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## QQI REVIEW



A focused review of Dublin Business School

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# 1. INTRODUCTION

As set out in QQI's *Policy for Cyclical Review of Higher Education Institutions*, QQI may conduct a focused review of a provider's QA procedures from time to time, as it considers appropriate, or in response to concerns that have come to its attention in relation to the implementation and effectiveness of a provider's QA procedures<sup>1</sup>. To support this process, QQI has established *Procedures for Focused Reviews on the Implementation and Effectiveness of Provider QA Procedures*<sup>2</sup>.

A focused review was initiated by QQI of the processes and activities specific to the withdrawal by Dublin Business School (DBS) of its application to CORU for the approval of two QQI validated programmes<sup>3</sup> in Applied Social Care. This led to DBS discontinuing these programmes, the subsequent cessation of QQI major awards<sup>4</sup> in Applied Social Care in DBS, and the triggering of a Protection of Enrolled Learners event. The following report represents the outcomes of the review undertaken.

## 2. OBJECTIVES OF THE REVIEW

Four core objectives were established by QQI for this focused review as follows:

- to determine that the quality assurance procedures established by DBS under Section 28 of the 2012 Act are being implemented, are appropriate and fit for purpose in relation to (i) the management of professional programme accreditation processes and (ii) the assessment and standards of programmes with specific reference to practice placements.
- to evaluate the effectiveness of the documented QA policies and procedures in place to support the provision of these programmes in DBS. This will include a review of the procedures in place for managing the specific requirements and accreditation processes of Professional Statutory Regulatory Bodies (PSRBs).
- to evaluate the learner experience by assessing the information communicated to learners and other stakeholders regarding programmes they are enrolled on, including any expectations of professional accreditation, and determine if the information published is clear, accurate, objective, up to date and easily accessible.
- to confirm if (i) the directions previously issued by QQI in relation to the effectiveness of DBS's QA procedures were complied with following the reengagement process (see Appendix A) and (ii) the corrective actions required have now been undertaken with regard to the management of professional programme accreditation processes and / or practice placements.

Within the context of the objectives of the review, the review team was also asked to consider the following areas:

- A. Access, transfer and progression pathways for learners enrolled on QQI validated programmes in DBS that also require dual professional accreditation, to ensure entry routes are in line with the validation conditions for the programmes. This will include, but is not limited to, procedures for

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1 The statutory basis for focused reviews is set out in Section 34(1)(b) of the [Qualifications and Quality Assurance \(Education and Training\) Act, 2012](#)

2 [QQI \(2017\), Procedures for Focused Reviews on the Implementation and Effectiveness of Provider QA Procedures](#)

3 QQI, in accordance with its statutory responsibility, has an ex-ante programme validation process, meaning, in this context, it does not include conditions regarding dual accreditation with professional, statutory or regulatory bodies (PSRBs). Consequently, programmes approved ex-ante are subject to a separate process for professional accreditation by the PSRB in question.

4 They are a) Bachelor of Arts in Applied Social Care (Level 7) a 3-year full-time programme, validated in 2018; b) Bachelor of Arts in Applied Social Care (Level 7): a 4-year part-time programme, validated in 2018; and c) Bachelor of Arts (Honours) in Applied Social Care (Level 8): a 4-year full-time programme, validated in 2019. DBS continues to offer a QQI awarded Certificate in Social Care Skills.

RPL, the application of exemptions and advanced entry to programmes.

- B. Communication strategies (including timely communication with stakeholders), learner supports, and information systems in place to support students enrolled on programmes that require dual professional accreditation and / or have practice placement components attached to them.
- C. QQI programme validation criteria and procedures in relation to (i) their compatibility with professional accreditation processes and (ii) the inclusion and management of practice placements within programmes of education and training.

### 3. REVIEW TEAM

The focused review's terms of reference included an outline profile of the review team. The members appointed by QQI to the review team were:

- David Denieffe, Chair, Vice-President, Academic Affairs at South East Technological University (SETU)
- Trish O'Brien, Co-ordinating Reviewer, Director, O'BRIEN / Governance Design (OBGD)
- Ruby Cooney, Student Representative, final year student and Student Ambassador for Dublin City University (DCU).

### 4. REVIEW METHODS

The review was undertaken using a mixture of desk research and site visit. The review team was provided with a Provider Statement by DBS, and a substantial amount of supporting documentation. The review team met with representatives of DBS senior management, staff, governance, and programme teams during a site visit to the DBS campus<sup>5</sup> on 08 March 2023. During the site visit, the team also met with a group of learners who could speak about professional recognition and practice placement experiences.

## 5. REVIEW OUTCOMES AGAINST OBJECTIVES OF REVIEW

### 5.1 Evaluation of the implementation and effectiveness of DBS's procedures in relation to the management of professional programme accreditation processes and practice placements (Objectives 1 and 2) (Special consideration areas a and c)

As indicated by objectives 1 and 2, the role of the review team was to review the effectiveness of DBS's quality assurance procedures in the context of professional programme accreditation processes and practice placement. The review team took a quality enhancement approach to the task; engaging with DBS on the experiences that had led to the focused review and where these indicated required improvements or amendments to practice. This approach was taken in the context that DBS has re-engaged with QQI, a process that involved a thorough panel review of its quality assurance procedures; it has successfully participated in numerous validation and revalidation processes; and it has signed a memorandum of agreement for the devolution of responsibility from QQI to DBS for procedures relating to new programme validation. The college is proactive in self-evaluation and in commissioning external expertise to assist it in the continuous improvement of its quality assurance system. This all indicates that the fundamentals of DBS's quality assurance system are sound.

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5 13-14 Aungier Street, Dublin 2.

As noted in the Provider Statement submitted by DBS to this review, the college currently has ten programmes that have recognition by professional bodies (p.6). In some cases, this is in the form of the granting of exemptions (Association of Chartered Certified Accountants (ACCA) and Chartered Institute of Management Accountants (CIMA)) or access to further learning opportunities (the Law Society and Kings' Inns). In others, the relevant programme is recognised by a self-regulating body for the purpose of professional recognition (e.g., by the Psychological Society of Ireland (PSI), and the Irish Association of Counselling & Psychotherapy (IACP)). The college's first application for programme approval by the statutory regulator – CORU<sup>6</sup> – was a substantially different process to those of other PSRBs and it placed the college and its learners at a degree of risk for which it was not prepared. Whilst, therefore, this focused review was of the 'management of professional programme accreditation processes', the focus of its examination, for DBS and the review team, was largely on the specifics of the withdrawal of its application for CORU programme approval and the repercussions thereof. It should also be noted at the outset that whilst the impact of these events on learners is of primary importance, they also tested the resolve of staff and were hugely stressful. The college has commissioned its own evaluation of what took place to ensure that any future engagements of this nature benefit from greater knowledge and insight.

