeholders.

This policy describes the manner in which IICP College assures the accuracy of its information. Each item must have a designated author and reviewer. All information must comply with QQI and Professional body requirements. All out of date information must be removed.

IICP College provides a wide range of public information on its [website](#), which is the primary information source for stakeholders. This information includes a Course Description section, allowing prospective students to obtain the current approved specifications for programmes. It also includes a [Privacy Statement](#) which identifies the personal data gathered by the College, the lawful basis for its collection, and the use put to it by the College.

IICP College makes available a range of policies related to the governance, management and quality assurance activities of the College, including academic regulations and policies. The [QAM](#) is published on the College website. This means that it is readily available to internal and external stakeholders, as well as the public, including prospective learners, other training institutes, and professional bodies. At the level of governance and management, information is easily accessible on legal status and decision-making structures in Part 2 of the [QAM](#). The College's Strategic Plan is published and available Part 1 of the [QAM](#).

The commitment to publish QA procedures is clearly stated in the QAM, in [Policy 2.3. IICP College's Quality and Governance Framework; \(iii\) Documented approach to Quality Assurance](#). The presentation of policies is also governed by this Policy. This requires that policies are accessible and clearly written. Each policy contains separate sections, which tend to be of different value and interest to different audiences. Procedures are kept separate, and provide specific steps to utilising the policy.

Public Information on Professional Accreditation is available for each programme on the public website, and for many potential applicants this is a decisive factor in programme choice. Where Continuing Education courses lead to a professional qualification given either in addition to the academic award, or, in some cases, as the only certification, the awarding body and certification offered are clearly indicated, as are any relevant application mechanisms and subsequent professional requirements.

The College takes considerable care to ensure that it provides accurate information in relation to workloads, fees and costs of its programmes. This is particularly important in relation to professional accreditation requirements such as personal therapy and supervision. Where additional workloads and/or costs are incurred, this is recorded in Programme Fees as "Additional Course Requirements and Costs".

8.0 Monitoring and Periodic Review

The principal policies governing Monitoring and Periodic Review are contained in Part 9 of the QAM. These policies are:

- [Policy 9.4 IICP College Monitoring and Evaluation Policy](#)
- [Policy 9.5 IICP College Programme Review and Revalidation](#)

- [Policy 9.6 IICP College Reviewing the Effectiveness of Quality Assurance: Institutional Review](#)

The processes described in these policies are intertwined. Data, reflections and action plans at monitoring level feed into Programme Review and Institutional Reviews. Monitoring process in turn are shaped by Programme and Institutional Review, in order that they are better equipped to capture and analyse high quality, relevant information.

The Programme Monitoring Policy sets out purposes, responsibilities, processes, outcomes and oversight of monitoring. The Role descriptions, contained in [Policy 2.2](#) and TOR of Boards, expand on specific responsibilities in this regard. Monitoring processes incorporate feedback into quality enhancement actions or activities. Programme Boards and Roles have the responsibility and authority to act upon monitoring results within their area of responsibility, and to report this as appropriate. The Registrar, acting in consultation with the SMT where appropriate, reviews and acts upon reports from other bodies, as well as overseeing the appropriateness and effectiveness of implantation of change processes within programmes.

Self-Evaluation occurs both annually and as part of the Programme Review cycle conducted every five years. Annual monitoring involves quality reporting from programmes to the Senior Management Team and the Academic Council. This is a reporting process based on the requirements for Programmatic Review data collection, analysis and reflection.

Programme Review and Revalidation draw heavily on QQI Core Validation Guidelines and current Programme Review Manual. The programme review process, with inputs from experts and stakeholders (internal and external), involves the production of a self-evaluation report (SER). The self-evaluation comprises a critical evaluation of all aspects of each programme being reviewed - its strategy, learning outcomes, modules, assessment, resources etc. Review of the SER by external peers results in a Programmatic Review Report which includes a set of conditions and recommendations. The College then provides a response to this report.

Institutional Review provides an opportunity to evaluate the quality of provision of education, training and research, and the effectiveness of quality assurance activities, to ensure they are fit for purpose. The procedure involves a self-evaluation of the effectiveness of QA process, an

external team providing reflection and feedback on the effectiveness of the procedures, as well as advice on enhancement.

The procedures set out clear objectives for programme reviews and have regard to QQI's validation procedures. Its institutional/provider review procedure include a self-evaluation approach that is suitable for its provision and that can be applied consistently in reviews.

The TOR of Programme Boards and the Academic Council require self-evaluation based on quantitative and qualitative data, in particular learner feedback.

9.0 Details of Arrangements with Third Parties

9.1 Arrangements with PRSBs, Awarding Bodies, QA Bodies

Type of arrangement	Total Number
PRSBs	1
Awarding bodies	1
QA bodies	1

1. Type of arrangement	QA body
Name of body:	Quality and Qualifications Ireland

Programme titles and links to publications	<ul style="list-style-type: none"> • IICP College Blended Learning Report (QA Approval) • IICP College's Re-engagement Report. https://qsdocs.qqi.ie/sites/docs/ProviderDocumentsLibrary/PL03052/PRID-3052-ApprovalReport-20200206.pdf
Date of accreditation or last review	07/10/2019
Date of next review	

2. Type of arrangement	Awarding body
Name of body:	Quality and Qualifications Ireland
Programme titles and links to publications	<p>Bachelor of Science (Honours) in Integrative Counselling and Psychotherapy (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24497)</p> <p>Bachelor of Science in Integrative Counselling & Psychotherapy (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24504)</p> <p>Certificate in Cognitive Behavioural Therapy (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24150)</p> <p>Certificate in Counselling and Psychotherapeutic Studies (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG22387)</p> <p>Certificate in Improving Clinical Outcomes (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24503)</p> <p>Certificate in Suicide Postvention (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24502)</p> <p>Higher Certificate in Science in in Counselling and Psychotherapeutic Studies (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24500)</p> <p>Master of Arts in Integrative Child and Adolescent Psychotherapy (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG23700)</p> <p>Master of Arts in Pluralistic Counselling and Psychotherapy (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24148)</p> <p>Postgraduate Diploma in Arts in Integrative Child and Adolescent Psychotherapy (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG23701)</p> <p>Postgraduate Diploma in Arts in Pluralistic Counselling and Psychotherapy (https://qsearch.qqi.ie/WebPart/ProgrammeDetails?programmeCode=PG24149)</p>
Date of accreditation or last review	14/01/2021
Date of next review	14/01/2026

3. Type of arrangement	PRSB
Name of body:	Irish Association for Counselling and Psychotherapy [IACP]

Programme titles and links to publications	B.Sc (Hons) in Integrative Counselling and Psychotherapy MA in Pluralistic Counselling & Psychotherapy https://iacp.ie/register-of-accredited-courses
Date of accreditation or last review	31/01/2021
Date of next review	31/01/2022

9.2 Collaborative Provision

Type of arrangement	Total Number
Joint research degrees	0
Joint/double/multiple awards	0
Collaborative programmes	0
Franchise programmes	0
Linked providers (DABs only)	0

9.3 Articulation Agreements

Articulation agreements - Total number	0
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[Higher Education Institution]

2022

Annual Quality Report (IICP College)
PART B: INTERNAL QUALITY ASSURANCE
ENHANCEMENT & IMPACT
Reporting Period 2020-2021

PART B: INTERNAL QA SYSTEM

1.0 Quality Implementation and Developments

1.1 Strategic QA Updates

1. Mission and Objectives

IICP College's Mission Statement articulates the College's identity, and captures the key elements of the College's past and present. Its mission statement is as follows:

IICP College aims to provide training and education to the wider community of professionals and volunteers working in the caring professions. This is achieved through offering opportunities to learners, both formally and informally, that enhance personal, professional, academic and intellectual development through comprehensive training and education within the context of mental health. To achieve this aim, IICP College offers comprehensive programmes for those who wish to pursue professional and academic accreditation in the mental health services. This encompasses a multicultural and pluralistic approach with a core philosophical framework reflecting the principles and practices of an integrated method of therapy.

The Strategic Objectives in place in IICP College as recorded in our [*Strategic Plan 2018-2020*](#), are:

Strategic Area No. 1. Accreditation and Recognition.

To enhance the standing of the College as a leading Higher Education Institution for teaching and learning, research, and innovation in the field of Counselling and Psychotherapy.

Strategic Area No. 2. Access and Progression.

To enhance undergraduate and postgraduate learning through a commitment to student access and achievement and the development of knowledgeable, competent skilled, and engaged graduates prepared for a working environment in Counselling and Psychotherapy and related professions in a continually changing social context.

Strategic Area No. 3: Civic Engagement

To expand on our community and civic engagement activities, through strengthening the incentives and resources for Counselling and Psychotherapy educational growth and development in the local community.

Strategic Area No. 4: Teaching and Learning

To provide a comprehensive service to support student engagement and learning, and assist with progression to professional registration, work and employment.

2. Quality Assurance Developments

The College had a busy year during the reporting period. It began a review of its Strategic Plan; developed its organisational structure; completed a review of its undergraduate programmes and successfully applied for their revalidation; engaged with a QQI pilot for the development of QA of online learning, and prepared a validation application for an online programme as part of that engagement; reviewed a range of policies; and developed its IT infrastructure.