In reviewing documentation and in discussion with DBS, the review team was conscious of using the *QQI Core Statutory QA Guidelines* as a framework for that engagement. This aligns with the basis upon which DBS has developed and is currently implementing its quality assurance policies and procedures. DBS's Provider Statement, and the discussion arising during the site visit, led to attention being placed on its procedures and practices for the governance and management of quality (Guideline 1), as these relate to professional programme accreditation processes and practice placement. In addition, commentary is provided below on access, transfer and progression (Guideline 3), teaching and learning (Guideline 5), and other parties involved in education and training (Guideline 10). The section concludes with observations on QQI's programme validation criteria and procedures.

### 5.1.1 Governance and management (Guideline 1)

#### **Management oversight of professional programme accreditation processes:**

From a management perspective, the college identified that it had previously devolved responsibility for engagement with professional bodies to programme staff, in order to facilitate 'experts speaking with experts' (Provider Statement, p.4). It followed the same route with the college's interaction with CORU in advance of submitting its programmes for approval. As a result, while the application was reviewed by the Registrar's Office for completeness, a formal process was not invoked; this perhaps also broke the link with the senior leadership team, of which the Registrar is a member. The college has addressed this and will now provide this oversight centrally through the Registrar's Office. In doing so, there are two dimensions that the review team would strongly encourage the college to consider. The first is the impact on specific roles by centralising the oversight function. The college should ensure documented roles and responsibilities for subject-matter input, as well as quality assurance management of professional, statutory and regulatory body engagement, are revised. The second, is to consider whether the Registrar's Office, keeping in mind future planned applications to CORU, needs additional resource supports to fulfil this role on behalf of the college. It is noted that the college intends on engaging external input from specialists prior to any future applications to CORU, but these engagements also require central management and resources.

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<sup>6</sup> A key function of CORU, in accordance with its statutory responsibility, is to 'approve' education and training programmes that have already commenced delivery for the professions that they regulate. It does not approve programmes ex ante nor does it 'recognise', 'accredit' or 'validate' programmes. [CORU \(2016\). Programme Information Guidelines for Education Providers](#)

As referenced above, the Registrar is a member of the senior leadership team. The review team met with this group during the site visit. The review team considers that this group, in the context of the college pursuing new initiatives in the future – including programme approval by CORU – needs to affirm its corporate responsibility for ensuring that the college has prepared itself appropriately. This includes assuring itself, as an entity, that the relevant part of the college leading the management of the initiative has the support and resources required to do so successfully. The review team consider that the college's risk register could provide the trigger for this level of senior management attention.

The application to CORU for programme approval was not included in the DBS corporate risk register (Provider Statement, p.9), but by any measure, it was a development that the college was pursuing that had uncertain outcomes. The fact that the implications of failing to achieve CORU approval were not considered at senior leadership team level, suggests that the college may be compartmentalising programme risks within its governance system in a manner that is obscuring their importance at a corporate level. It is recommended, therefore, that the college takes a holistic look at:

- how it is populating the risk register at a corporate level;
- the treatment of risk by the Quality Enhancement and Risk Management Committee and how this informs the corporate risk register;
- the documented responsibilities for the oversight of risk at College Board, Academic Board, committee, and management levels.

#### **Risk assessment and crises management:**

As referenced above, the nature of this statutory programme approval process is inherently uncertain for a provider applying. Unfortunately, the college now has an acute awareness of the risk involved and will be carefully monitoring this activity in the future. In addition to using tools such as the risk register to assist with the management and governance of this uncertainty, it is also recommended that the college formally documents alternative strategies as part of a standard risk assessment process and in the event that a future application for approval is unsuccessful. Early engagement with QQI on these contingency plans would also be important and may help inter alia to ensure that the Protection of Enrolled Learners arrangements in place are appropriate to a programme in the context of learners seeking alternative professional recognition of their learning.

On a more general but related note, the college has now amassed experience in managing a crisis. Whilst the nature of crises means that often lessons are learned in hindsight, they can still be applied to potential future contexts. In particular, it is important that the college documents essential protocols to be implemented in circumstances where attention can be easily diverted towards the source of the issue arising. A point of contention between DBS and QQI is that the college did not communicate to QQI the withdrawal of its application to CORU. For DBS, QQI was not a priority concern at this time; it considered that the possibility of it not being successful in its application had been discussed during the validation event and that the next steps had already been agreed<sup>7</sup>. Taking into consideration the overall circumstances, the multitude of interests to be dealt with, and in accepting DBS's rationale, it is not difficult to see how this arose. It is recommended that DBS ensures that communication with QQI is addressed as a priority in the future when any unanticipated issues arise relating to the programmes it awards, and that this is included in a crisis management protocol.

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<sup>7</sup> This references Special Condition 3 of the *Independent Panel Report on an Application for Validation of a Programme of Education and Training for the BA (Hons) in Applied Social Care*: 'In the event that proposals for significant amendments to the programme's curriculum arise from DBS's engagement with CORU, DBS should amend its procedures for approval of programme changes. A key element of this to be that a report on the proposed amendments to the programme curriculum be commissioned from an external subject matter expert, independent of DBS. The key findings of this report to be a determination if the proposed amendments fall within the powers of the Academic Board to implement or if a full re-validation is required. Such policy and procedure to be incorporated into the Quality Handbook.'



### **Governance oversight of professional programme accreditation processes:**

DBS has a governance system overseeing the quality of its education and training activities. The Academic Board, which delegates responsibilities to a series of sub-committees, has an independent chairperson and a second external member. To date, the Academic Board has not had an approval role on matters relating to professional, statutory and regulatory bodies (PSRBs) and would not necessarily have been aware of applications to professional bodies. Based on the college's track record of engagement with PSRBs prior to the submission of its application to CORU, this is perhaps not altogether surprising. To address this, the college is now developing a revised approval process for the governance of submissions to PSRBs. The decision making within this governance process will be informed, where appropriate, by the evaluation of an external panel of experts of the suitability of the submission (Provider Statement, p.31). It is also recommended that the annual academic plan, overseen by the Academic Board, includes these anticipated events.

The college conducted a review of the Academic Board's sub-committee structure in advance of the issues that arose and are the subject of this report. The sub-committee structure includes a Programme Approval Sub-Committee (PASC), a Quality Enhancement and Risk Management Committee (QERM) and a series of other committees relating to, for example, admissions and research. The outcomes of this review are now being looked at through the prism of professional, statutory and regulatory body interaction and terms of reference will need to be amended as the college incorporates professional recognition responsibilities into the work of the PASC, the QERM, and the Academic Board.

#### **5.1.2 Access, transfer and progression pathways (Guideline 3)**

The college confirmed its access, transfer, and progression (ATP) policies and procedures in its Provider Statement and during the site visit. Where specific arrangements apply to programmes with professional recognition, these are captured in the programme document; as was the case for its applied social care programmes.

Applications for ATP, including recognition of prior learning, are managed first by the admissions office and then in conjunction with the Academic Director. The relevant quality assurance procedures are followed to ensure that exemptions are only provided as appropriate and don't impact upon the professional recognition of that learner's achievement. In applying advanced entry, a mapping process is carried out by a subject matter expert and the learning completed, granting of credit, and outcome of any exemption granted, is recorded. The college noted in its Provider Statement that only a small number of learners have been admitted to PSRB programmes via advanced entry in the last five years (p. 53).

#### **5.1.3 Teaching and Learning (Guideline 5)**

Learning off-campus is covered by the Core Statutory QA Guidelines in section 5.4 and it is a focus of programme validation; including that *practice placement and work-based phases are provided with the same rigour and attentiveness as other elements* (QOI Policies and criteria for validation of programmes of education and training, p. 33). DBS provided a detailed overview of how it manages the teaching and learning relating to professional programmes. As expectations around practice placement were a substantial issue in its engagement with CORU on its Applied Social Care application, the college engaged a subject-matter expert, eligible to be registered with CORU, to review all placements following the decision to withdraw its submission for programme approval. The review concluded 'that the placements across DBS programmes are well maintained and structured for the success of the students and the requirements of the industry' (Provider Statement, p.26). The review also confirmed that the placement coordinators and programme teams have strong systems in place for monitoring placements.

The review team met with students to discuss information provision regarding professional recognition (addressed in 5.2 below) and experiences of practice placement. Overall, learners saw the value of the concept of practice placement, but some issues were raised. It was also notable, that whilst the college provides information on placement through multiple forms, e.g., via the Moodle system, via a Placement Handbook etc. some learners expressed feeling uninformed. This was a mixture of students accepting that information is probably available if they looked for it, and others feeling that there isn't enough clarity and notice of requirements. Apart from this, certain themes were repeated in discussion. Some students felt overwhelmed by the experience of work placement (particularly voiced by those undertaking work placement in an unpredictable clinical environment); a lack of available mentoring for students in managing their work placement experiences (distinct from the personal counselling that some students are required to undertake) was raised; and a lack of connection between the college and the work placement provider, as well as varying degrees of understanding on the part of the organisations providing placements of their purpose and responsibilities, was articulated.

It should be noted that some of these factors were attributed by students to the bereavement of a staff member who drove the coordination and supervision of practice placement. The college is no doubt also recovering from this circumstance on both personal and professional levels. It is recommended that the college considers the supports in place for practice placements in the context of this feedback, and, in particular, the mentoring provision it can make available for students to support them in navigating placements that can often be challenging. This would assist it in providing internal and external assurance that learners are *well cared for and safe* while participating in programmes (QQI *Policies and criteria for validation of programmes of education and training*, 17.11(j)).

#### **5.1.4 Other parties involved in education and training (Guideline 10)**

Engagement with regulators, academic and professional, can be complex, particularly when regulation is evolving. In this context, discussion with other higher education institutions on developing understandings and practice in satisfying those requirements can be beneficial in gauging how those standards will be met by the sector. The college has acknowledged that it could have utilised its social care practitioner network more effectively (Provider Statement, p.8) when preparing its application to CORU. The review team recommends that the college considers further how it can build on its relationships with other higher education institutions providing programmes that are, or will be, regulated by CORU. This may require a multi-layered approach, at college leadership, administration, and programme management team levels.

#### **5.1.5 QQI programme validation criteria and procedures**

In the Provider Statement submitted by DBS, it describes the process of QQI validation, including the inputs provided by members of the panel with social care expertise. During the site visit, DBS was clear that the award of academic validation did not give it an expectation of success in statutory approval by CORU; it understood this as an entirely separate process. It is also the case that at the time of validation, the finer details of evolving CORU regulations for social care were not known to the validation panel or to DBS. This prevented DBS from being able to confirm that the programme *complies with applicable statutory, regulatory, and professional body requirements* (QQI *Policies and criteria for the validation of programmes of education and training*, p. 30). However, a special condition was set by the validation panel requiring DBS to map its programme to the CORU criteria, which it did. The implementation of this action was subsequently acknowledged by the panel and formed part of the programme documentation that informed the validation of the programme by QQI.

Whilst the validation process, in itself, was not identified during the meeting with DBS as being problematical, the college identified the inherent tensions between academic validation by QQI and the subsequent process to be undertaken for CORU approval. What was of further concern to DBS were



the interactions with QQI that led to the discontinuation by DBS of its social care programmes on the basis of circumstances relating to a professional recognition application. More timely communication between DBS and QQI, as discussed earlier, may have resulted in a better negotiated outcome, and a recommendation has been made for how DBS might ensure that this communication is triggered systematically in the future.

The *QQI Policies and Criteria for the Validation of Programmes of Education and Training*, set up under section 45(3) of the 2012 Act identify a series of conditions of validation that need to be upheld. More than one of these relate to communication and information provision, e.g., 9.2.3/10 9(b) refers to the obligation of the provider to notify QQI in writing and without delay of *anything that impacts on the integrity or reputation of the programme or the corresponding QQI awards* (p.22). It has been noted earlier in this report that given the circumstances at the time of the withdrawal by DBS of its application to CORU for approval of its Applied Social Care programme, it is understood why DBS did not contact QQI earlier. The review team also notes that the conditions of validation were addressed by DBS. Procedurally, and technically, therefore, the discontinuation of the Applied Social Care programmes by DBS and the cessation of their validation by QQI can, however, be viewed within the scope of those conditions as being reasonable.