In summary, its activities were as follows:

Extension of Scope of Provision

- Approval of Blended Learning QA. This was approved by PAEC in September 2020.
- Preparation of QA Procedures for fully online programmes. The College was accepted for inclusion in a pilot for online learning programme. The primacy function of this exercise was to feed into the development of QAG for Online Programmes. IICP College engaged with QQI in relation to this pilot over the latter half of 2021. The revised QA and an online programme were approved by the Academic Council in September 2021, and submitted to QQI on 04/10/2021, which is within the next report period.

Validation Activity

- Revalidation of the following programmes:
 - o Bachelor of Science (Honours) in Integrative Counselling and Psychotherapy (level 8)
 - o Bachelor of Science in Integrative Counselling and Psychotherapy (level 7)
 - o Higher Certificate in Science in in Counselling and Psychotherapeutic Studies (level 6)
 - o Certificate in Counselling and Psychotherapeutic Studies (level 6)
- Validation of the following minor awards
 - o Certificate in Suicide Postvention (level 7)

- o Certificate in Improving Clinical Outcomes (level 8)

Developments in College Structure:

- The Terms of Reference of the Advisory Board were revised in April 2021 to clarify scope, membership, roles and reporting arrangements. Specifically, the revised TOR states that members are drawn from public and private higher education, and may be national or international, with a distribution that depends on the mission and needs of the College.

The Advisory Board was constituted, and its members inducted over the summer of 2021, with the first meeting held on 4th August 2021.

- An external chair was appointed to the Academic Council, its internal membership was reduced and members were inducted. Operating procedures were also reviewed to assist with managing the increase in validation activity and policy development that was occurring in the College. The first meeting of the Academic Council was held on September 11th, 2021, and was therefore outside of the reporting period.
- Regulatory Meetings were developed as a Quality Enhancement measure addressing compliance management. These meetings are described in Case Study 2.
- Review Meetings were developed as a Quality Enhancement measure addressing operational efficiency and effectiveness. It is envisaged that the Terms of Reference of Review Meetings will be finalised in the next reporting period.
- A full-time senior management post of Head of Academic Studies was established. This post was filled in September 2021.
- A full-time senior management post of General Manager was established. This post was filled in September 2021.

Policy Review and Development (including Specific Changes to QA During the Reporting Period)

- Strategic Plan. The President, in consultation with the Senior Management Team, began a review of the previous Strategic Plan and the development of a Plan that will lay out our new strategic direction. College wide consultation, led by Senior Management in Quality Assurance and Registry, will occur in the next academic year, with a view to approval and completion before the end of the next reporting period.
- Organisational Chart. The Senior Management Team, under the guidance of the Board, began to develop a revised organisational chart to capture both organisational changes and the resourcing requirements of the Strategic Plan. This Chart is due to be completed before the end of the next reporting period.
- Risk Management Procedures. These are contained in [Policy 2.4 IICP College's Quality and Governance Framework; \(iv\) Business Continuity, Resilience & Risk Management](#). The College began a review of its procedures for recording and communicating risk, in order to (i) foster engagement of all staff in the identification, management and reporting of risks and (ii) more effectively communicate the nature, extent, and mitigating strategies of each risk and (iii) track the development of risks over time. This is due to be completed in the next academic year.
- [Policy 2.6 Terms of Reference of Advisory Board](#) was revised by the Board to clarify scope, membership, roles, and reporting arrangements. This revision in particular addressed the requirements for membership to be grounded in the mission and needs of the College.
- IICP College's Quality Assurance Manual [QAM], Section 7 Research, Clinical Placement and Clinical Practice was revised to support undergraduate research. This policy revision occurred as a result of programme review of BSc Hons in Counselling and Psychotherapy. The revised policies include:
 - o [Policy 7.8 Supervision of Undergraduate Research](#)
 - o [Policy 7.1 Ethics in Research: The Research Ethics Committee](#)

- Policy revisions were also carried out to ensure internal coherence and clarity of policies. These revisions included:
 - o [Policy 6.5 Learner Disciplinary Policy](#) The text of this policy was revised to ensure a clarity between the different stages of the procedure
 - o [Policy 6.7 Dignity and Respect](#) The text of this policy was revised to include specific reference to Disciplinary Procedures.

Development of IT Infrastructure

- Following a rigorous procurement process, and the completion of a DPIA², the College engaged in an IT Maintenance Agreement with a new provider, which provided enhanced support, expertise, and security.
- The College developed and embedded its new Student Management System. This has significantly improved the College's capacity and security in managing data and communications.
- The College revised its [Privacy Statement](#) to stay abreast of changes to programmes.

3. Contribution to the Strategic Objectives of the College

Some examples of how these quality assurance developments relate to and are aligned with the institution's strategic objectives are as follows.

Strategic Area No. 1. Accreditation and Recognition.

Programme review of its undergraduate suite of programmes allowed the College to reflect on its engagement with changes and innovation in the professions. Most significantly, the College identified that over the 5-year cycle of these programmes there had been continuous development of graduate attributes in areas such as research informed practice; research and

² Data protection Impact Statement. See <https://www.dataprotection.ie/en/organisations/know-your-obligations/data-protection-impact-assessments>

analytical skills; and digital, information, and ethical literacy. Encouraged by feedback from stakeholders, the College decided to amplify these areas in its new programme, and also to ensure that these attributes of graduates were recognised by employers, and the professional community. In order to do so, the College applied for two higher level changes at revalidation: (i) migration to Science Awards Standards in addition to Counselling and Psychotherapy Awards Standards, and (ii) migration from Face to Face to Blended Learning mode of delivery.

The Programmes were successfully revalidated in April 2021. These changes had significant benefits for learners, including providing recognition of their achievements and providing teaching and learning closely aligned with developments in the profession. Strategically, these changes also provided recognition for the College as a leading Higher Education Institution for teaching and learning, research, and innovation in the field of Counselling and Psychotherapy.

Strategic Area No. 2. Access and Progression.

During this reporting period, the enhancement of the undergraduate suite of programmes was particularly significant. Wider contextual developments in the professions of counselling and psychotherapy, including its move towards statutory regulation and the pressures resulting from COVID-19, placed increased emphasis on the research capabilities and digital competence of graduates. To foster student access and progression, the College:

- Established a full-time senior management post of Head of Academic Studies. This post was filled in September 2021.
- Established a framework for ethical review of undergraduate research.
- Enhanced its provision of supervision in undergraduate research.
- Developed an induction module for undergraduate students which ensured that students had sufficient digital and research skills to engage with and benefit from their programme.
- Enhanced its online provision of student academic, writing and research supports through its development of the By-Your-Side programme.

Strategic Area No. 3: Civic Engagement

The College had in place a scholarship at Masters level, aimed at encouraging participation by the local community in higher level professional training. A review identified that due to the

growth of the College, and with its continuing geographical spread, the scholarship was not an effective way of targeting community focused resources.

As an alternative to the scholarship, the College has increased its provision of subsidised or free training to The Village Counselling Service³, which provides low-cost counselling to the Tallaght area. Many of its voluntary counsellors are students or graduates of the College. This has proved a very effective way of targeting professional development of local professionals and therapeutic provision to the community through support by the College.

Strategic Area No. 4: Teaching and Learning

In order to assist graduates with progression to professional registration, work and employment, the College has increased its emphasis throughout its undergraduate and postgraduate programmes on the areas of research, computer literacy, information literacy and inter-professional communication. The following actions have supported this approach:

- “By Your Side” online learning seminars have been expanded and developed.
- The Library system has been reviewed and enhanced.
- Moodle has been updated and enhanced.
- Undergraduate programmes have been revised to include increased emphasis on multi-disciplinary knowledge and inter-professional communication.
- Planning for the extension of its scope of provision into Teaching and Learning has commenced, in order to provide progression opportunities for graduates and to increase the College’s capacity as a higher education provider.
- Migration of undergraduate programmes to Science Awards Standards, and revision of statement of Graduate Attributes has been achieved.

In the undergraduate programme, which leads to professional recognition, the College reviewed its programme content to examine its breath and currency. Arising from this review, two new modules were developed, and validated as minor awards:

- *Certificate in Suicide Postvention* (level 7). The purpose of this minor award is to help the learner understand the complex nature of suicide bereavement, and to

³ See “The Village Counselling Service” available at <http://www.villagecounselling.ie/about.html>

introduce the learners to a range of individual and group interventions to help facilitate the healing process.

- *Certificate in Improving Clinical Outcomes* (level 8). The purpose of this minor award is to increase the capabilities of learners to monitor and evaluate the effectiveness of their clinical practice.

4. Conclusion

The College has placed considerable emphasis during the reporting period on implementing its institutional learning over the course of its strategic plan in its programmes, most significantly its undergraduate programmes. In the previous reporting period - not surprisingly, given the impact of COVID-19 and its related restrictions - the emphasis had been on Institutional capacity and resources. This academic year saw the continuing impact of COVID-19; however, the College was able to manage its consequences more smoothly and effectively. In part, this is a result of increased capacity arising from staffing additions and IT infrastructure development, but it also resulted from a growing mastery in dealing with online teaching and learning. This in turn has facilitated the College to apply successfully for the approval of its Blended Learning QA, and to make an application for approval of its online QA.