Perhaps the wider question for consideration is that of validation panels being able to agree the academic validation of programmes that require professional recognition, without having clarity of those expectations. In this case, the feedback from CORU to DBS on its application related to numbers of hours, credit weighting, and levelling of placement: essential features of the architecture of the programme, which had been approved at validation. This is not to suggest that there should be an inappropriate overlap between academic validation and professional recognition as these are separate and distinct things. Rather, it is questioning how the spirit of the *QQI Policies and Criteria for the Validation of Programmes of Education and Training*, which make several references to ensuring adherence to professional regulations, can be upheld in the interests of learners, and higher education institutions, when there is ambiguity about those regulations.

#### **5.1.6 Summary of recommendations**

The review team recommends that DBS:

- as part of its centralisation of aspects of the management and oversight of its activities with professional, statutory, or regulatory bodies, defines and documents, within its QA procedures, roles and responsibilities for professional, statutory, or regulatory body workflows, and that it considers any resourcing implications arising, notably for the Registrar's Office.
- reviews the effectiveness of its corporate and programme risk assessment, recording and mitigation processes, as they relate to the oversight of its professional, statutory, and regulatory activities.
- leading from its strengthened risk assessment and mitigation, documents alternative strategies in the event that a future application for professional, statutory, or regulatory approval is unsuccessful, and engages with QQI on these contingency plans, where appropriate.
- reviews and augments its internal and external protocols for addressing the management of crises and makes specific provision for prioritising its communication with QQI.
- includes significant matters relating to professional, statutory, and regulatory engagement in the work plan approved and overseen by the Academic Board.
- as part of its review of its committee structure, seeks to integrate the oversight of its professional, statutory, and regulatory activity proportionately and appropriately into the terms of reference of its Academic Board and committee structure.

- prioritises providing additional supports for practice placements, and, in particular, mentoring for students to support them in navigating clinical work placements.
- works to continuously improve connections between the college and the providers of practice placements.
- seeks further opportunities to engage with other higher education institutions in addressing evolving professional, statutory, or regulatory requirements and any ambiguity therein.

## 5.2 Evaluation of experience and expectations of learners based on quality of programme information communicated (Objective 3) (Special consideration area b)

Information provision to learners on the status of programmes, in the context of professional recognition, was explored during this review with both the college and the learners. In terms of QQI's *Core Statutory QA Guidelines*, this features primarily under *Public Information and Communication (Guideline 9) / Information to Learners (9.2)*. Matters relating to communication with QQI have been addressed in section 5.1.1 (Risk assessment and crises management).

The college has well-established forms of communication with prospective and enrolled learners, through its admissions staff, induction, college and student handbooks and ongoing support provided by programme teams and student services. It continuously seeks student feedback, including on information provision, has student representation in its governance system, and liaises with student representatives. Within the context of reviews of institutional quality assurance and programme validation, these systems have been previously evaluated and considered to be appropriate. The following commentary is therefore made in the specific context of professional recognition, which brings with it an additional layer of communication and information provision.

The learners met by the review team were a mix of those undertaking counselling and psychotherapy, psychology, marketing and addiction studies. Notably, counselling and psychotherapy will be moving under CORU statutory approval in due course. The experience of these learners, in terms of practice placement, was discussed in section 5.1.3. They were also asked about information provision and communication on the professional recognition of their programmes. It is fair to say that there was a mix of awareness among the learners in attendance regarding professional recognition linked to their programmes, and some expressed concerns, unprompted, about the impact of a transition to the statutory recognition of CORU.

In general then, there may be reason for DBS to reinforce its communication on the professional recognition that has been secured for its programmes. The standard required of the college's communication of programme approval by a professional body such as CORU must be exemplary. Learners are being asked to join a programme that has academic validation by one state body but has not yet secured approval from the requisite PSRB. This requires the college to go a step further than saying *it is intended that the programme will meet the criteria set by the Social Care Regulatory Board, which has been established by CORU* (Programme Handbook, p. 8). Equally, college staff who engage with the learner from initial enquiry onwards, should be able to provide clarification on the programme's professional status if asked, rather than referring them to a member of the programme team. This requires a standard text to be agreed, shared and utilised.

It should be acknowledged that the information provided on the programme status by DBS is not at odds with many other higher education institutions who are experiencing the ambiguity of professional recognition processes. Further, it is noted that DBS did not communicate to applicants or learners that the programme(s) had approval, or were guaranteed to secure approval, from CORU. However, the risks for learners are too high in this context, and information needs to be unequivocal. The college will also be

engaging with CORU again in due course in the context of other programmes that are coming under its remit, and so it is important to embed these communication principles now.

### 5.2.1 Summary of recommendations

The review team recommends that DBS:

- reinforces and strengthens communication with potential and existing learners regarding the recognition secured for their programmes.
- prepares and disseminates through all its channels clear and direct text for learners on the status of programmes for which programme approval will be sought for professional recognition purposes.
- agrees standard text responses to questions about programme approval and ensures that clarification on this can be provided by college staff interacting with learners (e.g., admissions, student services, programme team members etc.).

### 5.3 Confirmation of implementation of previous QQI directions (Objective 4)

The most recent external review by QQI of quality assurance in DBS at an institutional level was of its application for approval of blended learning in the context of QQI's *Quality Assurance Guidelines for Blended Learning Programmes*. This took place after the approval of DBS's QA procedures for the purposes of re-engagement with QQI. The outcomes of the review led to recommendations that DBS address three mandatory changes. These related to the documentation of aspects of clarification regarding academic and commercial decision-making; the communication of the status of non-accredited programmes; and the integration of completion data as a performance indicator into DBS's quality assurance procedures. The final review report (December 2019) confirmed that DBS had acted upon these mandatory changes.

This review team has no reason to revisit or question the implementation of those mandatory changes in the context of professional programme accreditation processes and / or practice placements. Following discussion with DBS on the first objective of this review (concerning management and governance), it was confirmed to the review team that those clarifications regarding academic and commercial decision-making had now been embedded in the governance system.

## 6. REVIEW TEAM RECOMMENDATIONS TO DBS

The review team has made a series of recommendations throughout this report for DBS. These are summarised below. The review team is of the view that these recommendations would strengthen the management and governance of the implementation of DBS's quality assurance procedures as they relate to its professional programme recognition processes and practice placements.

The review team recommends that DBS:

- clearly defines within its QA procedures the roles and responsibilities for professional, statutory, or regulatory body workflows and considers any resourcing implications that may arise through centralising the management of these activities through the Registrar's office.
- reviews the effectiveness of its corporate and programme risk assessment, recording and mitigation processes, as they relate to the oversight of its professional, statutory, and regulatory activities.
- leading from its strengthened risk assessment and mitigation, documents alternative strategies in the event that a future application for professional, statutory, or regulatory accreditation is

unsuccessful, and engages with QQI on these contingency plans, where appropriate.

- reviews and augments its internal and external protocols for addressing the management of crises and makes specific provision for prioritising its communication with QQI.
- includes significant matters relating to professional, statutory and regulatory engagement in the work plan approved and overseen by the Academic Board.
- as part of its review of its committee structure, seeks to integrate the oversight of its professional, statutory, and regulatory activity proportionately and appropriately into the terms of reference of its Academic Board and committee structure.
- prioritises the provision of additional supports for practice placements, and, in particular, mentoring for learners to support them in navigating clinical work placements.
- works to continuously improve connections between the college and the providers of practice placements.
- seeks further opportunities to engage with other higher education institutions in addressing evolving professional, statutory, or regulatory requirements, and any ambiguity therein.
- reinforces and strengthens communication with potential and existing learners regarding the recognition secured for their programmes.
- prepares and disseminates through all of its channels clear and direct text for learners on the status of programmes for which programme approval will be sought for professional recognition purposes.
- agrees standard text responses to questions about programme approval and ensures that clarification on this can be provided by college staff interacting with learners (e.g., admissions, student services, programme team members etc).

## **7. CONCLUDING REMARKS**

The review team wishes to thank Dublin Business School (DBS) for the quality of its engagement with this focused review. DBS assisted the process greatly in the provision of its reflections in its Provider Statement and in the preparation of comprehensive documentation for review by the team. During the site visit, discussions were open and collegial, which enabled the review team to identify recommendations that are intended to be constructive and enhancement oriented.

## **APPENDICES:**

- A. Dublin Business School: Institutional Response
- B. Terms of Reference for the focused review of the implementation and effectiveness of the QA procedures under section 34(1)(b) of the Quality and Qualifications Act 2012 at Dublin Business School
- C. Site Visit Schedule

# APPENDIX A: Dublin Business School Institutional Response

DBS thanks the independent review team for their review and report on our QA systems.

We are very pleased that the report includes explicit acknowledgments that i) the quality assurance system in place at DBS is sound (page 3), ii) the conditions of validation of the programmes in question were addressed by DBS (page 10), and iii) that DBS did not communicate to applicants or students that our Social Care programme(s) had CORU approval or were guaranteed to receive CORU approval (page 13). We welcome the comment that the information provided on programme status by DBS is not at odds with many other HEIs who are experiencing the ambiguity of professional recognition processes (page 12). We note the team's comment that CORU's statutory programme approval process is inherently uncertain for a provider applying (page 6).

We approached this process as an opportunity to learn and develop. Therefore, we welcome the recommendations made and will set out to make appropriate changes to strengthen processes relating to programmes requiring PSRB approval and/or containing work placements. We had already identified changes to processes relating to programmes requiring PSRB approval and have had these approved by our Academic Board. We will enhance our risk management as it applies to such programmes and will ensure communication with students and all stakeholders is clear and timely. A full improvement plan is being prepared and will be submitted to QQI to the agreed timelines.

Notwithstanding changes made, and to be made by DBS, to mitigate against the risk of something similar arising in future, we note that what the team refers to as 'tensions' in the respective approval processes of QQI, whose process is ex ante, and some PSRBs whose processes are ex post, remain. Our view is for as long as they remain, the matters pertaining to the DBS programmes could occur again. With reference to Section 3.4(c) of the terms of reference, DBS therefore considers that there would have been benefits for the sector had the review taken the opportunity to address the wider issue of the compatibility of different approval processes.

While the Protection of Enrolled Learners (PEL) was not within the scope of the review, some factors were noted by the panel on page 6 of the report that they say would help ensure that the PEL arrangements in place are appropriate to a programme in the context of learners seeking alternative professional recognition of their learning. DBS wishes to note that the matter pertaining to its social care programmes identified a weakness in the arrangements for PEL in place for private HEIs, whereby a third party to the arrangement - in this case a PSRB - can prevent transfer arrangements for learners to an equivalent programme in another HEI by imposing specific requirements on the recognition of prior learning after the original PEL arrangement had been made and approved as part of the programme validation process.

We thank the tertiary education monitoring and review team at QQI for the courteous and professional way they managed this process.



# APPENDIX B: Terms of Reference for the Focused Review

## Terms of Reference for the focused review of the implementation and effectiveness of the QA procedures under section 34(1)(b) of the Quality and Qualifications Act 2012 at Dublin Business School (issued 1 February 2023)

### 1. Introduction

As set out in QQI's Policy for Cyclical Review of Higher Education Institutions, QQI may conduct a focused review of a provider's QA procedures from time to time, as it considers appropriate, or in response to concerns that have come to its attention in relation to the implementation and effectiveness of a provider's QA procedures<sup>8</sup>. QQI has established [Procedures for Focused Reviews on the Implementation and Effectiveness of Provider QA Procedures](#)

A focused review is being initiated to review the processes and activities specific to the withdrawal of QQI validated programmes in Applied Social Care from the CORU accreditation and registration process in Dublin Business School (DBS). This led to the cessation of four<sup>9</sup> QQI approved programmes in Applied Social Care in DBS and the triggering of a Protection of Learners event.

This focused review will consider the management of validated programmes and their associated practice placements, the implementation of quality assurance procedures, and the monitoring of their effectiveness to ensure the requisite standards and competencies can be easily identified, mapped and fulfilled to allow for professional recognition, as well as academic validation, within DBS.

The specific objectives for the focused review of the implementation and effectiveness of a provider's QA procedures are informed by QQI's [Core Statutory Quality Assurance Guidelines](#) and [Sector Specific Quality Assurance Guidelines for Independent / Private Providers](#).

QQI will consult with the Higher Education Authority (HEA) in accordance with Section 34(4)(b) of the 2012 Act.