The College's achievement of successful migration of its undergraduate programmes to blended learning science programmes has been a particularly significant milestone. Although it is early days for judging its impact, the response in the professional community has been very favourable. During the next reporting period the College plans to focus on its postgraduate programmes, and to see whether similar modifications to those programmes might be beneficial.

1.2 Update on Planned QA Objectives identified in Previous AQR

1.2.1 Planned QA Objectives identified in previous AQR

The planned objectives for future reporting periods identified in the College's previous AQR arose in the main from QA events, principally reengagement. The College noted in its previous AQR that external QA events such as Reengagement and QA Approval tend to include long-term perspectives and advice on quality enhancement. Therefore, it was envisaged that some actions identified would be carried through to subsequent review periods.

However, the College has addressed most of the objectives identified for this and the next reporting period. Four QA and QE activities were identified in the last AQR for this reporting period. Considerable headway has been made on 3 of the 4 activities. These are identified in Table 2. Five QA and QE activities were identified in the last AQR for the subsequent reporting period. Considerable headway has been made on 4 of the 5 activities. These are identified in Table 3.

1. QA and QE activities identified in 2021 for this reporting period

Table 2. Summary of QA and QE activities identified in 2021 for this reporting period (2021/2022 academic year)

No	<p style="text-align: center;">Planned objectives (Previous AQR)</p> <p>Note: Include reference to the relevant section of the preceding AQR, where applicable</p> <p style="text-align: center;"><i>AQR 2020, Section 3.1, Table 5,</i></p>	<p style="text-align: center;">Update on Status</p> <p>Provide brief update on status, whether completed or in progress.</p> <p>If an action was planned in the previous AQR, but not completed, provide reasons/short reflections for the delay/non-completion.</p>
1	<p>College-wide consultation on the integration of the College's Blended Learning Strategy and Policies into the core QA Document.</p> <p>The stages are:</p> <ol style="list-style-type: none"> 1. Application for re-validation of the BA as a BL programme. 2. Bringing forward of Re-validation Panel recommendations and learning to programme boards. 3. Publish integrated document for College-wide consultation. 4. Approval by AC. 	<p>Due to its involvement in QQI Pilot for development of Online Programmes QAG, the College has delayed this objective pending the outcome of its fully online QA application. This will allow for a full integration of distance and face to face teaching and learning in its QA.</p>

	5. IICP College will develop a specific policy on quality enhancement.	
2	Review student progression policies. This will be carried out by a committee established for this purpose, to include representation from academic, financial and senior management roles.	This is complete
3	IICP College will revise APQRs to reflect changes in QQI's reporting requirements. This will be carried out following submission of the College's first AQR in March 2021.	Due to the pressures of COVID-19 this item has not yet been addressed.
4	Appointment of an external Chair of the AC	This is complete

Planned Objective 1 College-wide consultation on the integration of the College's Blended Learning Strategy and Policies into to the core QA Document

IICP College successfully completed its revalidation of its undergraduate suite of programmes as Blended Learning in April 2021. In May 2021 QQI opened a pilot for development of QA Guidelines for fully online programmes. The College was successful in its application for inclusion in this pilot. The College developed its BL QA policies to ensure applicability in a fully online environment. These were approved by the Academic Council in September 2021. Subsequently the College submitted to QQI these QA as well as an application for validation of a fully online programme (a level 6 20 credit programme entitled "Certificate in Counselling and Psychotherapy"). Rather than carry out an integration of its BL QA, the College is waiting for the outcome of its fully online QA to allow for a full integration of distance and face to face teaching and learning in its QA.

Planned Objective 2 Review student progression policies

Over the reporting period the College has tracked student and staff feedback on the effectiveness of these policies. Tracking occurred through Academic and Registry departments, as well as through Review meetings, and a summary is presented monthly to the Senior Management Team.

The findings of the review indicated that the policies were working well. However, the review highlighted the challenging personal circumstances often experienced by students having difficulty with progression. This brought to the fore some administrative and procedural steps that could usefully be included. These included:

1. Ensuring that individual students considering withdrawing or deferring were provided with opportunities to discuss their personal circumstances and the implications of these steps with a member of the academic team.
2. Providing a key staff member in Registry to provide information and guidance on the procedure.

As can be seen, in order to enhance the quality of practices relating to progression we have focused on the person of the student, their individual circumstances and providing a safe space to speak and explore consequences. We have not changed our policies.

Planned Objective 3 IICP College will revise APQRs to reflect changes in QQI's reporting requirements.

Due to the pressures of COVID-19 this item has not yet been addressed. The College will attend to this objective in the next reporting period.

Planned Objective 4 Appointment of an external Chair of the AC

An External Chair was appointed to the Academic Council by the Board of Directors in August 2021. The first meeting of the Academic Council with external chair occurred in September 2021

2. QA and QE activities identified in 2021 for the subsequent reporting period

Table 3. QA and QE activities identified in 2021 for the subsequent reporting period (2021/2022)

No	Planned objectives (Previous AQR) Note: Include reference to the relevant section of the preceding AQR, where applicable <i>AQR 2020, Section 3.1, Table 5.</i>	Update on Status Provide brief update on status, whether completed or in progress. If an action was planned in the previous AQR, but not completed, provide reasons/short reflections for the delay/non-completion.
1	The enhancement of the College's QA website to include learner friendly diagrams of the different policies, and how they interrelate	The College website is being developed to include a "FAQ" section. The College has been reviewing the questions most frequently asked by students, and intends to launch a pilot in the next reporting period.

2	Establish induction processes and procedures for the Advisory Board.	Completed.
3	Review the rationale and processes in place to safeguard academic integrity.	Completed.
4	Implement fully the Student Management System.	Partially completed. The College is currently working to utilise additional functionalities provided by this system, such as a results module and the creation of a CSV file that can be automatically uploaded to QQI's QBS Certification.
5	Follow through on action plan for implementation of any policy that has not been implemented. This relates in particular to the Continuing to Practise Policy.	This policy is drafted. However, the College is awaiting further information from CORU before proceeding with implementing its Continuing to Practise Policy.

Planned Objective 1 (Reporting period 2022/2023) The enhancement of the College's QA website to include learner friendly diagrams of the different policies, and how they interrelate.

The College website is being developed to include a "FAQ" section. The College has been reviewing the questions most frequently asked by students, and intends to launch a pilot in the next reporting period. Student information on QA will be included in this website.

Planned Objective 2 (Reporting period 2022/2023) Establish induction processes and procedures for the Advisory Board.

This was carried out by the President's office during the second half of the reporting period. Members of the Advisory Board have been recruited and inducted. The first meeting of the Advisory Board occurred in August 2021.

Planned Objective 3 (Reporting period 2022/2023) Review the rationale and processes in place to safeguard academic integrity.

The College reviewed its process in place to safeguard academic integrity. This occurred over the second part of the reporting period, and coincided with the design of online QA and a fully online programme for submission to QQI.

A significant part of that review concerned detection of plagiarism. One adaptation included in its QA was the provision that online and blended learning may have programme specific QA in relation to academic integrity. This is intended to allow the inclusion of text matching software in blended and online programme validation applications.

In preparation for the implementation of this change following approval of its Online QA, the College has investigated different software for text matching, with particular reference to Data Protection Compliance.

In addition, the College continues to develop its suite of student support offerings (called “By-Your-Side”) with particular reference to fostering good academic practice.

Planned Objective 4 (Reporting period 2022/2023) Implement fully the Student Management System.

The Student Management System continues to be implemented in stages, allowing the College to take a risk minimalization approach with student data. The College is currently working to utilise additional functionalities provided by this system, such as a results module and the creation of a CSV file that can be automatically uploaded to QQI’s QBS Certification.

Planned Objective 5 (Reporting period 2022/2023) Follow through on action plan for implementation of any policy that has not been implemented. This relates in particular to the Continuing to Practise Policy.

The regulation of titles of Counsellors and Psychotherapists began in 2019 under CORU. As part of its statutory responsibility, the Registration Board for a profession establishes the Code of Professional Conduct and Ethics and standards of performance and an associated Fitness to Practise process.

The College is awaiting this information for the professions of Counselling and Psychotherapy before proceeding.

1.3 Governance and Management

1.3.1 QA Governance Meetings Schedule

Table 4. QA Governance Meetings Schedule

Body	Meeting dates
Board of Directors	6 th November 2020 4 th December 2020 26 th February 2021 14 th May 2021 9 th July 2021
Academic Council	21 st September 2021 5 th November 2020 26 th March 2021
Advisory Board	Inaugural Meeting: 4 th August 2021
Senior Management Team	9 th September 2020 10 th October 2020 19 th November 2020 12 th December 2020 7 th January 2021 11 th February 2021 11 th March 2021 16 th April 2021 13 th May 2021 17 th June 2021 14 th July 2021 12 th August 2021
Programme Boards	6 th October 2020 3 rd December 2020 4 th February 2021
Examination Boards	11 th September 2020 5 th February 2021 2 nd July 2021

Research Ethics Committee	01 April 2021 15 May 2021
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1.3.2 QA Leadership and Management Structural Developments

The following new Leadership and Management roles were established during the reporting period.