### 2. Context for the Review

DBS has offered programmes in Social Science since 2006; the programmes referred to in footnote 1 were validated by QQI in 2018. QQI, in accordance with its statutory responsibility, has an ex-ante programme validation process, meaning it does not include conditions regarding dual accreditation with professional, statutory or regulatory bodies (PSRBs). Consequently, programmes approved ex-ante are subject to a separate process for professional accreditation by the PSRB in question.

A review of the documentary evidence submitted by DBS for these programmes was undertaken by CORU in February 2022. CORU's observations were communicated to DBS in a letter in May 2022. QQI became aware of these observations in August 2022 through communication with DBS.

The main issues identified in the letter, and brought to QQI's attention by DBS, have led to the initiation of this focused review.

### 3. Terms of Reference for the Review

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8 The statutory basis for focused reviews is set out in Section 34(1)(b) of the [Qualifications and Quality Assurance \(Education and Training\) Act, 2012](#).

9 The programmes in question are:

A. Bachelor of Arts in Applied Social Care (Level 7): a 3-year full-time programme, validated in 2018;

B. Bachelor of Arts in Applied Social Care (Level 7): a 4-year part-time programme, validated in 2018;

C. Bachelor of Arts (Honours) in Applied Social Care (Level 8): a 4-year full-time programme, validated in 2019.

### 3.1. Purpose

The purpose of this focused review is to confirm that the QA policies and procedures in place in DBS, approved by QQI, have been fully implemented and are being managed effectively for those QQI validated programmes requiring professional recognition and accreditation.

### 3.2. Review team

**QQI will appoint an external review team to undertake this focused review.** The review team will comprise of:

- (i) A chairperson who is a senior leader in a higher education and training provider.
- (ii) A coordinating reviewer with experience and understanding of QA in the higher education sector and a familiarity with providers of similar type.
- (iii) A student representative selected from a provider of similar type.

### 3.3. Objectives of the Review

The review will focus explicitly on the implementation and effectiveness of the QA procedures in relation to the management of QQI validated programmes requiring professional recognition and accreditation, including the processes in place for seeking professional programme accreditation and the quality assurance and management of practice placements.

The objectives of the review are to:

- A. determine that the quality assurance procedures established by DBS under Section 28 of the 2012 Act are being implemented, are appropriate and fit for purpose in relation to (i) the management of professional programme accreditation processes and (ii) the assessment and standards of programmes with specific reference to practice placements.
- B. evaluate the effectiveness of the documented QA policies and procedures in place to support the provision of these programmes in DBS. This will include a review of the procedures in place for managing the specific requirements and accreditation processes of PSRBs.
- C. evaluate the learner experience by assessing the information communicated to learners and other stakeholders regarding programmes they are enrolled on, including any expectations of professional accreditation, and determine if the information published is clear, accurate, objective, up to date and easily accessible.
- D. confirm if (i) the directions previously issued by QQI in relation to the effectiveness of DBS's QA procedures were complied with following the reengagement process (see Appendix A) and (ii) the corrective actions required have now been undertaken with regard to the management of professional programme accreditation processes and / or practice placements.

### 3.4. Areas for Special Consideration by the review team

Within the context of the objectives of the review, the review team will also take special consideration of the following areas:

- A. Access, transfer and progression pathways for learners enrolled on QQI validated programmes in DBS that also require dual professional accreditation, to ensure entry routes are in line with the validation conditions for the programmes. This will include, but is not limited to, procedures for RPL, the application of exemptions and advanced entry to programmes.
- B. Communication strategies (including timely communication with stakeholders), learner supports,

and information systems in place to support students enrolled on programmes that require dual professional accreditation and / or have practice placement components attached to them.

- C. QQI programme validation criteria and procedures in relation to (i) their compatibility with professional accreditation processes and (ii) the inclusion and management of practice placements within programmes of education and training.

### 3.5. Possible Outcomes of the Review

Following its evaluation of the QA procedures in DBS, the review team will produce a report outlining its findings. Within its findings, the team may recommend that QQI issue directions to the provider in relation to the effectiveness of the provider's QA procedures.

In the interests of equity and reliability, the review team will set out in its report the grounds for each of its findings and recommendations. Where appropriate, the review team will commend the provider's QA procedures and their effectiveness.

### 3.6. Inputs to the Review

- A. QQI will make available to the review team all information, pertinent to the terms of reference, which it holds on record, e.g. documentation relating to the QA approval of DBS, programme validation reports, Annual Quality Reports and any other information held by QQI that is relevant to the review.
- B. The provider will submit a provider statement<sup>10</sup> by the agreed date to the review team.

### 3.7. Review team Report

For this review the coordinating reviewer will take responsibility for producing the report on behalf of the review team and in consultation with QQI.

The report will set out the key findings of the review team in relation to:

- (i) the implementation of QA procedures;
- (ii) the effectiveness of those quality assurance procedures, with particular reference to any areas of concern identified in the terms of reference;
- (iii) whether directions previously issued by QQI to DBS have been complied with;
- (iv) any other matters identified in the terms of reference or areas for special consideration.

Based on its findings, the review team will make recommendations to QQI regarding directions to be issued to DBS concerning the implementation and effectiveness of its quality assurance procedures.

### 3.8. Provider Response to the Review Team Report

- a) DBS will receive a copy of the draft review report and will have two weeks to comment on matters of factual accuracy contained therein.
- b) DBS will also be invited to prepare a response to the review team report. The response may

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<sup>10</sup> The Provider Statement, referred to in [Procedures for Focused Reviews on the Implementation and Effectiveness of Provider QA Procedures](#) is a self-evaluation of the implementation and effectiveness of a provider's QA procedures, to be prepared by the provider and submitted as part of the review. The Statement will be developed with reference to the ToR for the review. The Provider Statement is separate and different from the broader self-evaluation required under cyclical reviews of QA. The Provider Statement should be comprehensive and concise and no longer than 15,000 words (c. 30 pages) excluding appendices.

include a plan for the implementation of any recommendations made by the review team. That response and implementation plan will be subject to the approval of the provider's Academic Board (or equivalent) prior to submission to QQI for its consideration.

### 3.9. Consideration of the Outcomes of the Review by QQI

The review team's report, the factual accuracy confirmation (if any) and provider response (if any) will be considered by QQI's [Approvals and Reviews Committee \(ARC\)](#).

Following consideration, the ARC may:

- (i) determine that no further actions are required, or
- (ii) issue directions to DBS in relation to the effectiveness of their QA procedures.

### 3.10. Publication of Review Documentation

QQI will publish the terms of reference, the review team report, and any response to the report provided by DBS. All relevant agencies and bodies with a vested interest in DBS or its programmes, e.g. the HEA and Department of Further and Higher Education, Research, Innovation and Science (DFHERIS) will be informed of the review and its outcomes.

### 3.11. Post-Review Follow-Up

At the conclusion of the review, QQI will agree with DBS a timeline and process to follow up on any recommendations made or directions arising from the focused review report. Initial follow-up will occur not later than 12 months following the publication of the review report.

## Appendix A:

[Dublin Business School: QA Approval Report \(December 2019\)](#) (extract)

### Part 6

Mandatory Changes to QA Procedures and Specific Advice

The following proposed mandatory changes were identified at the conclusion of the site visit on 05 July 2019 by the Panel. The Panel availed of the option to defer its decision to allow DBS an opportunity to address these issues within a six-week period. The Panel reconvened on 27 August 2019 to evaluate evidence submitted by DBS in support of the proposed changes. Following an evaluation of the evidence submitted, the panel is satisfied that DBS has adequately addressed the issues set out in Section 6.1 below.

### 6.1 Proposed Mandatory Changes

- At the time of the visit, the Panel requested that the terms of reference of the Academic Board and the Board of Directors be made clear, and explicitly confirm the separation of academic and commercial decision-making. It also requested that the ultimate authority of the Academic Board for academic decision-making be confirmed. The Panel identified this as a proposed mandatory change. This has now been addressed to the satisfaction of the Panel through evidence subsequently submitted by DBS within the six-week period allocated. Modifications have been made to the Terms of Reference of both governance units, to the DBS Articles of Government, and to relevant sections of the QA Handbook.

- At the time of the visit, the Panel requested that the information communicated to learners and the public on non-accredited programmes offered by DBS be made compliant with the requirements set out in section 67 of the 2012 Act. The Panel identified this as a proposed mandatory change. This has now been addressed to the satisfaction of the Panel through evidence subsequently submitted by DBS within the six-week period allocated. The College has included on its website, offer letter, and Learner Handbook a clear statement that these programmes do not lead to awards in the NFQ and will make this same modification to the next version of its printed brochure.
- At the time of the visit, the Panel requested that DBS integrate completion data into its quality assurance procedures, including programmatic review, as a performance indicator. The Panel identified this as a proposed mandatory change. This has now been addressed to the satisfaction of the Panel through evidence subsequently submitted by DBS within the six-week period allocated. The College has modified its QA documentation to confirm that completion data will inform both programme monitoring and review. It is also engaging in research with other national parties to define the components of completion data.

## 6.2 Specific Advice

- Articulate a rationale for the proposed committee structure. In doing so, review the effectiveness of committee terms of reference, align committee titles with functional remits, and seek opportunities to simplify reporting lines.
- Consider the appointment of Programme Board Chairs who would report to the Course Directors and avoid the burden on the Course Director role that may result from the introduction of Programme Boards.
- Ensure that the changes made to governance documentation to address the Panel's proposed mandatory change are consistently represented throughout the College's QA documentation.
- Review quality assurance documentation for any references to legacy language.
- Continue to plan towards formal accreditation of all offerings, prioritising programmes of one year's duration.
- Ensure that qualifications recognised for advanced entry - accredited or otherwise – and including in articulation contexts, are subject or rigorous approval and continuous review in line with best practice and recognised European standards.
- Further consider how the College's use of completion rates can increase the effectiveness and strategic capability of its quality assurance system.
- Include further information for learners, in the College's offer letter and in its Learner Handbook, on the implications of the lack of recognition on the NFQ of its unaccredited programmes, including the extent of exemptions available for learners wishing to subsequently pursue accredited degrees at DBS.
- Ensure that agreements with other parties reflect the grievance, appeals, and disciplinary procedures that apply to these arrangements.

# APPENDIX C: Site Visit Schedule

Wednesday, 8 March 2023

Time (GMT)	Group
8.45 - 9.15	<b>Private Review Team Meeting</b>
9.15 - 9.30	<b>President and Registrar: Welcome and Introductions</b>
9.30 - 10.10	<b>Executive Team: Senior Leadership Team (SLT)</b>
	<b>Attendees</b>
	President, SLT member
	Chief Commercial Officer, SLT member
	Head of Academic Operations, SLT member
	Chief Financial Officer, SLT member
	Head of IT, SLT member
	Head of Teaching Delivery and Content Production, SLT member
	Registrar, SLT member
	Head of Student Experience, SLT member
	Academic Dean, SLT member
	Head of Strategy, Corporate Development and People, SLT member
	Assistant Registrar
	Independent Chair of the Academic Board
	Independent Member of the Academic Board, QA Expert
10.10 - 10.20	<b>Private Review Team Meeting / Break</b>
10.20 - 11.00	<b>Governance Representatives: Quality Enhancement and Risk Management Committee (QERMC) and Programme Approval Sub Committee (PASC)</b>
	<b>Attendees</b>
	Registrar, SLT member
	Assistant Registrar
	Academic Dean, SLT member
	Head of Teaching Delivery and Content Production, SLT member
	Academic Director, Computing