- The Board appointed an Independent Chair of the Academic Council.
- The College established a full-time senior management post of Head of Academic Studies. This post was filled in September 2021
- The College established a full-time senior management post of General Manager. This post was filled in September 2021

1.4 Internal Monitoring and Review

1.4.1 Overview of Periodic Reviews

Table 5. Overview of Periodic Reviews

Unit of review for which report has been published during reporting period	Date of completion/reason for conducting review (if not planned) or non-completion (if planned but not conducted)	Links to relevant publications
Assessment of QA Procedures for Blended Learning	10/09/2020	https://qsdocs.qqi.ie/sites/docs/ProviderDocumentsLibrary/PL03052/PRID-3052-ApprovalReport-20200206.pdf
PG24497 Bachelor of Science (Honours) in Integrative Counselling and Psychotherapy	08/04/2021	https://qsdocs.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41869_Validation_Report_PG24497_R.pdf

PG24504 Bachelor of Science in Integrative Counselling & Psychotherapy (Exit Award)	08/04/2021	https://qsdocs.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41876 Validation Report PG24497 R.pdf
PG24500 Higher Certificate in Science in Counselling and Psychotherape utic Studies (Exit Award)	08/04/2021	https://qsdocs.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41872 Validation Report PG24497 R.pdf
PG24739 Certificate in Counselling and Psychotherape utic Studies	08/04/2021	https://qsdocs.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41873 Validation Report IICP CORRECTED%20Independent%20Review%20Report%20and%20ReValidation%20IER%20.pdf
PG24502 Certificate in Suicide Postvention	08/04/2021	https://qsdocs.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41874 Validation Report IICP CORRECTED%20Independent%20Review%20Report%20and%20ReValidation%20IER%20.pdf

PG24503 Certificate in Improving Clinical Outcomes	08/04/2021	https://gsdocs.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41875_Validation_Report_IICP_CORRECTED%20Independent%20Review%20Report%20and%20ReValidation%20IER%20.pdf
Annual Monitoring Report for all programmes	September - December 2020	Annual Monitoring Reports for the following programmes are published internally: <ul style="list-style-type: none"> • Bachelor of Science (Honours) in Integrative Counselling and Psychotherapy • Bachelor of Science in Integrative Counselling and Psychotherapy • Certificate in Counselling and Psychotherapeutic Studies • Higher Certificate in Science in Counselling and Psychotherapeutic Studies • Master of Arts in Integrative Child and Adolescent Psychotherapy • Postgraduate Diploma in Arts in Integrative Child and Adolescent Psychotherapy • Master of Arts in Pluralistic Counselling and Psychotherapy • Postgraduate Diploma in Arts in Pluralistic Counselling and Psychotherapy

1.4.2 Expert Review Teams/Panels⁴ involved in IQA

(i) Expert Review Team/Panel Size and Related Processes

Table 6. Expert Review Team/Panel

	Total	Academic Schools/ Department	Professional Services/Support Unit	Approval/Review of Linked Provider	Programme Approval	Programme Review	Other
Number of review/ evaluation processes							
<i>of those:</i>							
On-site processes							
Desk reviews							
Virtual processes	7				2	4	1
Average panel size for each process type*					6	6	3

* excluding secretary if not a full panel member

⁴ QQI acknowledges that the terminology used to describe the groups of individuals that conduct peer review/evaluation varies from institution to institution.

2.0 IQA System – Enhancement and Impacts

i. Governance and Management of Quality

The College's [QAM](#), in Section 2, sets out in some detail the principles of governance as they apply to the College, and the actual structure in place in the College. This provides a documented account of the College's rationale for its governance structure. The QAM set out the governance of the College under a Board of Directors, an Academic Council, and a College President.

During this reporting period, the College implemented the structural changes resulting from reengagement. While the College successfully completed reengagement in February 2020, implementation of some of the required changes was impacted upon by COVID-19. This particularly related to the inclusion of external members on boards and committees, due to the considerable impact of COVID-19 on the Higher Education sector. This reporting period saw the completion of governance changes.

a. Academic Council

The Academic Council [AC] is established as the academic authority of the College with membership drawn principally from the academic staff, students and academic support services staff. Acting under delegated authority from the Board, it has ultimate authority and responsibility in relation to academic governance and QA. The College's Academic Council structure was revised at reengagement to include an external chair, and to reduce the number of internal staff members. This was given effect in the TOR of the Academic Council, which was approved by the Board of Directors in February 2020.

In July/ August 2021 an external Chair was appointed by the Board of Directors, and induction of Council members occurred. The first sitting of the reconstituted Academic Council occurred in September 2021.

b. Advisory Board

The Advisory Board was a new structure introduced at reengagement. Its purpose is to bring an independent, objective and external perspective to the Strategic Planning Process. The [Terms of Reference of the Advisory Board](#) were revised during the reporting period to clarify

membership, specifying that members are drawn from public and private higher education, and may be national or international.

In July/ August 2021 a range of external members were appointed to and inducted into the Advisory Board. The first sitting occurred in August 2021.

c. Organisational Structure

The summer of 2021 provided a period of time for the College to reflect on its organisational structure. This was a timely opportunity, given the developments that had occurred in the College over the previous academic years - in particular the approval of its QA of Blended Learning, the validation of a range of Blended Learning programmes and the validation of its undergraduate programmes as Science Awards. Two new leadership roles were established to drive and consolidate these changes: a full-time leadership role of Head of Academic Studies, and a full time General Manager.

The College has begun a review of its organisational structure in tandem with its review of its Strategic Plan. It is expected that both these reviews will be completed during the next reporting period.

i. Programmes of Education and Training

a. Validation Events

This has been a busy year for validation events in the College. As stated in section 1.1.3 (Contribution to the Strategic Objectives of the College) the College's undergraduate suite of programmes was revalidated as Blended Learning Science awards. This is a significant development for the College community, providing recognition for graduate achievements particularly in the areas of research, digital and information literacy, and cross-disciplinary competence.

The recognition provided by the validation process was of considerable value to the College's reflections on quality enhancement and strategic direction. In its report, the Panel stated:

“The Independent Panel offers a commendation to IICP for the high value placed on continual enhancement, which is reflected within its comprehensive programme review

report. The documentation submitted to the Independent Panel by IICP reflected a depth of capacity to critically self-evaluate among the programme team. Further, the dialogue between the Independent Panel and provider representatives during the site visit was at all times open and constructive in tone⁵

This provided valuable encouragement to the College team to drive further with its plans for development.

In May 2021 the College application for inclusion in a QQI pilot validation of fully online programmes was accepted. One of the purposes of this pilot was to develop QA Guidelines for Online Programmes. The College subsequently revised its Blended Learning QA to address fully online delivery, and developed a validation application for its level 6 20 credit Certificate programme. This application was approved by the Academic Council and submitted to QQI in the next reporting period.

b. Student data

This has also been a busy year in training activities. Student numbers in all major programmes have held steady when compared with previous years, and the general trend is one of increasing enrolments. The College also offers Minor and Special Purpose Awards, which in general have demonstrated a similar increase in student numbers.

1. Student enrolments and awards.

The numbers of students enrolled in core programmes over the last three years is as follows.

Table 8. Enrolments in BA: A three-year comparison

Year	Number Enrolled on Programme
2018	There were 126 learners enrolled on the Degree Programme in 2018.
2019	There were 102 learners enrolled on the Degree Programme in 2019.

⁵ See “Independent Panel Report on a Provider’s Programme Review” available at https://qsdocs.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41875_Validation_Report_IICP_CORRECTED%20Independent%20Review%20Report%20and%20ReValidation%20IER%20.pdf page 3

2020	There were 120 learners enrolled on the Degree Programme in 2020.
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Table 9. Enrolments in Masters in Pluralistic Counselling and Psychotherapy: A three-year comparison

Year	Number Enrolled on Programme
2018	There were 13 learners enrolled on the Programme in 2018.
2019	There were 17 learners enrolled on the Programme in 2019.
2020	There were 27 learners enrolled in 2020

Table 10. Enrolments in Masters in Integrative Child & Adolescent Psychotherapy: A three-year comparison

Year	Number Enrolled on Programme
2018	There were 21 learners enrolled on the Programme in 2018.
2019	There were 21 learners enrolled on the Programme in 2019.
2020	There were 18 learners enrolled in 2020

IICP College delivers a range of programmes leading to QQI awards, including major, minor and special purpose awards. Overall, the number of awards demonstrates a significant increase in 2020.

Table 11. Number of QQI Awards per year over a three year period

Year	Number of Awards
2018	193
2019	155
2020	260

For comparative purposes, numbers of awards since the College began as a QQI provider are as follows. This signifies the growth that the college has experienced, throughout its existence and in particular in the last few years.

Table 12. Number of QQI Awards per year over the College's history

Year	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Number of awards (total)	10	78	148	174	119	73	239	193	155	260

This trend towards growth in student numbers, indicated by both enrolment and awards data, has significant impact on strategic planning. As can be seen from this report, there has been an increase in staffing and resources in order to manage this trend.

i. Profile of students

In addition to student numbers, the characteristics of students studying in the College programmes is of considerable importance in strategic planning. The College tracks student characteristics for each programme, in particular gender, age, academic and professional qualifications on entry, and geographical location. At programme level, this data impacts on programme design and resource planning - for example, the high proportion of mature applicants to the undergraduate programme has influenced a significant increase in student supports in academic writing. But this data is also important at College level. For example, the increased geographical spread of students - from locally based to nationally based - impacted on the decision to apply for approval of Blended Learning QA.