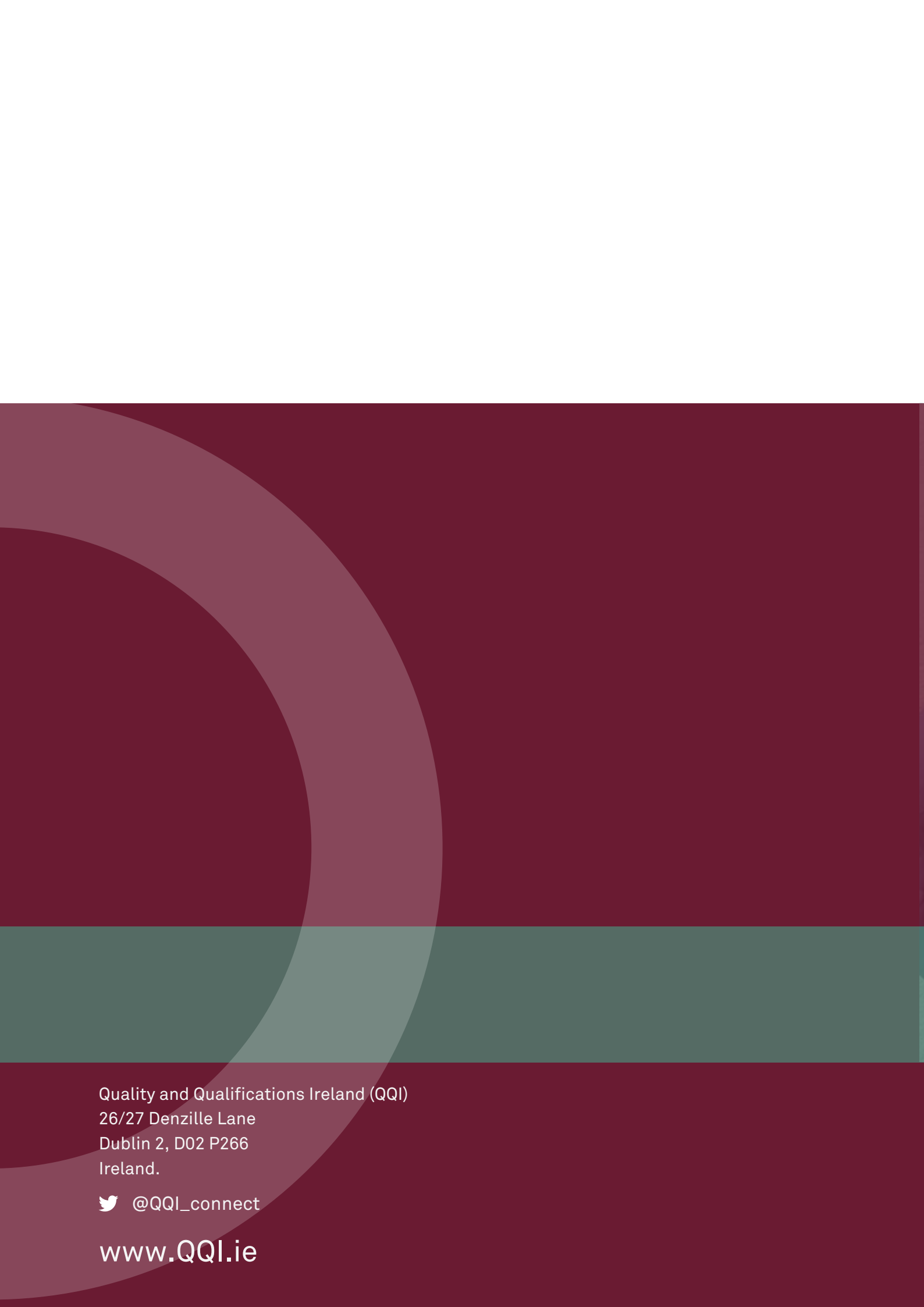


	Academic Director, Accounting and Finance
	Academic Director, Business, Marketing and Law
	Academic Director, Human and Social Sciences
	Lecturer, Placement Coordinator, Elected Member of Academic Board
	Placement Coordinator, Academic PLM for Counselling and Psychotherapy
	Independent Chair of the Academic Board
	Independent Member of the Academic Board, QA Expert
<b>11.00 - 11.15</b>	<b>Private Review Team Meeting / Break</b>
<b>11.15 - 12.00</b>	<b>Registrar's Office / QA Executive team</b>
	<b>Attendees</b>
	Registrar, SLT member
	Assistant Registrar
	Assistant Registrar
	Academic Dean, SLT member
	Academic Director, Computing
	Academic Director, Accounting and Finance
	Academic Director, Business, Marketing and Law
	Academic Director, Human and Social Sciences
	Independent Member of the Academic Board, QA Expert
<b>12.10 - 12.20</b>	<b>Private Review Team Meeting / Break</b>
<b>12.20 - 13.00</b>	<b>Programme team and Placement Coordinators</b>
	<b>Attendees</b>
	Academic Director, Business, Marketing and Law
	Assistant Academic Director, Human and Social Sciences
	PLM for MA in Addiction Studies, MSc Applied Psychology and MSc Health Psychology
	Placement and Project Coordinator for Higher Diploma in Science in Computing (and Streams) and BSc Computing
	PLM and Placement Coordinator for MA Psychoanalytic Psychotherapy
	Placement Coordinator, Academic PLM for Counselling and Psychotherapy
	Lecturer, Placement Coordinator for MSc Digital Marketing & Analytics and MSc Supply Chain Management, Elected Member of Academic Board


	Assistant Academic Director, Human and Social Sciences (Specifically for Psychotherapy Programmes)
	PLM for Bachelor of Laws (Hons)
	Lecturer and Placement & Research Project Coordinator (MSc Applied Psychology and MSc Health Psychology)
<b>13.00 - 14.00</b>	<b>Lunch</b>
<b>14.00 - 14.40</b>	<b>Communications and Student Services</b>
	<b>Attendees</b>
	Chief Commercial Officer, SLT member
	Admissions Manager
	Head of Student Experience, SLT member
	Registrar
	Assistant Registrar
	Academic Director, Business, Marketing and Law
	Assistant Academic Director, Human and Social Sciences
<b>14.40 - 14.50</b>	<b>Private Review Team Meeting</b>
<b>14.50 - 15.35</b>	<b>Learners (registered on similar programmes to Social Care e.g. Psychotherapy, Psychology and Counselling)</b>
	<b>Attendees</b>
	13 learner representatives from:
	MA in Addiction Studies
	BA (Hons) in Counselling and Psychotherapy
	MA in Psychoanalytic Psychotherapy
	MSc in Digital Marketing and Analytics
	BA (Hons) in Psychology
	MSc in Applied Psychology
	MA in Psychotherapy
<b>15.35 - 16.30</b>	<b>Private Review Team Meeting to collate initial feedback and findings</b>
<b>16.30 - 17.00</b>	<b>Final session: Executive Team: Senior Leadership Team</b>
	<i>Review team to provide initial feedback and findings.</i>
	President, SLT member
	Chief Commercial Officer, SLT member

	Head of Academic Operations, SLT member
	Chief Financial Officer, SLT member
	Head of IT, SLT member
	Head of Teaching Delivery and Content Production, SLT member
	Registrar, SLT member
	Head of Student Experience, SLT member
	Academic Dean, SLT member
	Head of Strategy, Corporate Development and People, SLT member
	Assistant Registrar





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