One particularly interesting trend emerging in the profile of students is the tendency for IICP students to be older than national averages⁶. This occurs across all core programmes and NFQ levels, and is particularly marked at undergraduate level. This occurs even with a comparison against Health and Social Care programmes, where students tend to be older than national averages.

Table 13. Comparison of age range of students in IICP College and national postgraduate programmes

Age range	Level 9 programmes (national)	Level 9 programmes in Health and Social Care	IICP College Masters in C&A N= 18	IICP College Masters in Pluralistic Counselling and Psychotherapy (n= 27)
50+	7.9%	8.5	28%	37%
40 - 49	16.1%	19.8	38.5%	33%
30 - 39	25.5%	33	28%	30%
20 - 29	50.5%	38.7	5.5%	

⁶ Higher Education Authority [HEA] "Key Facts and Figures 2020/2021", available at <https://hea.ie/statistics/data-for-download-and-visualisations/enrolments/key-facts-figures-2020-2021/>

Table 14. Comparison of age range of students in IICP College and national undergraduate programmes

Age range	Level 8 programmes (national)	Level 8 programmes in Health and Social Care (national)	IICP College Level 8
50+	2.3%	2.0%	16%
40 - 49	4.7%	5.3%	40%
30 - 39	6.9%	8.4%	31%
20 - 29	58.5%	61.9%	13%
Under 20	27.6	22.4%	0%

The marked difference in age profile between IICP College students and students nationally is not so surprising when seen in the context of the disciplinary profile of the College. Psychotherapy tends to be a second profession⁷, with students seeking a qualification either as a change of career, or as a career development opportunity. The British Association for Counselling and Psychotherapy's [BACP] response to the UK government's Select Committee on Innovation, Universities and Skills⁸ states that 65% of the membership applying for accreditation as counsellors or psychotherapists were already graduates in non-counselling/psychotherapy disciplines, such as teaching, social work and nursing. Indeed, the European Association of Psychotherapy's [EAP] normal qualification route is from undergraduate training in the human sciences, rather than specifically from a counselling qualification. However, the main route of entry to the College's professional body, IACP, is through an accredited undergraduate programme such as the College's Level 8 programme. Therefore, many applicants have prior career pathways, and previous academic qualifications, at the same or higher levels on the national framework. The College is aware that, for these students, professional and academic progression are not well aligned, and intends to investigate creating different progression routes for these cohorts in the next reporting period.

ii. Staff Recruitment, Management and Development

⁷ Aldridge, Sally. (2014) *A Short Introduction to Counselling*. London: Sage

⁸ Available at <https://publications.parliament.uk/pa/cm200708/cmselect/cmdius/187/187we12.htm>

As stated in section 1.1.3, three new posts have been put in place

- The College has created a full-time leadership position of Head of Academic Studies.
- The College has created a full-time leadership position of General Manager
- The College has created a full-time position of Academic Technology Lead

iii. Teaching, Learning and Assessment

a. Induction Module

The College has developed an induction module for those entering its undergraduate programmes. In addition to introducing learners to the programme and the College, the module provides opportunities for learners to self-evaluate their digital skills, and to develop competence in using computer-based applications required for engagement with the programme. This module is carried out by learners prior to the commencement of the programme.

b. Data Analytics

A major development over this reporting year was the development of an institutional strategy on the use of learning analytics in teaching and learning. This is available in the College's QAM ([Policy 1.5 IICP College Learning Analytics Code of Practice and Strategy](#)).

Drawing heavily on the resources provided by the National Forum⁹, the College embedded its strategy in a Code of Practice, intended to ensure transparency regarding what data is collected and to what use it would be put.

Currently, the College only uses descriptive analytics. These provide a range of useful data, particularly in relation to student engagement and the effectiveness of resources. The use of Moodle attendance data, for example, has allowed timely interventions with students whose progression might be affected by their non-attendance. This is highly significant in this professional programme, where registration with professional accrediting body requires minimum attendance levels.

⁹ ORLA (Online Resource for Learning Analytics) is the National Forum's open-access, online library of guides and manuals, covering key topics relating to learning analytics. It is available here <https://www.teachingandlearning.ie/our-priorities/student-success/online-resource-for-learning-analytics-orla/>

c. Assessment

Encouraged by the Panel who reviewed the QA of Blended Learning the College considered what additional attention needed to be given to academic integrity, and to managing any possibility of academic misconduct, in an online and blended learning environment. In preparation for the application for validation of a fully online programme, the QA of blended learning was reviewed to ensure its applicability in a fully online context. Part of this revision resulted in the inclusion in [Policy 11.3: Technology-Enabled Assessment Policy](#) of section 4.7.2.4, which states that assessments in Online and Blended Learning programmes may have in place additional rules and regulations in relation to Academic Integrity that are programme specific. The design team for the fully online certificate programme included in the assessment strategy a requirement for students to submit their assignments to the College's plagiarism software, Ouriginal, and draw down a plagiarism report to be submitted with their assignment.

i. Supports and resources for learners

a. Induction Module

As described above (Section 2, iv Teaching, Learning and Assessment), an induction module has been developed for the undergraduate programmes. The College intends to develop a similar induction for its masters programmes in the next reporting period.

b. By-Your-side

The College continues to develop its suite of student support offerings (called "By-Your-Side"). These cover a range of topics, including:

- o Resources for completing formative work
- o Fostering good academic practice,
- o Personal care and reflexivity
- o Referencing literature
- o Skills practice
- o Clinical Practice requirements
- o Progression and readiness to practise
- o Student care

During the restrictions in place for the reporting period, these sessions were provided online, allowing for both synchronous and asynchronous delivery

ii. Information and Data Management

a. *Student Information System*

Following reengagement, the College decided to implement a student management / information system to assist it to store, manage, analyse and distribute information safely, securely and efficiently. The College has worked with its provider over the reporting period and has achieved considerable success. Application, progression and fees data are available in real time to the College and to the learner / applicant. Learners have a secure log in and can access letters, receipts and other correspondence related to their application and acceptance on the programme. Data and reports can be generated for governance bodies, and for planning and review purposes, with relative ease.

The College is currently working to utilise other functionalities provided by this system, such as a results module and the creation of a CSV file that can be automatically uploaded to QQI's QBS Certification system following each Board of Examiner's Meeting. Consequently, it is envisaged that the bedding down of the Student Information System will continue into the next reporting period.

Of particular relevance here is the security of the data. Consequently, as this is a work in progress, the College is working with the provider to review and update its DPIA¹⁰.

b. *Data Protection*

IICP College's Data Protection suite of policies approved at reengagement attend to the safety, security, and appropriateness of information systems, and the systematic and secure maintenance and destruction of records. During this reporting period a range of staff-focused policies were developed to ensure that all staff were supported in managing and responding to Data Protection requirements, and were appropriately informed on issues of cyber threats and good practice in online communication. These are available internally and include, centrally:

IICP College - Data Protection policy

IICP College - Right to disconnect policy

IICP College - Use of Company IT Systems policy

¹⁰ Data protection Impact Statement. See <https://www.dataprotection.ie/en/organisations/know-your-obligations/data-protection-impact-assessments>

IICP College - Internet Usage policy
IICP College - E-mail Usage policy
IICP College - Use of Office and Mobile Phones policy
IICP College - Social Media Usage policy
IICP College - Intellectual Property Rights policy
IICP College - Professional Conduct Behaviour Policy
IICP College - IT User Security Policy

A significant focus this year has been on practice in addition to policies. Policies are vital in directing behaviour but are not sufficient in managing the complex area of working safely and ethically with personal data. To this end IICP College has initiated a range of training seminars and workshops for all staff, providing spaces to explore the practical application of policies in real life contexts.

iii. Quality Assurance of Research Activities and Programmes

As described on Section 2 and in Case Study 1, the College migrated its suite of undergraduate awards in Counselling and Psychotherapy to the Science standards. The revised programmes contained increased emphasis on evidence-based practice and practice-based evidence, intended to develop graduates' competence in using counselling and psychotherapy tools and measures, as well as grounding their practice in the scholarly literature and carrying out their own research. The principal programme, which leads to professional accreditation, emphasised graduate abilities to integrate their ethical, theoretical, research and clinical knowledge and apply in clinical and research practice. It also emphasised the requirement for graduates, as accredited practitioners, to be able to account for their practice and decision making, both orally and in writing.

The College reviewed its programme-specific QA of Research in terms of how this could support the learning of this module. The final year dissertation was a particularly important vehicle for honing these graduate attributes; and research supervision and ethical review were important teaching and learning methodologies in this regard. Consequently, the College developed a specific policy on [undergraduate research supervision](#). It also extended the terms of reference of its [Research Ethics Committee](#) to cover undergraduate research.

These policies have supported the development of teaching and learning in undergraduate research. Currently the faculty are reviewing their methodologies and practices in this regard, drawing both on clinical frameworks for supervision, which are well grounded in disciplinary scholarship, and ethical review processes for research, already well developed in the College for its Masters' programmes. As the practice of teaching and learning develops, it is quite likely that the policies will need to be reviewed and update. This interaction between policies supporting teaching and learning, and teaching and learning used to critique and change policies, is a developmental cycle that the College is hoping to bed down in all its reviews of the effectiveness of its QA.

2.1 Initiatives within the Institution related to Academic Integrity

IICP College has three strands of activities relating to academic Integrity:

- Upskilling students in academic conduct and practice.
- Upskilling staff in understanding and responding to academic misconduct.
- Developing policies, procedures and practices that promote integrity and detect and respond to academic impropriety.

1. Upskilling students in academic conduct and practice.

The focus here is on providing messages and supports across College activities relating to attaining academic good practice and avoiding improper practice. Avenues for communications include:

- By Your Side student supports.
- Induction modules.
- Assignment instructions.
- Assignment declarations.

2. Upskilling staff in understanding and responding to academic misconduct

The College participates in events and webinars provided by the National Academic Integrity Network (NAIN), and by the Private College's association HECA. We also participate in National Academic Integrity Week.

3. Developing policies, procedures and practices that promote integrity and detect and respond to academic impropriety

Academic impropriety, in particular plagiarism and cheating, poses a considerable threat to the validity and integrity of academic results, and the College has in place a policy and practice framework for [fostering academic practice](#), and for [preventing, detecting and responding to academic misconduct](#) which is regularly reviewed and revised.

A planned objective for this reporting period was to review the rationale and processes in place to safeguard academic integrity (see question 1.2.1, Planned Objective 3 section 1.2.1.2). One substantial development in this reporting period has been in relation to the use of text matching

software for plagiarism detection. Traditionally, the College has not used technical applications for plagiarism detection. Following advice from the panel who considered the QA of BL, the College documented its rationale and processes in place to safeguard academic integrity in the absence of technical applications for plagiarism detection. It also undertook research to consider the range of plagiarism detection applications available, and how they might fit within the College's context.

As a result of its research, in particular during its development of Online QA, it was decided that a careful approach to including text matching software was required. Consequently, its Online QA, currently under consideration by QQI as part of its Pilot Study, includes a provision for programme specific rules and regulations in relation to Academic Integrity. The College submitted an application for validation of an online programme to QQI as part of this pilot, which included in its assessment strategy the use of text matching software. The draft QA and application for validation of the online programme were approved by the College's Academic Council in September 2021.

In preparation for this development, the College has undertaken the following activities:

1. Regulatory meetings (described in Case Study 2) have considered the Data Protection impact of the use of different text matching software.
2. Information provision on the use of plagiarism software by teachers have been developed. Information for students is in the process of being developed.
3. A pilot is being arranged to allow staff and students the opportunity to test and troubleshoot this software.

3.0 QA Improvement and Enhancement Plans for Upcoming Reporting Period

3.1 QA and QE supporting the Achievement of Strategic Objectives

Table 15. QA and QE activities for the upcoming reporting period (2021/2022)

No.	Relevant objectives Note: Include reference to the relevant section of the preceding AQR, where applicable	Planned actions and indicators <i>Note: Include details of unit responsible, and how planned action will address the relevant strategic priority and/or reengagement advice/CINNTE recommendation.</i> <i>If the institution is preparing for cyclical review, include how the planned actions will address the relevant review objective(s).</i>
1	Review of Strategic Plan	This is occurring as part of the development of our next Strategic Plan.
2	The enhancement of the College's QA website to include learner friendly diagrams of the different policies, and how they interrelate <i>(Ref AQR, 2021, Part B, section 3.1, Table 6: QA and QE activities for the subsequent reporting period)</i>	This objective was identified by IICP College in Reengagement as a quality enhancement objective, intended to increase learner support. This will now occur in conjunction with the development of IICP College's website to provide FAQ for students and prospective students <i>(Ref AQR, 2021, Part B, section 3.2.1, Table 8. Reviews planned for Next Reporting Period)</i> .
3	i. Revise QA of Blended Learning to address Online Learning ii. Submit validation application for Online Certificate in Counselling and Psychotherapy	This arises from the College's involvement in QQI's Pilot for the development of new statutory QA guidelines. It is expected that these will be considered by the Academic Council and submitted to QQI in the next reporting period.

4	Apply for Differential Validation of Masters in Pluralistic Counselling and Psychotherapy as Blended Learning Science Award	<p>This follows on from the revalidation of the undergraduate programmes as blended Learning Science awards.</p> <p>It is intended to ensure that (i) the programme continues to provide graduates with progression opportunities from undergraduate programmes, principally IICP College's BSc (Hons) in Integrative Counselling and Psychotherapy and (ii) the College has taken all reasonable steps to provide for professional recognition during a time of change to statutory recognition of the professions of counselling and psychotherapy.</p>
5	Apply for extension of scope to the disciplinary area of Teaching and Learning	<p>Planning for the extension of its scope of provision into Teaching and Learning has been identified by our Strategic Planning activities, in order to provide progression opportunities for graduates and to increase the College's capacity as a higher education provider.</p>
6	Review of Organisational structure	<p>This has been identified by our Strategic Planning activities as necessary in order to ensure that college structures keep pace with its development.</p>
7	Mid-term review of the QAM	<p>Policies in the QAM are due for review in 2025. While some policies are reviewed during the period of the QAM following operational or regulatory developments, a systematic review is scheduled to occur once every 5 years. The College aims to carry out a mid-term desk-based review of all policies over the summer of 2022. This will provide an information base for its next cycle of policy reviews in 2024/2025.</p>
8	Implement fully the Student Management System. <i>(Ref AQR, 2021, Part B, section 3.1, Table 6: QA and QE activities for the subsequent reporting period)</i>	<p>This is partially completed. However, the College is working to utilise other functionalities provided by this system, such as a results module and the creation of a CSV file.</p>
9	Follow through on action plan for implementation of any policy that has not been implemented. This relates in particular to the Continuing to Practise Policy.	<p>The regulation of titles of Counsellors and Psychotherapists began in 2019 under CORU. As part of its statutory responsibility, the Registration Board for</p>

	<i>(Ref AQR, 2021, Part B, section 3.1, Table 6: QA and QE activities for the subsequent reporting period)</i>	a profession establishes the Code of Professional Conduct and Ethics and standards of performance and an associated Fitness to Practise process. The College is awaiting this information for the professions of Counselling and Psychotherapy before proceeding.
10	<p>Annual Monitoring Reports for the following programmes:</p> <ul style="list-style-type: none"> • Bachelor of Science (Honours) in Integrative Counselling and Psychotherapy • Bachelor of Science in Integrative Counselling and Psychotherapy • Certificate in Counselling and Psychotherapeutic Studies • Higher Certificate in Science in Counselling and Psychotherapeutic Studies • Master of Arts in Integrative Child and Adolescent Psychotherapy • Postgraduate Diploma in Arts in Integrative Child and Adolescent Psychotherapy • Master of Arts in Pluralistic Counselling and Psychotherapy • Postgraduate Diploma in Arts in Pluralistic Counselling and Psychotherapy 	These reviews occur annually.
11	Carry out an independent audit of Data Protection compliance by the College.	Data protection compliance audits are invaluable in assessing the College's current state of data protection compliance. This objective was identified as an enhancement in Regulatory Meetings, described in case study 2.

3.2 Reviews planned for Upcoming Reporting Periods

3.2.1 Reviews planned for Next Reporting Period

Table 16. Reviews planned for Upcoming Reporting Periods (2022/2023)

Unit to be reviewed	Date of planned review	Date of last review
Five-year Review and Revalidation of the Masters of and Postgraduate Diploma in Arts in Integrative Child and Adolescent Psychotherapy	Q2/Q3 2022	2018
Carry out an independent audit of Data Protection compliance by the college.	Q3 / Q4 2022	2018
Develop a Postgraduate Diploma for human science graduates intending to enter the professions of counselling and psychotherapy, and apply for validation.	Q3/ Q4 2022	
Review of possibilities for European Professional Accreditation for undergraduate and postgraduate programmes with European Association of Psychotherapy [EAP]	Q3 / Q4 2022	
Service Delivery • Student Management System	Q3 2022	
Annual Monitoring Reports for the following programmes: <ul style="list-style-type: none"> • Bachelor of Science (Honours) in Integrative Counselling and Psychotherapy • Bachelor of Science in Integrative Counselling and Psychotherapy • Certificate in Counselling and Psychotherapeutic Studies • Higher Certificate in Science in Counselling and Psychotherapeutic Studies 	November 2021	November 2020

<ul style="list-style-type: none"> • Master of Arts in Integrative Child and Adolescent Psychotherapy • Postgraduate Diploma in Arts in Integrative Child and Adolescent Psychotherapy • Master of Arts in Pluralistic Counselling and Psychotherapy • Postgraduate Diploma in Arts in Pluralistic Counselling and Psychotherapy 		
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3.2.2 Reviews planned beyond Next Reporting Period

Table 17. Reviews planned beyond Next Reporting Period (2023/2024 and beyond)

Unit to be reviewed	Date of planned review	Date of last review
Develop a Postgraduate programme for professional recognition with EAP	2023	
<p>Annual Monitoring Reports for the following programmes:</p> <ul style="list-style-type: none"> • Bachelor of Science (Honours) in Integrative Counselling and Psychotherapy • Bachelor of Science in Integrative Counselling and Psychotherapy • Certificate in Counselling and Psychotherapeutic Studies • Higher Certificate in Science in Counselling and Psychotherapeutic Studies • Master of Arts in Integrative Child and Adolescent Psychotherapy • Postgraduate Diploma in Arts in Integrative Child and Adolescent Psychotherapy • Master of Arts in Pluralistic Counselling and Psychotherapy • Postgraduate Diploma in Arts in Pluralistic Counselling and Psychotherapy 	November 2023	November 2022

4.0 Additional Themes and Case Studies

Case Study 1

Topic. Utilising feedback to inform programme development: The Revalidation of Undergraduate suite of programmes in Integrative Counselling and Psychotherapy.

This is an account of a revalidation carried out by the College of its undergraduate suite of programmes in Counselling and Psychotherapy, with particular reference to the inclusion of the Science awards Standards in a Counselling and Psychotherapy programme. This case study sets out why and how the College approached this in its revalidation process.

1. Identifying feedback informed programme changes

The College practice is to start its five-yearly Programme Reviews with two major sources of data: stakeholder feedback and programme data. This has been refined over the last few years to include a wider range of stakeholders and data. However, the same principle continues to apply: review includes key stakeholder perspectives and also a desk-based review of key data measures. Together, these data sources present a comprehensive picture of the programmes under review and their changes over the 5-year period, providing the basis for the review team to develop a deep understanding of what needs to be done and what could be done to enhance the programme.

The College reviewed its suite of undergraduate programmes in Counselling and Psychotherapy in 2020/2021. Feedback from multiple sources identified the programmes as rigorous, challenging and interesting; and as compliant with accrediting body requirements (QQI and the professional body, IACP). In general, the programme was experienced by students, teachers, professionals and employers as providing appropriate education and training for a level 8 award. Feedback identified that change to some modules was needed, recognition that additional content was required in order to address the increasing complexity of professional therapeutic practice.

Associated with this was a wondering at the increase in expectations and workloads of students over the five-year period. Over the time period of the review, more work needed to be done to achieve the same qualification. Interestingly, at the same time suggestions for change from all sources involved increasing the programme workload rather than decreasing it. The module

changes identified were most significantly additions to the curriculum rather than removals. The need for teaching and learning to support student development as clinical practitioners, and the growing complexity of this field, were consistent themes. However, there was a questioning about the recognition achieved, particularly in the context of pending statutory recognition of title.

The desk-based review of the programme was carried out by the review team. It looked both internally at the changes that had occurred in the programme over the previous 5 years, and externally at evolving disciplinary standards. This review paid particular attention to contextual factors influencing programme design, such as developments in discipline-specific knowledge, discourses within professional and regulatory bodies, and scholarship in teaching and learning. The review team noted the increased emphasis in the programme over the previous 5 years on evidence informed clinical practice and developing research knowledge, skills and competence. This, to a great extent, explained the increase in workload noted by the students: however, it also noted the increased contextual requirements for clinical practitioners to be well versed in specific areas.

The review team identified the following as requiring increased emphasis:

- Information literacy;
- Digital literacy;
- Developing research informed practice;
- Contributing to scholarly conversations and furthering the profession: Carrying out academic research;
- Evidencing effectiveness: Carrying out service, outcome and process evaluations;
- Critical engagement with scholarship;
- Research to practice knowledge sharing - that is the inclusion of scholarly literature in clinic practice;
- Practice to research knowledge sharing - that is using practice knowledge to shape research agendas.

At this point a dilemma was emerging. Expectations of accredited practitioners were increasing, requiring greater knowledge skills and competence, while the students were also identifying an increased workload for the same qualifications. An implicit question from students was how do

we communicate to the public (employers, professional bodies, and also clients and prospective clients) this increased learning?

The review team began with revising the statement of graduate competencies for the revised programme, taking into account the additional emphasis of the programme over the five-year review period and the changes that would be made to the revised programme. The graduate attributes provided a composite picture of what graduates would look like, what they could do, and how they would approach their professional practice. The team developed a representation of the graduate's identity as scholar-practitioner, described by Charles McClintock¹¹ as "an ideal of professional excellence grounded in theory and research, informed by experimental knowledge, and motivated by personal values, political commitments, and ethical conduct" (p. 393). The practitioner-scholar teaching and learning model attends to the practical application of scholarly knowledge, a guiding principle of the programme.

The next step in the College's design process (see figure 1) was to articulate the Programme Learning Outcomes [PLOs]. Initially this is a somewhat tentative step, guiding a mapping against the appropriate awards standards, and the PLOs are in turn revised by the mapping process. The awards standards always used in this programme are Counselling and Psychotherapy¹². However, the picture of the programme beginning to emerge was of a programme that was consistent with the Science Awards Standards¹³ as well as those of Counselling and Psychotherapy. A preliminary mapping against the Science standards indicated a good fit.

The next step was to design the stages - where each module fitted within the programme. Then, the module descriptor was devised for each module, including credit allocation, content, learning outcomes and assessments. Rather than being a staged process, the team moved between programme design and module design, to ensure the coherence of the programme as well as a balancing of the workload for students. The team paid particular attention to feedback from and consultation with programme staff. As a design for each module emerged, the module learning outcomes [MLOs] were mapped against the PLOs and the Counselling and

¹¹ McClintock, C. (2004). Scholar practitioner model. In A. DiStefano, K. E. Rudestam, & R. J. Silverman (Eds.), *Encyclopedia of distributed learning* (pp. 393-397). Thousand Oaks, CA: SAGE.

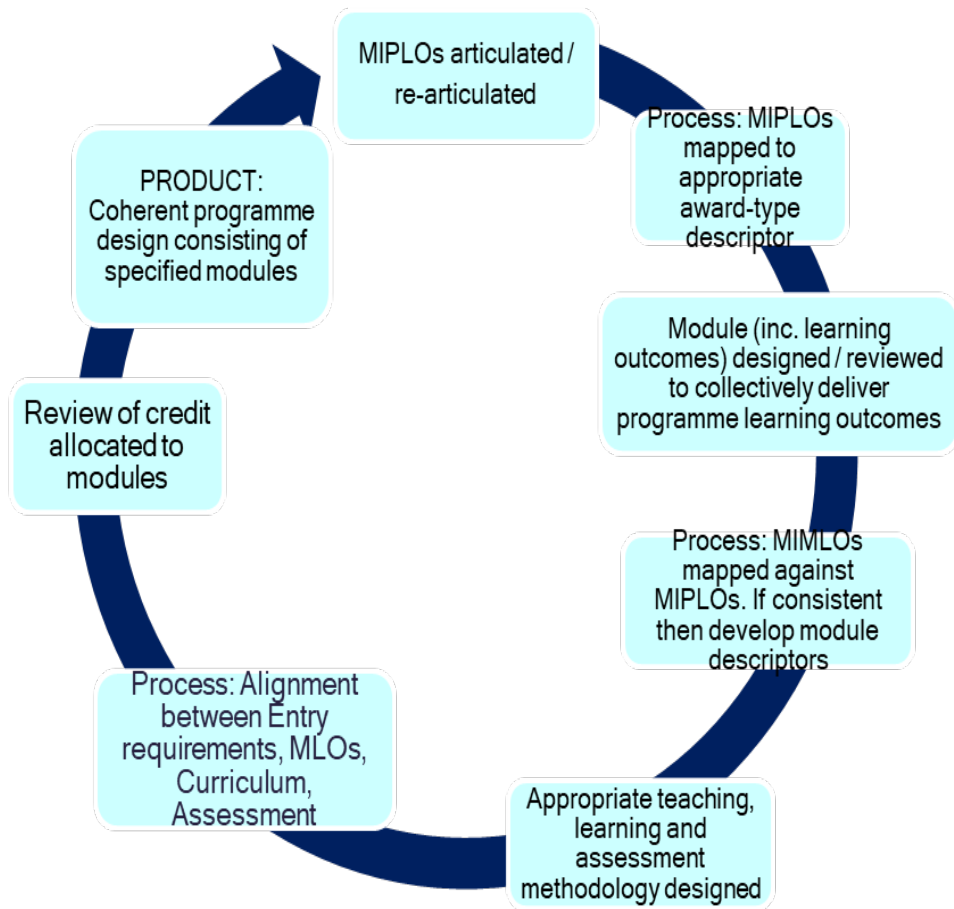
¹² QQI (2014). Awards Standards - Counselling and Psychotherapy <https://www.qqi.ie/Publications/Publications/Counselling%20and%20Psychotherapy%20-%20QQI%20Award%20Standards%202014.pdf>

¹³ QQI (2014). Awards Standards - Science <https://www.qqi.ie/Publications/Publications/Science%20>

Psychotherapy Awards Standards. An extra step the team engaged in was to map each module's MLOs against the Science Awards Standards. Interestingly, gaps in addressing both awards standards provided the review team with food for thought on possible gaps in teaching and learning. One example is in relation to the ethics of research. Both sets of awards standards include, at level 8, a requirement for graduates to be able to manage the ethics of practice. In the science standards this is particularly evident in relation to research practice. Whereas the programme already had a framework for assessing ethical practice in both clinical and research domains, it had a supervisory structure in the clinical domain which fostered the identification and management of ethical dilemmas that might arise. It did not have an equivalent process in the research domain. A resolution involved extending the scope of the Research Ethics Committee to the undergraduate programme. This not only assisted students to include management of ethical issues in their research design, it also fostered an ethical mindedness in students, seeing ethics as interwoven with methodology in their design process.

This provided a very tentative design for programmes and modules.

Figure 1. Framework for Programme Design and Review



The design, mapping and documentation process occurred over a period of about a year. The resulting programme was documented in the Programme Validation Descriptor¹⁴. It included a mapping of the PLOs against the Counselling and Psychotherapy Awards Standards and against the Science Awards Standards. This showed that the programme as a whole delivered both sets of awards standards. It also included in the module documentation a mapping of MLOs against both sets of standards. This showed that each module contributed to both sets of standards.

However, before presenting the revised programme to internal governance bodies one final step was required: the College needed to document its rationale for the use of the Science Awards Standards. In deciding on the need for this step, the College drew on a Panel Report to QQI regarding a Programme Validation of NCI's BSc Hons in Accounting & Finance¹⁵. This validation application arose from a programmatic review of the BA (Hons) Accounting & the BA (Hons) Financial Services. The panel decided that they were satisfied that the programme was sufficiently different to other programmes in the sector that offer a BA award, and that the Science standards were appropriate. To make their case for the Science award designation, the panel required that the programme documentation was reviewed to demonstrate (i) how each module learning outcome contributed to the programme learning outcome and (ii) the rationale that the programme team used to decide on the use of the Science standards.

Subsequently, the Programme Review, the Programme Revalidation document and the Rationale for the use of the Science Standards was approved internally, and submitted to QQI. The programme was successfully revalidated in April 2021. The College was heartened at the commendations of the panel in relation to this initiative¹⁶:

- Foresight in mapping the programme to the Science Awards Standards in terms of future accreditation requirements and professional expectations of graduates

¹⁴ This is available through the QQI website at [https://www.qqi.ie/Articles/Pages/Application-for-Validation-\(Levels-6-10\).aspx](https://www.qqi.ie/Articles/Pages/Application-for-Validation-(Levels-6-10).aspx)

¹⁵ Consolidated Report to QQI New Programme Validation BSc Hons in Accounting & Finance
https://www.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-34382_Panel_Reports_PG21951.pdf

¹⁶ Independent Evaluation Report (BSc in Integrative Counselling and Psychotherapy)
https://www.qqi.ie/sites/docs/PanelReportsLibrary/ProgID-41869_Validation_Report_PG24497_R.pdf

- Responsiveness to learner feedback in revisions of the programme (p. 49)

Case Study 2

Topic. Compliance Management: A Community of Practice Approach to managing risks and threats in an online environment.

Introduction

Developing systems to manage regulatory compliance was an important requirement arising out of the College's reengagement self-evaluation. This case study traces the complexities of this requirement, and details one of the solutions currently utilised by the College: Regulatory Meetings. It also identifies the value in returning to institutional self-assessments, such as that carried out for reengagement, in order to guide practice.

Reengagement was an opportunity for IICP College to reflect on its culture, processes and practices as well as its policies; to look with pride on what it had achieved but also to identify what still needed to be done, what could be done better, and what might be done to improve the quality of education for the College community. Looking back on reengagement, its most visible output was a QA Manual, a series of separate yet intertwined policies which could be critiqued and changed by the College community. Less visible, but equally important to the development of the College, is the process of critical reflexive engagement with all aspects of the College operations carried out in its Self-Assessment. This Self-Assessment was documented and submitted to QQI as part of the reengagement process. Its impact is long-lasting, and the College revisits its own self-evaluation regularly to see how it guides change and development.

The self-evaluation identified discrete areas that could be enhanced, and also identified solutions. One example was the introduction of an Advisory Board to enhance externality and expertise in strategic planning, which the College introduced this academic year. However, some of the areas identified for consideration were less discrete, less bounded and less amenable to identifiable solutions. One area identified was Regulatory Compliance Management, with the following objectives:

- Streamline effectively and systematically the identification and monitoring of the College's compliance with all applicable regulations and legislation;
- Feed into governance structures appropriate, sufficient, timely information; and
- Ensure all members of the College community were aware of their responsibilities.

These objectives were already somewhat addressed by a governance structure which clearly managed risk, and risk management procedures which provided procedures for documenting risk. However, heightened attention was noted as particularly important where (i) the disciplinary field of Counselling and Psychotherapy was changing, with statutory regulation on the horizon and (ii) developments in Data Protection regulation placed significant responsibilities not only on organisations but also on each and every staff member. As an enhancement objective associated with its provision of Blended Learning programmes, the College also aimed to increase its cybersecurity, and the knowledge and awareness of all its staff in relation to managing risks and threats in an online environment.

Uppermost in our minds at the time was Data Protection, as the College continued to implement its Data Protection policies, and also Data Protection by design. In addition, with ongoing adaptations to Covid-19 restrictions in place, different regulatory fields such as health and safety and academic adjustments were brought to the fore. The College was also venturing into new areas of activity, increasing its scope of provision to Blended Learning and its range of programmes, governed by an expanding QA framework that covered blended delivery. What distinguished these regulatory activities was the need for all staff to be aware of and manage how regulations played out in their area of activity. Recording data breaches and “near misses”, for example, required everyone to be able to identify when a data breach occurred or could have occurred, report it appropriately, and engage in mitigating activity. Designing an online learning activity required attention to accessibility, and even attending at the college campus in person required that all staff were aware of and adhered to health and safety requirements.

What also became evident as we developed our capacity in compliance management was the risks compliance issues posed to the College - not only in terms of regulatory breach but also in terms of how this would impact on the College’s reputation. As Benedek¹⁷ (2016) points out: “Under the microscope we can see that laws and regulations often generate compliance issues. But broadening our view it reveals itself that transparency, accountability, ethics are connected. Also, all the efforts start and end with reputation and public trust”. (p. 60-61)

Establishment of regulatory meetings: The College structures addressing regulatory compliance included a General Counsel, reporting to the Board and advising the Executive

¹⁷ Benedek, P. (2016). Compliance Issues in Higher Education. *Practice and Theory in Systems of Education*. 10:1 DOI 10.1515/ptse-2016-0008

Team. A new initiative, regulatory meetings, were established to foster the proactive monitoring of risk and compliance throughout the College community, and ultimately remove reactive and potentially risky decision making. These meetings are held weekly. The core members of these meetings are the General Counsel and the Quality Assurance Manager.

Initially, the focus was almost exclusively on two policy areas contained in the College's Quality Assurance Manual [QAM] that have particular relevance in an online environment: Data Protection and Risk Management.

- i. Data Protection requirements were consolidated in an Implementation Plan, allowing progress to be tracked and ultimately moved to a completed list. This provides a visible and accessible record of progress for governance bodies, and in a situation where the Data Protection Commissioner chose to carry out an audit¹⁸. It also provides a space where the Data Breach Register is developed and maintained. As the College develops, new infrastructure and resources are considered in these meetings in terms of their Data Protection impact.
- ii. Risk Management procedures identified in the QAM were operationalised. Centrally, this involved fine-tuning the manner in which the Risk Register was operated, as well as developing practices for regularly informing governance bodies about identified risks. These meetings provide a space for the College community to feed in concerns about new and emerging risks, and allow them to be documented and communicated as required.

The Developing Scope of Regulatory Meetings.

As they developed the meetings included more staff. Different areas of operation were involved in developing their own Record of Processing Activities¹⁹, in identifying and classifying risks, and in devising mitigating factors for areas of identified concern. This also allowed the meetings to draw increasingly from the wide expertise within the College - particularly in areas such as cyber-risks and industry standards and practices. In addition, these meetings helped us to identify where bringing in external expertise could be useful, and provided a forum where Cyber experts, such as the College's Data Protection consultant, could attend. External experts have

¹⁸ An 'authorised officer' of the DPC can conduct audits on notice to the data controller or processor. Audits do not have to be carried out on foot of a complaint, and indeed may be targeted at a sector or industry.

¹⁹ Record of processing activities is a written description of organisations' personal data processing. It is required of certain organisations under Art. 30 GDPR.

been significant in encouraging the College to carry out regular IT security audits and IT “Health Checks”, aimed at identifying where issues or difficulties could arise, and taking appropriate steps before they do arise.

Another development that emerged was providing a space for managers to feed in questions and concerns about practice. This addresses an emerging recognition that compliance is at times not a black and white affair, and can be about achieving an appropriate balance between fulfilling the College’s mission and compliance risk management objectives. Somewhat akin to an ethical review of research, these meetings are developing to provide a consultative space for considering the legal, regulatory and compliance impact of local decisions.

Record keeping of these meetings was also streamlined, so that a record of decision-making processes is available where required. This allows those involved in decision-making to review the decisions they have made, as well as providing a contemporary account should legal or regulatory proceedings arise.

These meetings have become not only a source of policy development, but also a conduit for identifying training needs and rolling out training in areas with regulatory impact, in particular in high-risk areas such as Data Protection and cybersecurity. They have also become a significant arena for the pooling of internal and external knowledge and expertise in dealing with complex regulatory areas.

Conclusion

Instead of solely addressing compliance, these meetings have become an area where risk can be managed by a community of practitioners. They provide a space where regulatory and compliance issues identified in practice can be articulated, and a response considered, prior to action. They embed regulatory compliance and risk management in the College’s culture so it is part of everyone’s jobs and all stakeholders support the concept. This in turn minimises the risk of reputational damage and monetary and other penalties caused by compliance issues. Perhaps most significantly, they encourage a sense of individual compliance as fostering the greater good, and space for individuals to consider and discuss their approach.

